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EXTENSION ATTACHED

Department of the Treasury internal Revenue Service

Return of Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements.

FOR	cale	ndar year 2011 or tax year beginning		, and ending			
					A Employer identification number		
SHRENSKY FOUNDATION, INC.					52-2284925		
	•	and street (or P O box number if mail is not delivered to str	B Telephone number				
_1	07	708 BALANTRE LANE		_	301-299-47	725	
	-	town, state, and ZIP code			C If exemption application is p	pending, check here	
		OMAC, MD 20854					
G	Chec	k all that apply: Initial return		ormer public charity	D 1 Foreign organization	s, check here	
		Final return	Amended return		Foreign organizations me 2 check here and attach co	eeting the 85% test,	
	Chan	Address change	Name change		7		
"_	_	k type of organization: LX Section 501(c)(3) ection 4947(a)(1) nonexempt charitable trust	exempt private foundation Other taxable private found	ation	E If private foundation sta		
_ <u>_</u> _			nting method: X Cash	Accrual	under section 507(b)(1	., .	
		Part II, col. (c), line 16)	Other (specify)	Accidal	F If the foundation is in a under section 507(b)(1		
	-\$	1,208,008. (Part I, co		basis.)	and cooler cor(b)(r	(D), GHOOK HOLD	
P	art	Analysis of Revenue-and Expenses (The total of amounts in columns (b), (c), and (d) may not		(b) Net investment	(c) Adjusted net	(d) Disbursements	
_		necessarily equal the amounts in column (a))	expenses per books	income	íncome	for charitable purposes (cash basis only)	
	1	Contributions, gifts, grants, etc., received	650,000.		N/A	, , ,	
	2	Check In the foundation is not required to attach Sch. B		· · · · · · · · · · · · · · · · · · ·	1	·	
	3	Interest on savings and temporary cash investments				, , ,	
	4	Dividends and interest from securities	17,919.	17,919.		STATEMENT 1	
	1	a Gross rents		,	 	1,	
	Ι.	Net rental income or (loss)	-6,975.	3-4 5 ⁿ ,	, ,	050/50	
ue	"	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all 271, 285.		* *	, <u>, R</u>	#CEIVED	
Revenue	7	Passets on line 6a 2/1,200 • Capital gain net income (from Part IV, line 2)		0.		Sc	
æ	8	Net short-term capital gain	, , , ,	,	JI. 18 JI	N 0 4 2012 9	
	9	Income modifications	\$ 48 0	* *			
	10:	Gross sales less returns and allowances	777 (A. N.)		0	DENIIT	
	t	Less Cost of goods sold	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		, <u>U</u>	JULIV, Or	
	(Gross profit or (loss)				, ,	
	11	Other income	550 011		ļ	· · · · · · · · · · · · · · · · · · ·	
_	12	Total Add lines 1 through 11	660,944.	17,919.	· <u> </u>		
	13	Compensation of officers, directors, trustees, etc Other employee salaries and wages	0.	0.		0.	
	15	Pension plans, employee benefits					
S		Legal fees					
ens	l	Accounting fees STMT 2	1,589.	1,589.		0.	
Exp	ı	Other professional fees STMT 3	4,609.	4,609.		0.	
<u>×</u>	17	Interest					
trat	18	Taxes STMT 4	234.	0.		0.	
nis	19	Depreciation and depletion					
Ē	20	Occupancy					
, P	21	Travel, conferences, and meetings					
E	22	Printing and publications					
ting	23	Other expenses					
II Noperสูนญี่ผู้ผู้d Administrative Expens	24	Total operating and administrative expenses. Add lines 13 through 23	6,432.	6,198.		_	
ĵo ĵ	25	Contributions, gifts, grants paid	62,800.	0,130.		62,800.	
=	26	Total expenses and disbursements.	02,000			02,000.	
		Add lines 24 and 25	69,232.	6,198.		62,800.	
ū	27	Subtract line 26 from line 12:		· , · · · · ·		<u> </u>	
CANNED	a	Excess of revenue over expenses and disbursements	591,712.	•	·		
A	b	Net investment income (if negative, enter -0-)		11,721.	`		
<u>U</u>	C	Adjusted net income (if negative, enter -0-)	, , ,	,	N/A		
12350	-11	LHA For Paperwork Reduction Act Notice, se	e instructions.			Form 990-PF (2011)	

Fc	rm 99	90-PF (2011) SHRENSKY FOUNDATION, INC	52-228 4 925 Page			
	Part II Balance Sheets Attached schedules and amounts in the description Beginning of year			End o		
_	(a) Book Value (b) Book Value			(b) Book Value	(c) Fair Market Value	
	1	-				
	1	Savings and temporary cash investments	263,184.	269,354.	269,354.	
	3	Accounts receivable -				
		Less: allowance for doubtful accounts ▶				
	4	Pledges receivable ►				
		Less. allowance for doubtful accounts				
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other				
		disqualified persons				
	7	Other notes and loans receivable		• ,		
	1	Less: allowance for doubtful accounts	7,800.	0.	0.	
S.	8	Inventories for sale or use				
Assets	9	Prepaid expenses and deferred charges				
ğ	10a	Investments - U.S. and state government obligations				
		Investments - corporate stock STMT 6	341,086.	933,323.	937,340.	
		Investments - corporate bonds				
	1	Investments - tand, buildings, and equipment basis	, ,	· · · ,	P	
	"	Less accumulated depreciation	ľ			
	12	Investments - mortgage loans				
	13	Investments - other STMT 7	0.	1,314.	1,314.	
	1	Land, buildings, and equipment basis	^`.	1,311.	1,011.	
	' '	Less accumulated depreciation				
	15	Other assets (describe)				
	"	7				
	16	Total assets (to be completed by all filers)	612,070.	1,203,991.	1,208,008.	
	17	Accounts payable and accrued expenses			· · · · · · · · · · · · · · · · · · ·	
	18	Grants payable			, , , , , , , , , , , , , , , , , , , ,	
S	19	Deferred revenue			,	
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			1. 3	
iabi	21	Mortgages and other notes payable			**,	
_	22	Other liabilities (describe STATEMENT 8)	88.	193.		
	23	Total liabilities (add lines 17 through 22)	88.	193.	,	
		Foundations that follow SFAS 117, check here			,	
Š	l	and complete lines 24 through 26 and lines 30 and 31.				
nce	24	Unrestricted			*	
ala	25	Temporarily restricted				
9 9	26	Permanently restricted			, -	
Net Assets or Fund Balances		Foundations that do not follow SFAS 117, check here				
5		and complete lines 27 through 31.				
ţs	27	Capital stock, trust principal, or current funds	0.	0.	,	
SS	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	,	
ž.	29	Retained earnings, accumulated income, endowment, or other funds	611,982.	1,203,798.		
ž	30	Total net assets or fund balances	611,982.	1,203,798.		
	31	Total liabilities and net assets/fund balances	612,070.	1,203,991.		
_				1,203,991.		
Р	art l	Analysis of Changes in Net Assets or Fund Ba	alances			
		net assets or fund balances at beginning of year - Part II, column (a), line 3	30			
		t agree with end-of-year figure reported on prior year's return)	1	611,982.		
2 Enter amount from Part I, line 27a					591,712.	
3	Other	increases not included in line 2 (itemize) NON-TAXABLE	DISTRIBUTIONS	3	104.	
4	Add I	ines 1, 2, and 3		4	1,203,798.	
		ases not included in line 2 (itemize)		5	0.	
6	Total	net assets or fund balances at end of year (line 4 minus line 5) - Part II, coli	umn (b), line 30	6	1,203,798.	
					Form 990-PF (2011)	

62,800.

8

8 Enter qualifying distributions from Part XII, line 4

See the Part VI instructions.

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate.

	rm 990-PF (2011) SHRENSKY FOUNDATION, INC.		<u>52-2</u>				Page 4
Pa	Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 49	940(e), or 4	948 -	see i	nstr	ıctio	ns)
1a	1a Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1.	·]	4				
	Date of ruling or determination letter: (attach copy of letter if necessary-see instruction	ns)				_	
b	b Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%)	1			2	<u>34.</u>
	of Part I, line 27b						
C	c All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col.	(b). J					_
	2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		2				<u>0.</u>
3	3 Add lines 1 and 2		3			2	34.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		4				<u>0.</u>
5	,		5			2	34.
6	1 1			*			
	a 2011 estimated tax payments and 2010 overpayment credited to 2011 6a						
	b Exempt foreign organizations - tax withheld at source 6b	41.					
	c Tax paid with application for extension of time to file (Form 8868)	250.					
	d Backup withholding erroneously withheld					_	
7	7 Total credits and payments. Add lines 6a through 6d		7			2	<u>91.</u>
8			8		_		
9	·	•	9				
	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	•	10				<u>57.</u>
		Refunded ►	11				0.
	Part VII-A Statements Regarding Activities					V	N1-
1a	la During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participates any national state, or local legislation or did it participates any national state, or local legislation or did it participates any national state, or local legislation or did it participates any national state, or local legislation or did it participates any national state, or local legislation or did it participates any national state, or local legislation or did it participates any national state, or local legislation or did it participates any national state, or local legislation or did it participates any national state, or local legislation or did it participates and the state and the sta	ate or intervene	ın			res	No
	any political campaign?				1a	ļ	X
b	b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for	•			1 <u>b</u>		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials.	enals publishe	ed or			ĺ . ·	
	distributed by the foundation in connection with the activities				,		35
	c Did the foundation file Form 1120-POL for this year?				1c_		X
d	d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:	0			~*, [*]		1
	(1) On the foundation. \$ 0. (2) On foundation managers. \$	0.					
е	e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on fo	oungation			,		
•	managers. > \$ 0 .				,	1	х
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?				2		
•	If "Yes," attach a detailed description of the activities Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of i	naarnaration a			,		
3	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	incorporation, o	l		3		_x_
4.	a Did the foundation have unrelated business gross income of \$1,000 or more during the year?						X
	b If "Yes," has it filed a tax return on Form 990-T for this year?		N/	/ Z	4a 4b	 	
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		14 /		5		X
J	If "Yes," attach the statement required by General Instruction T						
6							
Ŭ	By language in the governing instrument, or						
	 By state legislation that effectively amends the governing instrument so that no mandatory directions that confine 	ct with the state	law				
	remain in the governing instrument?	or will also state			6	X	ĺ
7	Did the foundation have at least \$5,000 in assets at any time during the year?				7	X	
•	If "Yes," complete Part II, col. (c), and Part XV.				,		
82	a Enter the states to which the foundation reports or with which it is registered (see instructions)						
74	MD						
b	b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or des					1	
-	of each state as required by General Instruction G? If "No," attach explanation	, , , , , , , , , , , , , , , , , , , ,		ļ	8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 494	12(1)(5) for caler	ndar			-	
	year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes," complete Part XIV	art-rise sale.			9		X
10		addresses S'	TMT	9	10	X	

Form **990-PF** (2011)

огп	990-PF (2011) SHRENSKY FOUNDATION, INC.	52-2284	925		Page 5
Pa	art 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_		<u>X</u>
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory p	rivileges?	1		
	If "Yes," attach statement (see instructions)		12		<u> </u>
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?		13	X	
	Website address ► N/A	201 01			
14	The books are in care of LEWIS F. SHRENSKY Telephone no.				
	Located at ► 10708 BALANTRE LANE, POTOMAC, MD	ZIP+4 ► <u>20</u>	1854		$\overline{}$
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	المجأا	3.1	· / 3	
	and enter the amount of tax-exempt interest received or accrued during the year	15		/A Yes	No
16	At any time during calendar year 2011, did the foundation have an interest in or a signature or other authority over a bank,		40	162	X
	securities, or other financial account in a foreign country?		16	٠	
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of the foreign			1	,
Pi	country art VII-B Statements Regarding Activities for Which Form 4720 May Be Required		<u> </u>	!	
•	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Τ	Yes	No
1:	During the year did the foundation (either directly or indirectly):			.00	
.,		es X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)	, C 110	-	ì	
		es X No			
		es X No		,	
		es X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available		,	1	
		es X No	` -		
	(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		1		
	termination of government service, if terminating within 90 days.)	es X No		\$	
t	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations		-		
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	N/A	1b		
	Organizations relying on a current notice regarding disaster assistance check here			1. 3	
(Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected				
	before the first day of the tax year beginning in 2011?		10		<u> </u>
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			, ,	
	defined in section 4942(j)(3) or 4942(j)(5)):				
â	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	g es X No		-	
		S LAL NO	1		
	If "Yes," list the years \(\bigs_{\text{\tinct{\texi{\text{\text{\texi{\text{\text{\texi}\text{\text{\texit{\texi{\texi{\texi{\text{\texi}\texit{\texit{\texi{\texi{\texi{\texi{\texi{\texi{\texi{\texi{\te				
L	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			v	
	statement - see instructions.)	N/A	2b		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	11/11			
·	,				,
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time				
		s X No		·	
b	If "Yes," did it have excess business holdings in 2011 as a result of (1) any purchase by the foundation or disqualified persons aft	er	1	- 1	
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to d			ļ	
	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	,		, 1	
	Form 4720, to determine if the foundation had excess business holdings in 2011.)	N/A	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4a		<u>X</u>
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose	that	;	4	
	had not been removed from jeopardy before the first day of the tax year beginning in 2011?		4b		<u>X</u>
		For	т 990	-PF (2011)

	NC.		<u>52-22849</u>	<u> 25</u>	Page 6
Part VII-B Statements Regarding Activities for Whic	h Form 4720 May Be	Required (contir	nued)		
5a During the year did the foundation pay or incur any amount to:					1
(1) Carry on propaganda, or otherwise attempt to influence legislation (sec	ction 4945(e))?	Y	es 🗶 No		
(2) Influence the outcome of any specific public election (see section 4955	5); or to carry on, directly or indi			1	
any voter registration drive?	1	Y	es X No		
(3) Provide a grant to an individual for travel, study, or other similar purpo	ses?	Y ₁	es X No		
(4) Provide a grant to an organization other than a charitable, etc., organization	ation described in section				
509(a)(1), (2), or (3), or section 4940(d)(2)?		Y	es 🗓 No		
(5) Provide for any purpose other than religious, charitable, scientific, litera	ary, or educational purposes, or	for			1
the prevention of cruelty to children or animals?			es 🗶 No 🗔		,
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify	under the exceptions described	in Regulations			1
section 53,4945 or in a current notice regarding disaster assistance (see in	•	Ū	N/A	5b	
Organizations relying on a current notice regarding disaster assistance chec					
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption		ained			
expenditure responsibility for the grant?		_ , _	es 🔲 No		
If "Yes," attach the statement required by Regulations section 53.4					
6a Did the foundation, during the year, receive any funds, directly or indirectly,			1		1
a personal benefit contract?	, to pay promiums on		es X No		1
	a narcanal hanefit contract?			6b	X
b Did the foundation, during the year, pay premiums, directly or indirectly, on	a personal benefit contract?		-	00	- ^-
If "Yes" to 6b, file Form 8870			es X No		1
7a At any time during the tax year, was the foundation a party to a prohibited to		. L. Y		-	
b If Yes, did the foundation receive any proceeds or have any net income att				7b	
Part VIII Information About Officers, Directors, True Paid Employees, and Contractors	istees, Foundation Ma	anagers, Higni	y		
List all officers, directors, trustees, foundation managers and the	oir componention				
List all officers, directors, il ustees, foundation managers and the	(b) Title, and average	(c) Compensation	(d) Contributions to	(0)	Fynense
(a) Name and address	hòurs per week devoted	(If not paid,	(d) Contributions to employee benefit plans and deterred	acco	Expense unt, other
	to position	enter -0-)	compensation	alio	owances
LEWIS F. SHRENSKY	PRESIDENT/TRI	SASURER			
10708 BALANTRE LANE					•
POTOMAC, MD 20854	0.00	0.	0.		0.
BARBARA SHRENSKY	VICE PRESIDE	VT/SECRETA	RY		
10708 BALANTRE LANE					
POTOMAC, MD 20854	0.00	0.	0.		0.
2 Compensation of five highest-paid employees (other than those		enter "NONE."	7-10 00-00-00		
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans	(e)	Expense unt, other
(a) Name and address of each employee paid more than \$50,000	devoted to position	(C) Compensation	and deferred compensation	allo	wances
NONE					
		"-	-		
	_				
	- 				
7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		<u> </u>			
Total number of other employees paid over \$50,000					0

Form **990-PF** (2011)

Form 990-PF (2011) SHRENSKY FOUNDATION, INC.		2284925 Page 7
Part VIII Information About Officers, Directors, Trustees, Found Paid Employees, and Contractors (continued)	dation Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, en	ter "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		▶ 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant star number of organizations and other beneficiaries served, conferences convened, research papers pr		Expenses
	oudou, cic.	
1 N/A		
		
2		
3		
4		
		!
Part IX-B Summary of Program-Related Investments		<u></u>
Describe the two largest program-related investments made by the foundation during the tax year of	on lines 1 and 2	Amount
1 N/A	or mics i and z.	7 tinodin
N/A		
		0.
0		<u> </u>
2		
All other program-related investments. See instructions.		
3		
U		
Total, Add lines 1 through 3	>	0.
	·	

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations	, see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a		1a	0.
Ь	Average of monthly cash balances	1b	242,354.
c	Fair market value of all other assets	1c	973,455.
d	Total (add lines 1a, b, and c)	1d	1,215,809.
е	Reduction claimed for blockage or other factors reported on lines 1a and	3	
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	1,215,809.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	<u> 18,237.</u>
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,197,572.
6	Minimum investment return. Enter 5% of line 5	6	59,879.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part.)	d certain	
1	Minimum investment return from Part X, line 6	1	59,879.
2a	024		
Ь	Income tax for 2011. (This does not include the tax from Part VI.)	*	
C	Add lines 2a and 2b	2c	234.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	59,645.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	59,645.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	59,645.
P	art XII Qualifying Distributions (see instructions)	T.	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		60.000
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	62,800.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	·
3	Amounts set aside for specific charitable projects that satisfy the:		
8		3a	
	Cash distribution test (attach the required schedule)	3b	60.000
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	62,800.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment	_	^
_	income. Enter 1% of Part I, line 27b	_ 5	62.800
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	62,800.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of 4940(e) reduction of tax in those years.	jualities fo	or the section

Form **990-PF** (2011)

Part XIII Undistributed Income (see instructions)

	T	T	1	
	(a) Corpus	(b) Years prior to 2010	(c) 2010	(d) 2011
1 Distributable amount for 2011 from Part XI,	Обграз	Tears prior to 2010	2010	2011
line 7		,		59,645.
2 Undistributed income, if any, as of the end of 2011				39,043.
a Enter amount for 2010 only		,	0.	
b Total for prior years:			<u> </u>	}
b rounto prior years.	*.	0.		
3 Excess distributions carryover, if any, to 2011:		0.		
a From 2006 39,109.				
b From 2007 39,593.	-1	,]
c From 2008 20, 458.		,		
d From 2009 113,090.	-			
e From 2010 11,745.	1	,	,	
f Total of lines 3a through e	223,995.	1		
4 Qualifying distributions for 2011 from	443,333.			
Part XII, line 4: ► \$62,800.	1	· ,]
a Applied to 2010, but not more than line 2a	†		0.	
b Applied to undistributed income of prior			<u> </u>	,
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus			,	
(Election required - see instructions)	0.		^	
d Applied to 2011 distributable amount	·			59,645.
e Remaining amount distributed out of corpus	3,155.		, , , , , , , , , , , , , , , , , , , ,	39,645.
5 Excess distributions carryover applied to 2011	0.	, ,	,	
(if an amount appears in column (d), the same amount			3	0.
must be shown in column (a))	, ,	, .	, *	, , ,
6 Enter the net total of each column as indicated below:	1) _{(V}	* * *	`
& Corpus Add lines 3f, 4c, and 4e Subtract line 5	227,150.	**************************************	,	,
b Prior years' undistributed income. Subtract	, 221,130.	' '		
line 4b from line 2b	, · » * ·	o .l	,	, , ,
c Enter the amount of prior years'				
undistributed income for which a notice of				
deficiency has been issued, or on which			*	î
the section 4942(a) tax has been previously assessed	,	0.		' '
d Subtract line 6c from line 6b. Taxable	,			
amount - see instructions	``	0.	· · · · · · · · · · · · · · · · · · ·	,
e Undistributed income for 2010. Subtract line				
4a from line 2a. Taxable amount - see instr.		· ^.	0.	,
f Undistributed income for 2011, Subtract				
lines 4d and 5 from line 1. This amount must	,		`	
be distributed in 2012	, , ,			0.
7 Amounts treated as distributions out of				,
corpus to satisfy requirements imposed by		,	, , ,	
section 170(b)(1)(F) or 4942(g)(3)	0.	^		
8 Excess distributions carryover from 2006		, , ,		
not applied on line 5 or line 7	39,109.		_	
9 Excess distributions carryover to 2012.	33/103.	,		
Subtract lines 7 and 8 from line 6a	188,041.	,		
10 Analysis of line 9:			-	,
a Excess from 2007 39,593.	-	- ` `	, ,	
b Excess from 2008 20, 458.	1	. '1	*	
c Excess from 2009 113,090.		· · · · · · · · · · · · · · · · · · ·	٠ ،	•
d Excess from 2010 11,745.				` .
e Excess from 2011 3, 155.		, iš , v,		* .
		<u>_</u>		

Part XIV Private Operating F	CUDDATIONS (See II		II.A guestion 9)	N/A	2-2264925 rage ii
			177, 98001107	N/A	
1 a If the foundation has received a ruling of		, , , ,			
foundation, and the ruling is effective for			In continu	4942(J)(3) or	4942(j)(5)
b Check box to indicate whether the found	Tax year	mid ioningation describéd	Prior 3 years	4542(J)(3) UI I	1942())(3)
2 a Enter the lesser of the adjusted net	(a) 2011	(b) 2010	(c) 2009	(d) 2008	(e) Total
income from Part I or the minimum	(2) 2511	(6) 20.0	1 (6) 2000	(0) 2000	(4)
investment return from Part X for					
each year listed		-	 		
b 85% of line 2a			 		
c Qualifying distributions from Part XII,	1			ļ	
line 4 for each year listed d Amounts included in line 2c not	<u>-</u>	<u> </u>	-		
used directly for active conduct of				į	
exempt activities]	
e Qualifying distributions made directly		-			-
for active conduct of exempt activities.			İ		
Subtract line 2d from line 2c			i		
3 Complete 3a, b, or c for the					
alternative test relied upon; a "Assets" alternative test - enter;					
(1) Value of all assets	iii				
(2) Value of assets qualifying					
under section 4942(j)(3)(B)(i) b "Endowment" alternative test - enter		<u> </u>			
2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:					
(1) Total support other than gross 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)(iii)					
(3) Largest amount of support from					
an exempt organization			-		
(4) Gross investment income Part XV Supplementary Info		- 4 - 4 h i	if the formulation	b-d &E 000	ar mara in casata
Part XV Supplementary Info			ir the loundation	on nau \$5,000	or more in assets
			<u> </u>		
 Information Regarding Foundation List any managers of the foundation wh 	•	than 20/ of the total con	tributions received by	the foundation before	the close of any tay
year (but only if they have contributed n			uibuions received by	the loandation before	. the close of any tax
SEE STATEMENT 10	100				
b List any managers of the foundation wh other entity) of which the foundation ha			(or an equally large po	ortion of the ownershi	p of a partnership or
NONE	<u> </u>				
2 Information Regarding Contribution Check here ► X if the foundation of	only makes contributions	to preselected charitable	organizations and doe		
the foundation makes gifts, grants, etc.	(see instructions) to ind	ividuals or organizations i	under other conditions	, complete items 2a, t	b, c, and d.
a The name, address, and telephone num	ber of the person to who	om applications should be	addressed:		
b The form in which applications should b	e submitted and informa	ation and materials they s	hould include.		
c Any submission deadlines:					
d Any restrictions or limitations on awards	s, such as by geographic	al areas, charitable fields	kinds of institutions	or other factors:	
,	,		,		

SHRENSKY FOUNDATION

Part XV Supplementary Information (continued) Grants' and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual. Recipient Purpose of grant or show any relationship to Foundation Amount any foundation manager status of contribution Name and address (home or business) or substantial contributor recipient a Paid during the year PUBLIC CHARITY GENERAL SUPPORT MESORAH DC 10612 WOODSDALE 7,500. SILVER SPRING MD 20901 PUBLIC CHARITY GENERAL SUPPORT YESHIVAS MIR YERUSHALAYIM 5227 NEW UTRECHT AVE 7,500, BROOKLYN NY 11219 PUBLIC CHARITY GENERAL SUPPORT OSTT RABBI'S DISCRETIONARY FUND PO BOX 1227 7 800. OLNEY MD 20830-1227 PUBLIC CHARITY GENERAL SUPPORT CENTER FOR JEWISH LIVING OF NORTHERN MONTGOMERY COUNTY, INC. 10708 BALANTRE LANE 40 000. POTOMAC, MD 20854 ▶ 3a 62 800. Total b Approved for future payment NONE Total

Part XVI-A **Analysis of Income-Producing Activities**

Enter gross amounts unless otherwise indicated.		SINESS INCOME	(C) Exclu-	ed by section 512, 513, or 514	(e)
4 December 11 - 11 - 11 - 11 - 11 - 11 - 11 - 11	(a) Business	(b) Amount	sion	(d) Amount	Related or exempt function income
1 Program service revenue:	code		code	7,00000	
a					
b	1 1		 		
<u> </u>	l 1		 		
d	-				
e	_				
f	_		 		·
g Fees and contracts from government agencies			 -		
2 Membership dues and assessments	-		 		
3 Interest on savings and temporary cash	E 22100				
Investments	522100	17 010	 		
4 Dividends and interest from securities	523000	17,919.	 		
5 Net rental income or (loss) from real estate:			1 -1		
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property			 -		
7 Other investment income					
8 Gain or (loss) from sales of assets other		400			
than inventory	523000	123.	18	-7,098.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a	_				
b	1 4		 		
c					
d	_				
e	_				
12 Subtotal. Add columns (b), (d), and (e)		18,042.	1	-7,098.	0.
13 Total. Add line 12, columns (b), (d), and (e)				13	10,944.
(See worksheet in line 13 instructions to verify calculations.	.)				
Part XVI-B Relationship of Activities	s to the Accomp	lishment of Ex	empt	Purposes	
I in No.		(a) at Dark XXII A			allohmant of
Line No. Explain below how each activity for which in the foundation's exempt purposes (other the			contribu	ited importantly to the accom	pilsnment of
the foundation's exempt purposes (other th	an by providing idinus it	or such purposes).			
	- .				
					
					
					
				<u>-</u>	
					 .
		<u> </u>			
	· · · · · · · · · · · · · · · · · ·	<u></u>			
					

יט, כסווו עב	omplete the lonowing schedule.				
	(a) Name of organization	(b) Type of organiz	ation	(c) Description of relationship	
	N/A				
, - -		<u>, , , </u>			
Sign Here	penalties of perjury, I declare that I have examined leight, it is the, correct, and complete Declaration of the correct and complete Declaration of the correct of the cor			rer has any knowledge May the IR return with shows being	S discuss this the preparer ow (see instr)?
	Print/Type preparer's name	Preparer's signature	Date	Check If PTIN	
Paid Preparer	T, AOGBNALOOM Firm's name ▶ ROSENBLOOM	Haffner Hosens	Hours ot 5.1.	self- employed P0143 Firm's EIN ▶ 52-1626	
Use Only		7, ,			
	Firm's address ► 1455 RESE	ARCH BLVD, SUITE	510		

ROCKVILLE, MD (20850

Form **990-PF** (2011)

(301)762-7755

Phone no.

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

Employer identification number

SI	RENSKY FOUNDATION, INC.	52-2284925				
Organization type (check o	··					
Filers of:	Section:					
Form 990 or 990-EZ	501(c)() (enter number) organization					
	4947(a)(1) nonexempt charatable trust not treated as a private foundation					
	527 political organization					
Form 990-PF	X 501(c)(3) exempt private foundation					
	4947(a)(1) nonexempt charitable trust treated as a private foundation					
	501(c)(3) taxable private foundation					
General Rule	(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rul on filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in mo					
contributor Compi	ete Parts I and II					
For a section 501(c 509(a)(1) and 170(t	c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regular (a)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the go (a) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II.					
total contributions	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 lf this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year.						
out it must answer "No" on l	at is not covered by the General Rule and/or the Special Rules does not file Schedule B Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on Part I, the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).					

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

Name of organization.

Employer identification number

SHRENSKY FOUNDATION, INC.

52-2284925

Part I	Contributors (see instructions). Use duplicate copies of Part I	ıf addıtıonal space ıs needed	
(a) No	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	LEWIS & BARBARA SHRENSKY 10708 BALANTRE LANE POTOMAC, MD 20854	sss	Person X Payroll
(a) No	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II rf 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

Employer identification number

SHRENSKY FOUNDATION, INC.

52-2284925

Part II	Noncash Property (see instructions) Use duplicate copies of F	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. rom	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. om art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) √o. om art!	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
·		 \$	
	2		90, 990-EZ, or 990-PF) (2

Name of org	anization	· · · · · · · · · · · · · · · · · · ·	Employer identification number							
SHRENS	SKY FOUNDATION, INC.		52-2284925							
Part III	Exclusively religious, charitable, etc., ind year Complete columns (a) through (e) and the total of exclusively religious, charitable, e Use duplicate copies of Part III if addition	the following line entry. For organiza tc., contributions of \$1,000 or less f	01(c)(7), (8), or (10) organizations that total more than \$1,000 for the zations completing Part III. enter							
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held							
		(e) Transfer of g	gift							
	Transferee's name, address, a	ind 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, a	nd ZIP + 4	Relationship of transferor to transferee							
(a) No.										
(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, a	nd 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							
-										
	Transferee's name, address, ar	(e) Transfer of gi	sfer of gift Relationship of transferor to transferee							
-			Transfer of a district to a district ce							

ORM 990-PF DIVIDEND	S AND INTER	REST FROM S	ECURITIES	STATEMENT 1
OURCE	GROSS	S AMOUNT	CAPITAL GAINS DIVIDENDS	COLUMN (A) AMOUNT
DIVIDENDSSPECIAL VELLS FARGO		540. 17,502.	0. 123.	540. 17,379.
COTAL TO FM 990-PF, PART I, L	N 4	18,042.	123.	17,919.
ORM 990-PF	ACCOUNT	NG FEES		STATEMENT 2
)ESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVES MENT INCO	(C) T- ADJUSTED ME NET INCOM	
AX PREPARATION	1,589.	1,5	89.	0.
O FORM 990-PF, PG 1, LN 16B	1,589.	1,5	89.	0.
ORM 990-PF C	THER PROFES	SSIONAL FEE	S	STATEMENT 3
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVES		(D) CHARITABLE
	PER DOORD	MENT INCO	ME NET INCOM	
	4,609.		 	
		4,6	09.	E PURPOSES
FO FORM 990-PF, PG 1, LN 16C =	4,609.	4,6	09.	PURPOSES 0.
AGENCY FEES TO FORM 990-PF, PG 1, LN 16C FORM 990-PF DESCRIPTION	4,609. 4,609.	4,6	09. 09. (C) T- ADJUSTED	E PURPOSES 0. 0. STATEMENT 4 (D) CHARITABLE
FORM 990-PF, PG 1, LN 16C =	4,609. 4,609. TAX (A) EXPENSES	4,6 4,6 ES (B) NET INVES MENT INCO	09. 09. (C) T- ADJUSTED	E PURPOSES 0. 0. STATEMENT 4 (D) CHARITABLE

	•				FOOTNOTES	STATEMENT	<u></u>
VELLS FARGO	FOREIGN	TAX	WITHELD	ON	DIVIDEND		
:NCOME							41.

ORM 990-PF	CORPO	RATE STOCK		STATEMENT	6
)ESCRIPTION			BOOK VALUE	FAIR MARKE VALUE	т
SECURITIES - WELLS FARGO		•	933,323.	937,3	40.
OTAL TO FORM 990-PF, PART II,	LINE 1	0B	933,323.	937,3	40.
ORM 990-PF	OTHER :	INVESTMENTS		STATEMENT	7
)ESCRIPTION		VALUATION METHOD	BOOK VALUE	FAIR MARKE' VALUE	T
INVESTMENT INCOME RECEIVABLE		FMV	1,314.	1,3	14.
OTAL TO FORM 990-PF, PART II, LINE 13		3	1,314.	1,314.	
ORM 990-PF	OTHER I	LIABILITIES		STATEMENT	8
ESCRIPTION			BOY AMOUNT	EOY AMOUNT	
CCRUED FEDERAL TAXES		_	88.	15	93.
OTAL TO FORM 990-PF, PART II,	LINE 22	- 2	88.	19	93.

STATEMENT 10

IST OF SUBSTANTIAL CONTRIBUTORS
PART VII-A, LINE 10

ADDRESS
LEWIS F. SHRENSKY

LEWIS F. SHRENSKY

ADDRESS
10708 BALANTRAE LANE
POTOMAC, MD 20854

PART XV - LINE 1A

LIST OF FOUNDATION MANAGERS

JAME OF MANAGER

ORM 990-PF

LEWIS F. SHRENSKY BARBARA SHRENSKY

Form **8868**

(Rev January 2012), Department of the Treasury

Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

Form 8868 (Rev 1-2012)

internal Reve	nue Service	► File a sepa	rate appi	ication for each return.			
● If you a	re filing for an Aut	omatic 3-Month Extension, complete	te only Pa	art I and check this box			X
	-	litional (Not Automatic) 3-Month Ex	-		this form).		
		less you have already been granted a					
		u can electronically file Form 8868 if y					ration
	_	or an additional (not automatic) 3-moi					
•	• • • • • • • • • • • • • • • • • • • •	ns listed in Part I or Part II with the exc		-		·	
		which must be sent to the IRS in pap					
	·	lick on e-file for Chanties & Nonprofits		(coo monachono) i oi more detane i		on or no many or a no m	,
Part I		3-Month Extension of Time		ubmit original (no copies ne	eded).		
		e Form 990-T and requesting an auton					
Part I only	•	or orm 550-1 and requesting arradion	natio o me	Milit Catoricion Chock this Box and	oompioto.	•	
•	• • • • • • • • • • • • • • • • • • • • fing 1120-C filers), partnerships, REM	 ICo and t	rusts must use Form 7004 to reques	 t an exter	einn of time	
	ome tax returns	iling 1120-0 lilers), partiferships, hewi	ics, and ti	usis must use Form 7004 to reques	an exten	ision or time	
Type or	Name of exemp	t organization or other filer, see instru	ctions		Employe	r identification numb	er (EIN) or
print		· · g - · · · · · · · · · · · · · · · · · ·			,		,
•	SHRENSKY	FOUNDATION, INC.			X	52-228492	5
File by the due date for		and room or suite no. If a P.O box, se	e instruct	tions.	Social security number (SSN))
filing your return See	10708 BA	LANTRE LANE					
instructions		st office, state, and ZIP code For a fo	reign add	ress, see instructions.			
	POTOMAC,			·			
	<u>, </u>						
Enter the	Return code for th	e return that this application is for (file	a separa	te application for each return)			0 4
		overten and this approach is to the	шоорили	,	• •		تعدي
Application	on		Return	Application		-	Return
ls For			Code	ls For			Code
Form 990			01	Form 990-T (corporation)	·		07
Form 990-	BL		02	Form 1041-A			08
Form 990-			01	Form 4720			09
Form 990-			04	Form 5227			10
	T (sec 401(a) or 4	OS/a) tauet)	05	Form 6069			11
	T (trust other than		- 06	Form 8870			12
01111 030	T (trust other trial)	LEWIS F. SHRENS		11011110070			L
• Tho ho	alsa ara in the ease	of ▶ 10708 BALANTRE		POTOMAC MD 208	5.4		
	one No ► 301		TIVINE	FAX No ►	74		
			a tha I la	·			
	-	ot have an office or place of business			f dhun un fo	r the value group of	naak thia
_		rn, enter the organization's four digit 0 of the group, check this box	•	· · · · · · · · · · · · · · · · · · ·		•	
						ers the extension is	101
	·	3-month (6 months for a corporation	•			The section 1	
	AUGUST 15		organizat	ion return for the organization name	a above	The extension	
_	r the organization's						
₽ L	X calendar year						
►L	tax year begin	ning	, and	d ending		<u> </u>	
				<u></u>			
2 If the	¬ '	in line 1 is for less than 12 months, ch	eck reaso	on Initial return I	Final retur	n	
<u> </u>	Change in accou	inting period					
							
3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any					0.5.0		
	efundable credits				3a	\$	250.
		Form 990-PF, 990-T, 4720, or 6069, e	-				-
estimated tax payments made Include any prior year overpayment allowed as a credit 3b \$					0.		
c Bala	nce due. Subtract	line 3b from line 3a. Include your pay	ment with	this form, if required,			
		onic Federal Tax Payment System) S			3c	\$	<u>250.</u>
Caution, If	you are going to r	nake an electronic fund withdrawal w	rth this Fo	rm 8868, see Form 8453-EO and Fo	rm 8879-l	EO for payment instr	uctions

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