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

OMB No 1545-0052

F	or ca	lendar year 2011 or tax year beginning	09	9/01 ,2011 ,	and ending	9	08/31, 2012		
		e of foundation				A Employer identif	fication number		
_	CIC	, INC				52-165419	93		
	Numi	ber and street (or P O box number if mail is not delive	ered to street address) Room/suite		· ·	per (see instructions) 02) 333-9095			
1049 30TH STREET, NW									
_		or town, state, and ZIP code	-						
						C If exemption applic pending, check here	cation is		
_	WAS	HINGTON, DC 20007							
G	Che	eck all that apply Initial return	Initial return	of a former p	ublic charity	D 1 Foreign organiza	ations, check here		
		Final return	Amended re	turn		2 Foreign organiza			
		Address change	Name chang			85% test, check computation	here and altach		
H	_Che	eck type of organization X Section 501(F If private foundation	on status was terminated		
\perp		Section 4947(a)(1) nonexempt charitable trust	Other taxable pr				b)(1)(A), check here .		
1			unting method: X C		rual	F If the foundation is	s in a 60-month termination		
		ear (from Part II, col (c), line	ther (specify)		-	under section 507(b	o)(1)(B), check here		
			column (d) must be or	cash basis)					
j	'art	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))	(a) Revenue and expenses per books	(b) Net inve		(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)		
_	1	Contributions, gifts, grants, etc., received (attach schedule) .	215,480.				(SECTIONS OF IT)		
	2	Check If the foundation is not required to attach Sch B				-	<u>'</u>		
	3	Interest on savings and temporary cash investments	181.		181.		ATCH 1		
	4	Dividends and interest from securities	53,492.	5	3,492.		ATCH 2		
	5 a	Gross rents							
	ь	Net rental income or (loss)		, ,					
<u>a</u>	4	Net gain or (loss) from sale of assets not on line 10	50,387.						
Revenue	ь	Gross sales price for all assets on line 6a 359, 765.		"Take"					
Š	7	Capital gain net income (from Part IV, line 2).		5	0,387.				
œ	8	Net short-term capital gain	*	3 3					
	9	Income modifications · · · · · · · · · · ·							
	10 a	Gross sales less returns and allowances · · · ·							
	b	Less Cost of goods sold .	- · - · · ·						
	С	Gross profit or (loss) (attach schedule)							
	11	Other income (attach schedule)	210 540	1.0	1 060				
_	1	Total. Add lines 1 through 11	319,540. 69,000.	10	4,060.				
	13	Compensation of officers, directors, trustees, etc	69,000.						
ş	14	Other employee salaries and wages		7					
nse	15	Pension plans, employee benefits	4,271.		207	VEIL (E.			
ğ	16a	Legal fees (attach schedule) ATCH 3	6,720.		1/1	EIVED	6,720.		
щ	b	Accounting fees (attach schedule)ATCH 4	2,000.	1		2 0 2012 8	0,720.		
₹.	, c	Other professional fees (attach schedule).*.	17.		SI MAK	2 0 2013 8			
it a	17	Interest ATTACHMENT 6	6,446.	 		38-0			
Ë	18	Taxes (attach schedule) (see instructions)			Och	- Jœl			
Ē	19	Depreciation (attach schedule) and depletion.	29,000.			ziv, UT /			
Operating and Administrative Expenses	20 21	Occupancy	1,706.						
anc	22	Travel, conferences, and meetings	•			·····	 		
ğ	23	Other expenses (attach schedule) ATCH 8	25,838.	1	2,999.				
aţi	24	Total operating and administrative expenses.			,				
ber		Add lines 13 through 23	144,998.	1	2,999.		6,720.		
ō	25	Contributions, gifts, grants paid	43,700.				43,700.		
	26	Total expenses and disbursements. Add lines 24 and 25	188,698.	1	2,999.	(50,420.		
_	27	Subtract line 26 from line 12							
		Excess of revenue over expenses and disbursements	130,842.						
	ı	Net investment income (if negative, enter -0-)	-	9	1,061.		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		
	i .	Adjusted net income (if negative enter-0-)	-						

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Fo	rm 990	O-PF (2011) CIC, INC		52	-1654193 , Page 2
		Attached schedules and amounts in the	Beginning of year	End of	f year
Li	art I	Balance Sheets description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
_	1	Cash - non-interest-bearing	13,161.	15,957.	15,957.
	2	Savings and temporary cash investments	168,923.	182,410.	182,410.
	3	Accounts receivable ▶			
		Less allowance for doubtful accounts ▶			
	4	Pledges receivable			
	-	Less allowance for doubtful accounts			
	5				-
	1				-
	6	Receivables due from officers, directors, trustees, and other			
	_	disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule)	-		
		Less allowance for doubtful accounts ▶			
Assets	8	Inventories for sale or use			
SS	9	Prepaid expenses and deferred charges			
⋖		Investments - U S and state government obligations (attach schedule).	1,096,214.	1,212,264.	1,450,523.
		Investments - corporate stock (attach schedule) ATCH. 9	1,090,214.	1,212,204.	1,450,525.
	11 C	Investments - corporate bonds (attach schedule)			
	' '	and equipment basis			
		Less accumulated depreciation (attach schedule)			
	12	Investments - mortgage loans			
	13 14	Investments - mortgage loans Investments - other (attach schedule) Land, buildings, and equipment basis			
	' -	equipment basis		9.5	ATCH 10
		Less accumulated depreciation 3,850. (attach schedule)	85.	85.	<u>85</u> .
	15	Other assets (describe			<u> </u>
	16	Total assets (to be completed by all filers - see the			
_		Instructions Also, see page 1, item I)	1,278,383.	1,410,716.	1,648,975.
	17	Accounts payable and accrued expenses			1
	18	Grants payable			1
es	19	Deferred revenue			ľ
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			· ·
iab	21	Mortgages and other notes payable (attach schedule)			
_	22	Other liabilities (describe ATCH_11_)	2,268.	3,759.	Ĺ
		•			
_	23	Total liabilities (add lines 17 through 22)	2,268.	3,759.	
		Foundations that follow SFAS 117, check here ▶			
		and complete lines 24 through 26 and lines 30 and 31.			
Ses	24	Unrestricted			į.
aŭ	25	Temporarily restricted			
Bal	24 25 26 27 28 29 30 31	Permanently restricted			
g		Foundations that do not follow SFAS 117,			
교		check here and complete lines 27 through 31. ▶ X			
ö	27	Capital stock, trust principal, or current funds			
ts	28	Paid-in or capital surplus, or land, bldg , and equipment fund		-	
SSe	29	Retained earnings, accumulated income, endowment, or other funds	1,276,115.	1,406,957.	
Ž	30	Total net assets or fund balances (see instructions)	1,276,115.	1,406,957.	
Š	31	Total liabilities and net assets/fund balances (see			
		ınstructions)	1,278,383.	1,410,716.	
E	art I	Analysis of Changes in Net Assets or Fund E			
		net assets or fund balances at beginning of year - Part		iust agree with	
•		of-year figure reported on prior year's return)			1,276,115.
2		r amount from Part I, line 27a		3 1	130,842.
		lines 4 2 and 2	·		1,406,957.
		reases not included in line 2 (itemize)		5	
		I net assets or fund balances at end of year (line 4 minus li	ne 5) - Part II column (b)		1,406,957.

(a) List an	and Losses for Tax on Inv d describe the kind(s) of property sold ((e g , real estate,	(b) How acquired P-Purchase	(c) Date acquired	(d) Date sold (mo , day, yr)
1a SEE PART IV SCHE	rick warehouse, or common stock, 200	sns MLC Co)	D-Donation	(mo , day, yr)	(,, , , , , ,
b			-		
c			-		
d					
е					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) mini	
<u>a</u>					
b					
C			<u> </u>		
d			-		
_e			-		
Complete only for assets	showing gain in column (h) and owner			Gains (Col (h) g	
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (ı) over col (ı), ıf any	col	(k), but not less t Losses (from co	
a			<u> </u>		
<u>b</u>			 		
<u>c</u>					
d			 -	•	
е	, II	Don't had 7			
2 Capital gain net income or	(net capital loss)	gain, also enter in Part I, line 7 (loss), enter -0- in Part I, line 7	2		50,387.
	or (loss) as defined in sections 12				
		ructions). If (loss), enter -0- in			
		duced Tax on Net Investment I	3		0
		outable amount of any year in the b	ase period	d?	Yes X No
		; see the instructions before making	a ony ontr		
(a)			ariy eriiri	(d)	
Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of nonchantable-use assets		Distribution ra (col (b) divided by	itio
2010	46,200.	1,337,799.		(cor (b) divided by	0.034534
2009	35,976.	1,051,178.			0.034224
2008	27,905.	407,237.			0.068523
2007	5,150.	315,604.			0.016318
2006	5,000.	226,715.			0.022054
Total of line 1, column (d)	-		2		0.175653
	for the 5-year base period - divide	e the total on line 2 by 5 or by the	- -		
	dation has been in existence if less		3		0.035131
4 Enter the net value of non	chantable-use assets for 2011 fro	m Part X, line 5	4	1,	510,742.
Multiply line 4 by line 3			5		53,074.
6 Enter 1% of net investmen	nt income (1% of Part I, line 27b)		6		911.
7 Add lines 5 and 6			7		53,985.
B Enter qualifying distributio	ns from Part XII, line 4		8		50,420.
If line 8 is equal to or gre Part VI instructions.	eater than line 7, check the box i	in Part VI, line 1b, and complete t	hat part	using a 1% tax	rate See the

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

b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General

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

Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names

8a Enter the states to which the foundation reports or with which it is registered (see instructions)

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Х

Х

8 b

10

and addresses

Х

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3ь

4 a

l 4h

3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise

b If "Yes," did it have excess business holdings in 2011 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2011)

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2011?.

Х

hours per week devoted to position

(c) Compensation

plans and defened compensation

				▶		
F	<u> </u>	m	q	٩n.	PF	/201

NONE

(a) Name and address of each employee paid more than \$50,000

Total number of other employees paid over \$50,000

Part VIII	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid and Contractors (continued)	Employees,
3 Five hi	ghest-paid independent contractors for professional services (see instructions). If none, ente	r "NONE."
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	
NONE		
Total numbe	r of others receiving over \$50,000 for professional services	▶
Part IX-A	Summary of Direct Charitable Activities	-
r art ix-A	Summary of Direct Chantable Activities	
	ation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the nu and other beneficianes served, conferences convened, research papers produced, etc.	umber of Expenses
1 N/A		
2		
3		
4		
5 () 7 5		
Part IX-B	Summary of Program-Related Investments (see instructions)	
1 NONE	two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 NONE		
2		
All other proa	ram-related investments. See instructions	
3 NONE		
~_		
Total. Add In	nes 1 through 3	

Pa	Minimum Investment Return (All domestic foundations must complete this part. Forei see instructions.)	gn founda	tions,
1	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	1,274,311.
b	Average of monthly cash balances	1b	259,437.
С	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	1,533,748.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets] 2	
3	Subtract line 2 from line 1d	3	1,533,748.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see		
	instructions)	4	23,006.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	1,510,742.
6	Minimum investment return. Enter 5% of line 5	6	75,537.
Pa	Tart XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ▶ □ and do not complete this process.	part)	
1	Minimum investment return from Part X, line 6	1	75,537.
2a	1 1		· · · · · · · · · · · · · · · · · · ·
b			
С		2c	1,821.
3	Distributable amount before adjustments Subtract line 2c from line 1		73,716.
4	Recoveries of amounts treated as qualifying distributions	4	
5	A	5	73,716.
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1 · · · · · · · · · · · · · · · · · ·	7	73,716.
D:		L'	
F 6	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	* -	
а		1a	50,420.
b	Program-related investments - total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а		3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	50,420.
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)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	50,420.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when cal qualifies for the section 4940(e) reduction of tax in those years	culating wi	hether the foundation

	n 990-PF (2011)	 		<u></u>	Page 9
Pa	rt XIII Undistributed Income (see instru	ctions)			
1	Distributable amount for 2011 from Part XI,	(a) Corpus	(b) Years prior to 2010	(c) 2010	(d) 2011
	line 7				73,716.
2	Undistributed income, if any, as of the end of 2011				
а	Enter amount for 2010 only			49,010.	
b	Total for pnor years 20_09,20_08,20_07				
	Excess distributions carryover, if any, to 2011				
	From 2006				
þ	From 2007				
С	From 2008				
d	From 2009				
е	From 2010				
	Total of lines 3a through e				
4	Qualifying distributions for 2011 from Part XII, line 4 \(\bigstar{D}\) \(\bigstar{D}\) \(\bigstar{D}\)				
а	Applied to 2010, but not more than line 2a L			49,010.	
b	Applied to undistributed income of prior years (Election required - see instructions)				!
С	Treated as distributions out of corpus (Election required - see instructions)				1
d	Applied to 2011 distributable amount				1,410.
	Remaining amount distributed out of corpus	-			
5	Excess distributions carryover applied to 2011				· · · · · · · · · · · · · · · · · · ·
6	(If an amount appears in column (d), the same amount must be shown in column (a)) Enter the net total of each column as indicated below:				d Lagranian .
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5				
b	Prior years' undistributed income Subtract				£
	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				į
d	Subtract line 6c from line 6b Taxable				
е	amount - see instructions Undistributed income for 2010 Subtract line 4a from line 2a Taxable amount - see instructions				
f	Undistributed income for 2011 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2012				72,306.
7	Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions)				
8	Excess distributions carryover from 2006 not applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2012. Subtract lines 7 and 8 from line 6a	0			· <u>-</u>
10	Analysis of line 9				
	Excess from 2007				
	Excess from 2008				
	Excess from 2009				
	Excess from 2010				
	Excess from 2011				

Part XV Supplementary Information (continued)			
3 Grants and Contributions Paid Durin	ng the Year or Appr	oved for F	uture Payment	
* Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or contribution	Amount
3 Grants and Contributions Paid Durin Recipient Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	Amount
a Paid during the year				
ATTACHMENT 14				
	•			
	•		:	
Total			▶ 3a	43,700.
b Approved for future payment			_	
		i		
		;		
Total				
				

art XVI-A Analysis of Income-Pro			Te		(a)
Enter gross amounts unless otherwise indicated		Unrelated business income		section 512, 513, or 514	(e) Related or exempt
Program service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions)
a	_		ļ		, <u> </u>
b	_				
c	-				
d	-				
e	-				
f	-				_
g Fees and contracts from government agencies			+		
Membership dues and assessments Interest on savings and temporary cash investments			14	181.	
Dividends and interest from securities			14	53,492.	
Net rental income or (loss) from real estate	•				
a Debt-financed property		· · · · ·			
b Not debt-financed property	•				
Net rental income or (loss) from personal property					
Other investment income					
Gain or (loss) from sales of assets other than invente			18	50,387.	
Net income or (loss) from special events					
Gross profit or (loss) from sales of inventory.					
Other revenue a					
b	_				
c	- }		_		
d	_		_	<u> </u>	
e	_			104,060.	
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify cart XVI-B Relationship of Activitions No. Explain below how each activities.	alculations) es to the Ac	complishment of Ex	kempt Purp	oses	
Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify cart XVI-B Relationship of Activiti	alculations) es to the Ac	complishment of Ex	kempt Purp ın column (e	oses e) of Part XVI-A contribu	ited importantly to
rt XVI-B Relationship of Activitions No. Explain below how each activitions and the No.	alculations) es to the Ac	complishment of Ex	kempt Purp ın column (e	oses e) of Part XVI-A contribu	ited importantly to
rotal. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify cart XVI-B Relationship of Activitions No. Explain below how each activities.	alculations) es to the Ac	complishment of Ex	kempt Purp ın column (e	oses e) of Part XVI-A contribu	ited importantly to
rotal. Add line 12, columns (b), (d), and (e) eworksheet in line 13 instructions to verify cart XVI-B Relationship of Activities Relationship of Activities No. Explain below how each activities and the No.	alculations) es to the Ac	complishment of Ex	kempt Purp ın column (e	oses e) of Part XVI-A contribu	ited importantly to
rotal. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify cart XVI-B Relationship of Activitions No. Explain below how each activities.	alculations) es to the Ac	complishment of Ex	kempt Purp ın column (e	oses e) of Part XVI-A contribu	
rotal. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify cart XVI-B Relationship of Activitions No. Explain below how each activities.	alculations) es to the Ac	complishment of Ex	kempt Purp ın column (e	oses e) of Part XVI-A contribu	ited importantly to
rotal. Add line 12, columns (b), (d), and (e) eworksheet in line 13 instructions to verify cart XVI-B Relationship of Activities Relationship of Activities No. Explain below how each activities and the No.	alculations) es to the Ac	complishment of Ex	kempt Purp ın column (e	oses e) of Part XVI-A contribu	ited importantly to
rotal. Add line 12, columns (b), (d), and (e) eworksheet in line 13 instructions to verify cart XVI-B Relationship of Activities Relationship of Activities No. Explain below how each activities and the No.	alculations) es to the Ac	complishment of Ex	kempt Purp ın column (e	oses e) of Part XVI-A contribu	ited importantly to
otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify cart XVI-B Relationship of Activities e No. Explain below how each activities	alculations) es to the Ac	complishment of Ex	kempt Purp ın column (e	oses e) of Part XVI-A contribu	ited importantly to
otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify cart XVI-B Relationship of Activities e No. Explain below how each activities	alculations) es to the Ac	complishment of Ex	kempt Purp ın column (e	oses e) of Part XVI-A contribu	ited importantly to
rt XVI-B Relationship of Activities Revolution Revolut	alculations) es to the Ac	complishment of Ex	kempt Purp ın column (e	oses e) of Part XVI-A contribu	ited importantly to
rt XVI-B Relationship of Activities Revolution Revolut	alculations) es to the Ac	complishment of Ex	kempt Purp ın column (e	oses e) of Part XVI-A contribu	ited importantly to
rotal. Add line 12, columns (b), (d), and (e) eworksheet in line 13 instructions to verify cart XVI-B Relationship of Activities Relationship of Activities No. Explain below how each activities and the No.	alculations) es to the Ac	complishment of Ex	kempt Purp ın column (e	oses e) of Part XVI-A contribu	ited importantly to
rt XVI-B Relationship of Activitions No. Explain below how each activitions and the No.	alculations) es to the Ac	complishment of Ex	kempt Purp ın column (e	oses e) of Part XVI-A contribu	ited importantly to

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Form 99	0-PF (<u> </u>	CIC, INC				52-16			ege 13
Part	XVII	Information R Exempt Orga		insfers To and	d Transacti	ons a	and Relationships With Nor	char	itable)
ır	n seci Irgani		ode (other than	section 501(c)(3)	organization	s) or ir	any other organization described a section 527, relating to political		Yes	No
			-					10/11		х
ò	2) Otl	her assets			• • • • • • •	• • • •		1a(1) 1a(2)		X
		transactions.						19,27	T	
(1) Sa	les of assets to a no	oncharitable exer	npt organization .				16(1)		х
(2	2) Pu	rchases of assets from	om a noncharita	ble exempt organı	zation			1b(2)		Х
(:	3) Re	ental of facilities, equ	iipment, or other	assets				1b(3)		Х
(4	4) Re	imbursement arrang	jements					1b(4)	<u> </u>	Х
(!	5) Lo:	ans or loan guarante	es					1b(5))	X
()	6) Pe	rformance of service	es or membersh	ip or fundraising s	solicitations			1b(6)		X
તા	ilailii tha	answer to any of the	nent, mailing list	is, other assets, o	r pala employ	ees		1c	<u> </u>	
u II	alue (of the goods, other	assets or service	s, complete the	reporting for	ındatın	on If the foundation received less	w then	fair m	arke
V	alue i	in any transaction of	r sharing arrang	ement, show in	column (d) th	ne valu	ue of the goods, other assets, or	service	s rece	eived
(a) Line		(b) Amount involved		oncharitable exempt o			Description of transfers, transactions, and shi			
		N/A				N/F	Ą			
			<u> </u>							
			<u> </u>	<u>-</u>						
		<u> </u>								
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			<u> </u>	N .						
0- 1-		f								
d	escrit	bed in section 501(c)) of the Code (ot				ore tax-exempt organizations cion 527?	Y	es X] No
		(a) Name of organizatio		(b) Type of	f organization		(c) Description of relation	ship	-	
		- <u>-</u>								
		 -			<u> </u>					
	Under	r nenalties of neguro, I decl	are that I have examin	and this return and uding	. aaaampanuna ad	hadulaa a		1		
Sign	correc	and complete Declaration o	f preparer (other than 1a	xpayer) is based on all infe	ormation of which p	reparer ha	and statements, and to the best of my knowled as any knowledge	ge and t	Jeller, It	is true,
Here				- 13/12	12013	SGN		S discus		
	Sigi	nature et officer or trus ee		Date		Title	with the p	reparer ns)? X	Yes	No
	<u> </u>	· · · · · · · · · · · · · · · · · · ·					(22 31 8 31 8	·,		
Paid		Print/Type preparer's		Preparer's agna	ature	_	Date Check If	PTIN		
Prepa	irer	ALVIN M. FEIT			1-1-1	_	3/12/2013 self-employed			.7
		Firm's name ► WA	ATKINS MEEG	AN LLC			Firm's EIN ▶ 52-1	2976	95	

20817

Form 990-PF (2011)

Phone no 301-654-7555

Use Only Firm's address ▶ 6720-B ROCKLEDGE DRIVE, SUITE 750 BETHESDA,

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

Name of the organization CIC, INC		Employer identification number					
		52-1654193					
Organization type (check one)							
Filers of:	Section:						
Form 990 or 990-EZ	501(c)(³) (enter number) organization						
	4947(a)(1) nonexempt charitable trust not treated as a private fou	ndation					
[527 political organization						
Form 990-PF [X 501(c)(3) exempt private foundation						
[4947(a)(1) nonexempt charitable trust treated as a private foundat	ion					
	501(c)(3) taxable private foundation						
Note. Only a section 501(c)(7), (8) instructions. General Rule	red by the General Rule or a Special Rule. I, or (10) organization can check boxes for both the General Rule and a S						
	Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 contributor. Complete Parts I and II.	r more (in money or					
Special Rules							
under sections 509(a)(1)	organization filing Form 990 or 990-EZ that met the 33 1/3 % support to and 170(b)(1)(A)(vi) and received from any one contributor, during the or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form	e year, a contribution of					
during the year, total cor	For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals Complete Parts I, II, and III.						
For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year. \bigsim \frac{1}{2} \]							
990-EZ, or 990-PF), but it must an	t covered by the General Rule and/or the Special Rules does not file Soswer "No" on Part IV, line 2, of its Form 990; or check the box on line Hot certify that it does not meet the filing requirements of Schedule B (For	of its Form 990-EZ or on					

JSA

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

For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF.

Name of org	anization	CIC,	INC	

Employer identification number 52-1654193

Part I	Contributors	(see instructions).	Use duplicate	copies of Part I if	additional space is needed.
--------	--------------	---------------------	---------------	---------------------	-----------------------------

(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
1 _	ANNA CHENNAULT CHARITABLE LEAD TRUST 1049 30TH STREET, NW, SUITE 1020 WASHINGTON, DC 20007	\$84,480.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
2_	MRS. L. LEI C/O CIC, INC 1049 30TH STREET, NW WASHINGTON, DC 20007	\$5,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

Employer identification number

5	2-1	65	41	93

Part II	Noncash Property (see instructions). Use duplicate copies	s of Part II if additional space is ne	eded.
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\ \\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\ \\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

Name of organization CIC, INC

Employer identification number

52-1654193

Part III	Exclusively religious, charitable, etc., that total more than \$1,000 for the year.	individual contribu ear. Complete colu	utions to section 5 nns (a) through (e	01(c)(7), (8), or (10) organizations) and the following line entry.
	For organizations completing Part III, e contributions of \$1,000 or less for the	enter the total of <i>exc</i> e year. (Enter this inf	<i>lusively</i> religious, controllors, controllo	haritable etc
	Use duplicate copies of Part III if addition	onal space is neede	d.	
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held
		(e) Transi	er of gift	
	Transferee's name, address, ar	nd ZIP + 4	Relatio	nship 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) Transt	er of gift	
			3	
	Transferee's name, address, ar	nd ZIP + 4	Relation	nship of transferor to transferee
		····		
(a) No				
from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held
		(a) Transi	or of aift	
		(e) Transf	er or gift	
	Transferee's name, address, ar	nd ZIP + 4	Relation	nship of transferor to transferee
(a) No.	415		<u> </u>	
from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held
	·			
		(e) Transf	er of aift	
			o. o. g	
	Transferee's name, address, an	nd ZIP + 4	Relation	nship of transferor to transferee

FORM 990-PF - PART IV
CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

Kind of P		NS AND LO		ription		P or D	Date acquired	Date sold
Gross sale price less expenses of sale	Depreciation allowed/ allowable	Cost or other basis	FMV as of 12/31/69	Adj basis as of 12/31/69	Excess of FMV over adj basis		Gain or (loss)	
241,861.		MERRILL LYNG PROPERTY TY 221,849.	CH - SEE AT	TACHED		Р	VARIOUS	VARIOUS
·		MERRILL LYN				P	VARIOUS	VARIOUS
117,904.		PROPERTY TY 87,529.	PE: SECURIT	'IES			30,375.	:
OTAL GAIN(L	oss)						50,387.	

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INVESTMENTS	
CASH	
NTEREST ON TEMPORARY CASH	
ON	
INTEREST	
1	
H	
PART	
990PF,	
FORM	

NET INVESTMENT INCOME 181. 181. EXPENSES PER BOOKS REVENUE AND TOTAL INTEREST ON SAVINGS DESCRIPTION

181.

ATTACHMENT 1 PAGE 23

ATTACHMENT 2 PAGE 24

ITIES	
SECUR	
FROM	
INTEREST	
AND	
DIVIDENDS	
ı	
PART I	
990PF,	
FORM	

NET INVESTMENT INCOME	53,492.	53,492.
REVENUE AND EXPENSES PER BOOKS	53,492.	53,492.
		TOTAL
DESCRIPTION	MERRILL LYNCH DIVIDENDS	

		V 11-6.5
		6:16:17 AM V 11-6.5
		5YNOFF M151 3/12/2013
		F M151
		5YNOF!

REVENUE	AND	EXPENSES	PER BOOKS	4,271.
			DESCRIPTION	LEGAL FEES

TOTALS

AD		Н
ī	MENT	ME

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되 -	_	Œ
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PART I - ACCOUNTING FEES

FORM 990PF,

REVENUE AND EXPENSES PER BOOKS 6,720.	V 11-6.5
	AM
TOTALS	6:16:17 AM
	3/12/2013
z	M151
DESCRIPTION ACCOUNTING	5YNOFF M151

6,720.

6,720.

CHARITABLE PURPOSES

ADJUSTED NET INCOME

NET INVESTMENT INCOME

FORM 990PF, PART I - OTHER PROFESSIONAL FEES

REVENUE

AND

EXPENSES

PER BOOKS

PROFESSIONAL FEES

DESCRIPTION

2,000.

TOTALS

2,000.

FORM 990PF, PART I - INTEREST EXPENSE

REVENUE

AND

EXPENSES

PER BOOKS

DESCRIPTION

INTEREST

17.

TOTALS

17.

FORM 990PF, PART I - TAXES

REVENUE

AND

EXPENSES

PER BOOKS

FOREIGN TAXES

DESCRIPTION

1,004.

PAYROLL TAXES

5,442.

TOTALS

6,446.

FORM 990PF, PART I - OTHER EXPENSES

AND	EXPENSES INVESTMENT	PER BOOKS INCOME	55.	3,531.	334.	1,251.	309.	1,076.	12,999. 12,999.	2,696.	3,587.	
	E)	DESCRIPTION PI		DUES & SUBSCRIPTIONS		OFFICE SUPPLIES	POSTAGE	TELEPHONE	INVESTMENT FEES	OTHER EXPENSES	HEALTH INSURANCE	

25,838.

TOTALS

STOCK	
CORPORATE	
ı H	
Н	
PART	
990PF,	
FORM	

ENDING <u>FMV</u>	74,474. 72,474. 69,805. 39,560. 69,451. 78,181. 47,988. 45,870. 70,643. 62,239. 61,833. 55,009. 77,477. 77,477. 77,477. 77,477. 77,477. 77,477. 77,477. 77,477. 77,477. 77,477. 77,477. 77,477.	
ENDING BOOK VALUE	51,049. 57,291. 56,266. 39,967. 69,087. 78,767. 44,162. 41,158. 57,277. 56,389. 56,788. 57,414. 64,338. 57,414. 64,338. 58,378. 60,650. 38,273. 57,624. 56,960.	
BEGINNING BOOK VALUE	57,416. 51,049. 57,291. 56,266. 45,918. 57,277. 56,389. 57,838. 56,768. 41,241. 57,414. 64,338. 58,378. 46,707. 57,624. 56,960. 54,726.	
DESCRIPTION	ABBOTT LABS ALTRIA GROUP INC AT&T BCE INC BT GROUP PLC CANADIAN IMPERIAL BANK CENTURYLINK INC SHS CONOCOPHILLIPS DARDEN RESTAURANTS INC DU PONT E I DE NEMOURS ELI LILLY & CO HEINZ H J CO INTEL CORP JOHNSON AND JOHNSON COM KIMBERLY CLARK KRAFT FOODS INC VA CL A OLIN CORP PAYCHEX INC PHILIP MORRIS INTL INC PHILIP MORRIS INTL INC PHILIP MORRIS INC COPPLICE WEST CAP CORP REALTY INCM CRP MD REYNOLDS AMERINC INC SEAGATE TECH PLC SCUTHERN COMPANY VERIZON COMPANY VE	

V 11-6.5

NVESTMENT	
FOR I	
HELD	
NOT	Į
EOUI PMENT	
BUILDINGS,	
LAND.	

ATTACHMENT 10

•	., д		7.	6	υ.	3.		lal
1.	ENDING	958.	417.	899.	525.	153.	.898	3,850,
ACCUMULATED DEPRECIATION DETAIL	DISPOSALS							
CCUMULATED DEP	ADDITIONS							
AC	BEGINNING	958.	417.	. 668	525.	153.	.898	3,850.
	ENDING	.066	429	006	563.	153.	.006	3,935,
FIXED ASSET DETAIL	DISPOSALS							
FIXED AS	ADDITIONS							
	BEGINNING	.066	429.	.006	563.	153.	006	3,935.
	METHOD/ CLASS	Æ	H7	М7	M7	Ж7	7W	
	ASSET DESCRIPTION	FURNITURE	FURNITURE	FURNITURE	FURNITURE	FURNITURE	ART/FRAMING	TOTALS
	Α.	2	F3	53	5	5	AR	ΤC

ATTACHMENT	11		
	_	 	

FORM 990PF, PART II - OTHER LIABILITIES

DESCRIPTION

BEGINNING ENDING
BOOK VALUE BOOK VALUE

OTHER CURRENT LIABILITIES

2,268. 3,759.

TOTALS

2,268.

3,759.

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	NOMPENSSHITON	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES	
ANNA C. CHENNAULT 1049 30TH STREET, NW WASHINGTON, DC 20007	CHAIRMAN 1.00	0	0	0	
IRVING KAUFMAN 1049 30TH STREET, NW WASHINGTON, DC 20007	PRESIDENT AND TREASURER 1.00	0	0	0	
PAUL SMOLLAR 1049 30TH STREET, NW WASHINGTON, DC 20007	MEMBER	0	0	0	
DAVID YAO 1049 30TH STREET, NW WASHINGTON, DC 20007	SECRETARY 15.00	0	0	0	
CHRISSIE CHEN 1049 30TH STREET, NW WASHINGTON, DC 20007	EXECUTIVE DIRECTOR 40.00	.000,69	3,587.	0	
	GRAND TOTALS	.000,69	3,587.	0	

FORM 990PF, PART XV - NAME, ADDRESS AND PHONE FOR APPLICATIONS

DAVID YAO 1049 30TH STREET NW WASHINGTON, DC 20007 202-333-9095 ATTACHMENT 14.

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND		•
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
UNIVERSITY OF FLORIDA GAINESVILLE, FL	NONE PUBLIC UNIVERSITY	EDUCATIONAL	8,700
ASIAN AMERICAN JOURNALIST ASSOCIATION 5 THIRD STREET SUITE 1108 SAN FRANCISCO, CA 94103	501(C)(3)	EDUCATIONAL	30,000.
DR. C. MIKITA WASHINGTON, DC	INDIVIDUAL	EDUCATIONAL	1,500
DR. J. HUTCHINSON WASHINGTON, DC	INDIVIDUAL	EDUCATIONAL	1,500.
DR. BRETT SCHNEIDER WASHINGTON, DC	INDIVIDUAL	EDUCATIONAL	2,000.

43,700. TOTAL CONTRIBUTIONS PAID

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SCHEDULE D. (Form 1041)

Department of the Treasury Internal Revenue Service

Capital Gains and Losses

▶ Attach to Form 1041, Form 5227, or Form 990-T. See the Instructions for Schedule D (Form 1041) (also for Form 5227 or Form 990-T, if applicable).

OMB No 1545-0092

Name of estate or trust				Employer identifi	cation	number
CIC, 'INC				52-16541	.93	
Note: Form 5227 filers need to complete						
Part I Short-Term Capital Gains	and Losses - Assets	Held One Ye	ar or Less			
(a) Description of property (Example 100 shares 7% preferred of "Z" Co				(f) Gain or (loss) for the entire year Subtract (e) from (d)		
1a						
			, <u></u>	-		 -
				1		
					ı ————	
b Enter the short-term gain or (loss),	if any from Schedule D	-1 line 1h			1 b	20,012.
b Enter the short-term gain or (loss),	ir arry, from Schedule D	-1, mie 10			10	20,012.
2 Short-term capital gain or (loss) fro	om Forms 4684, 6252,	6781, and 882	4		2	
3 Net short-term gain or (loss) from p					3	· · · · · · · · · · · · · · · · · · ·
4 Short-term capital loss carryover		-		•		,
Carryover Worksheet	ombine lines 12 throug		n (f) Enter bere an		4	(
column (3) on the back			* *		5	20,012.
Part II Long-Term Capital Gains	and Losses - Assets	Held More T	han One Year			
(a) Description of property (Example 100 shares 7% preferred of "Z" Co	(b) Date acquired (mo , day, yr)	(c) Date sold (mo , day, yr)	(d) Sales price	(e) Cost or other (see instruction		(f) Gain or (loss) for the entire year Subtract (e) from (d)
6a						
				-		
				.L.,		-
b Enter the long-term gain or (loss), i	f any from Schedule D-	1 line 6h			6b	30,375.
Enter the long term gain or (1003), i	ir arry, from Generale D-	1, iiie 00			0.0	3073.3.
7 Long-term capital gain or (loss) fro	m Forms 2439, 4684,	6252, 6781, ar	nd 8824		7	
8 Net long-term gain or (loss) from p	artnerships, S corporat	ons, and other	estates or trusts		8	
9 Capital gain distributions					9	
40. Com from From 4707 D. 11					ا مر ا	
10 Gain from Form 4797, Part I11 Long-term capital loss carryover	Enter the amount of	any from la		Capital Las-	10	
Carryover Worksheet		•		•	11	()
12 Net long-term gain or (loss). Con	nbine lines 6a through			on line 14a		, ,
column (3) on the back			` '		12	30,375.
For Paperwork Reduction Act Notice, see th					hedul	e D (Form 1041) 2011

Schedule D (Form 1041) 2011					Page 2
Part III Summary of Parts I and II		(1) Beneficia	1	(2) Estate	1 (3) (0)21
Caution: Read the instructions before completing this	`	(see instr) 	or trust's	
Net short-term gain or (loss) Net long-term gain or (loss):	13		-		20,012.
- , ,	14a				30,375.
a Total for year b Unrecaptured section 1250 gain (see line 18 of the wrksht)	14b	L <u>-</u>	-		307373
c 28% rate gain	-				
	15		-		50,387.
Note: If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4		m 990-T Part I	line 4a)	If lines 14a a	
gains, go to Part V, and do not complete Part IV If line 15, column (3), is a net loss, c	omplet	e Part IV and the	Capital L	oss Carryover	Worksheet, as necessary
Part IV Capital Loss Limitation			-		
Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, I	Part I, I	ne 4c, if a trust),	the sma	ller of	
-		· ·			; (
a The loss on line 15, column (3) or b \$3,000 Note: If the loss on line 15, column (3), is more than \$3,000, or if Form 1041, pag	e 1, lin	e 22 (or Form 99	0-T, line	34), is a loss,	complete the Capital Loss
Part V Tax Computation Using Maximum Capital Gains Rate					
Form 1041 filers. Complete this part only if both lines 14a and 15 in cold) are going or	22 22	ust is optors	d in Dort Lor Dort Liand
here is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is more			an anno	uni is entere	O III FAIL I OI FAIL II AIIO
Caution: Skip this part and complete the Schedule D Tax Worksheet in the					
Either line 14b, col. (2) or line 14c, col. (2) is more than zero, or					
 Both Form 1041, line 2b(1), and Form 4952, line 4g are more than zero. 					
Form 990-T trusts. Complete this part only if both lines 14a and 15 ar					
of Form 990-T, and Form 990-T, line 34, is more than zero. Skip this part a	and co	mplete the Sc h	edule D	Tax Works	heet in the instructions
f either line 14b, col (2) or line 14c, col (2) is more than zero.					
The interior of the state of th	34) .	17			
8 Enter the smaller of line 14a or 15 in column (2)					
but not less than zero					
9 Enter the estate's or trust's qualified dividends					
from Form 1041, line 2b(2) (or enter the qualified					
dividends included in income in Part I of Form 990-T) . 19					
20 Add lines 18 and 19					
21 If the estate or trust is filing Form 4952, enter the					
amount from line 4g, otherwise, enter -0 ▶ 21				-	
Subtract line 21 from line 20 If zero or less, enter -0	• • •	· · 			
Subtract line 22 from line 17 If zero or less, enter -0-		23			
74. Enter the constitute of the constitute to the 47 or 60 000					
Enter the smaller of the amount on line 17 or \$2,300		24		-	
25 Is the amount on line 23 equal to or more than the amount on line 24					
Yes. Skip lines 25 and 26; go to line 27 and check the "No" box		0.5			
No. Enter the amount from line 23		25 26			
Subtract line 25 from line 24	• • •	20			
Yes. Skip lines 27 thru 30, go to line 31 No. Enter the smaller of line 17 or line	- 00	27			
10. Enter the smaller of tine 17 of the	1e 22	21	<u>.</u>		
Enter the amount from line 26 (If line 26 is blank, enter -0-)		28			
2. Con the difficulty line 25 (if line 25 to blank, circle 5)	• • •	20			
Subtract line 28 from line 27		29			
30 Multiply line 29 by 15% (15)				30	,
31 Figure the tax on the amount on line 23 Use the 2011 Tax Rat				—	
(see the Schedule Ginstructions in the instructions for Form 1041)					
(· · · · · · · · · · · · · · · · · · ·		• • • • • • • •			
32 Add lines 30 and 31				32	, [
33 Figure the tax on the amount on line 17. Use the 2011 Tax Rat	 e Sch	edule for Estat	es and		
(see the Schedule G instructions in the instructions for Form 1041).					;
Tax on all taxable income. Enter the smaller of line 32 or line 33					
G, line 1a (or Form 990-T, line 36)					.
	· •				hedule D (Form 1041) 201

JSA 1F 1220 2 000

SCHEDULE D-1. (Form 1041)

Continuation Sheet for Schedule D (Form 1041)

OMB No 1545-0092

2011

Department of the Treasury Internal Revenue Service

► See instructions for Schedule D (Form 1041).

► Attach to Schedule D to list additional transactions for lines 1a and 6a.

Name of estate or trust
CIC, 'INC

Employer identification number
52-1654193

(a) Description of property (Example 100 sh 7% preferred of "Z" Co)	(b) Date acquired (mo , day, yr)	(c) Date sold (mo , day, yr)	(d) Sales pnce	(e) Cost or other basis (see instructions)	(f) Gain or (loss) Subtract (e) from (d)
MERRILL LYNCH - SEE					
ATTACHED	VARIOUS	VARIOUS	241,861.	221,849.	20,012
					<u>. </u>
					<u></u>
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For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

Schedule D-1 (Form 1041) 2011

Name of estate or trust as shown on Form 1041. Do not enter name and employer identification number if shown on the other side

Employer identification number

Part II Long-Term Capital Gains (a) Description of property (Example 100 sh 7% preferred of "Z" Co)	(b) Date acquired (mo , day, yr)	(c) Date sold (mo , day, yr)	(d) Sales price	(e) Cost or other basis (see instructions)	(f) Gain or (loss) Subtract (e) from (d)
a MERRILL LYNCH - SEE					
ATTACHED	VARIOUS	VARIOUS	117,904.	87,529.	30,375
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		_			
					
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CIC, INC
ATTACHMENT TO 2010 FORM 990
FY 09/01/2011 - 08/31/2012
Capital Gain Summary

ST TOTALS

LT TOTALS

				(Gain) / L	oss
_	Shares	Sales Proceeds	Cost Basis	STCG	LTCG
DARDEN RESTAURANTS	955.00	41,085.70	45,918.31	(4,832.61)	
OLIN CORP	1,227.00	20,122.41	26,342.95	(6,220.54)	
ABBOTT LABS	1,153.00	63,277.62	57,415.94	5,861.68	
INTEL CORP	1,950.00	54,916.03	41,547.48		13,368.55
INTEL CORP	740.00	20,839.93	15,790.93	5,049.00	
PHILLIPS	422.00	13,441.62	13,108.77	332.85	
PHILLIPS	-	15.73	15.73	-	
KRAFT FOODS INC	583.00	22,514.95	16,312.05		6,202.90
KRAFT FOODS INC	357.00	13,787.03	9,988.68		3,798.35
KRAFT FOODS INC	691.00	26,685.83	19,680.58		7,005.25
SEAGATE TECH PLC	253.00	5,636.05	5,180.93	455.12	
OLIN CORP	1,708.00	36,742.02	33,502.08	3,239.94	
SEAGATE TECH PLC	1,200.00	40,699.97	24,573.60	16,126.37	
TOTAL		359,764.89	309,378.03	20,011.81	30,375.05

221,849.24

87,528.79

20,011.81

30,375.05

241,861.05

117,903.84

Form **4562**

Depreciation and Amortization

(Including Information on Listed Property)

► See separate instructions.

► Attach to your tax return.

Attachment Sequence No 179

Internal Revenue Service Name(s) shown on return CIC, INC

Department of the Treasury

(99)

-	 Identifying number
	52-1654193

GENERAL DEPRECIATION Part I Election To Expense Co		nder Section 179				
Note: If you have any lis			you compi	ete Part I.		
1 Maximum amount (see instructions).					1	
2 Total cost of section 179 property pla	aced in service (see in	structions)			2	
3 Threshold cost of section 179 proper	rty before reduction i	n limitation (see instructio	ns)		3	
4 Reduction in limitation Subtract line 5 Dollar limitation for tax year Subtract line 4 from separately, see instructions	3 from line 2 If zero on line 1 If zero or less, enter	or less, enter -0- -0- If marned filing			4	
6 (a) Description			isiness use only			
				, , , , , , , , , , , , , , , , , , , ,	<u> </u>	
7 Listed property Enter the amount fro	m line 29		7			
8 Total elected cost of section 179 pro	perty Add amounts i	n column (c), lines 6 and	 7		8	
9 Tentative deduction Enter the smalle	r of line 5 or line 8	. ,,			9	
10 Carryover of disallowed deduction from	om line 13 of your 20	10 Form 4562			10	
11 Business income limitation Enter th						
12 Section 179 expense deduction Add	lines 9 and 10, but o	do not enter more than lir	ne 11		12	
3 Carryover of disallowed deduction to						
Note: Do not use Part II or Part III below for	listed property Instea	ad, use Part V	•			<u> </u>
Part II Special Depreciation A	Illowance and Ot	her Depreciation (D	o not includ	le listed prope	rty) (See ıı	nstructions.)
4 Special depreciation allowance for	or qualified property	y (other than listed	property) pl	aced in servic	e	
during the tax year (see instructions)					14	
5 Property subject to section 168(f)(1)						
6 Other depreciation (including ACRS)	<u> </u>	<u> </u>		<u></u>	16	
Part III MACRS Depreciation (Oo not include liste	d property) (See insti	ructions)			
		Section A				
8 If you are electing to group any a asset accounts, check here	assets placed in ser	<u> </u>	ar into one	or more genera	al al	
8 If you are electing to group any a asset accounts, check here	assets placed in ser	vice during the tax year	ar into one	or more genera	al al	ystem
8 If you are electing to group any a asset accounts, check here	assets placed in ser	vice during the tax yes	ar into one	or more genera	al al	
8 If you are electing to group any a asset accounts, check here Section B - Assets (a) Classification of property 9 a 3-year property	Placed in Service (b) Month and year placed in	During 2011 Tax Yea (c) Basis for depreciation (business/investment use	r Into one Ir Using the	or more genera ▶ ☐ e General Dep	reciation Sy	
8 If you are electing to group any a asset accounts, check here Section B - Assets (a) Classification of property 9 a 3-year property b 5-year property	Placed in Service (b) Month and year placed in	During 2011 Tax Yea (c) Basis for depreciation (business/investment use	r Into one Ir Using the	or more genera ▶ ☐ e General Dep	reciation Sy	
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8 If you are electing to group any a asset accounts, check here	Placed in Service (b) Month and year placed in	During 2011 Tax Yea (c) Basis for depreciation (business/investment use	r Into one Ir Using the	or more genera ▶ ☐ e General Dep	reciation Sy	
8 If you are electing to group any a asset accounts, check here	Placed in Service (b) Month and year placed in	During 2011 Tax Yea (c) Basis for depreciation (business/investment use	r Into one Ir Using the	or more genera ▶ ☐ e General Dep	reciation Sy	
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8 If you are electing to group any a asset accounts, check here	Placed in Service (b) Month and year placed in	During 2011 Tax Yea (c) Basis for depreciation (business/investment use	r Using the (d) Recovery period	or more general Dep	reciation Sy (f) Method	
8 If you are electing to group any a asset accounts, check here	Placed in Service (b) Month and year placed in	During 2011 Tax Yea (c) Basis for depreciation (business/investment use	r Using the (d) Recovery period 25 yrs 27 5 yrs	or more general Dep (e) Convention	reciation Sy (f) Method S/L S/L	
8 If you are electing to group any a asset accounts, check here	Placed in Service (b) Month and year placed in	During 2011 Tax Yea (c) Basis for depreciation (business/investment use	r Using the (d) Recovery period 25 yrs 27 5 yrs 27 5 yrs	or more general Dep General Dep (e) Convention MM MM	s/L S/L S/L	
8 If you are electing to group any a asset accounts, check here Section B - Assets (a) Classification of property 9 a 3-year property b 5-year property c 7-year property d 10-year property e 15-year property f 20-year property g 25-year property h Residential rental property i Nonresidential real	Placed in Service (b) Month and year placed in	During 2011 Tax Yea (c) Basis for depreciation (business/investment use	r Using the (d) Recovery period 25 yrs 27 5 yrs	or more general Dep General Dep (e) Convention MM MM MM	s/L S/L S/L S/L	
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-orr	m 4562 (2011)	•										52	-1654	193,	Page 2
		operty (Include	automobil	es, o	certain	othe	er vehi	cles,	certain	comp	uters.	and	prope	rtv us	
		ent, recreation, o						•			,		F - F -	,	
	Note: For a	any vehicle for whas (a) through (c) of	ich you are	using	the s	tandar	d milea	ge rai	te or ded	ducting	lease	expense	e, comp	lete or	ily 24a,
		- Depreciation and			_				<u> </u>	imits for	02550	nger aut	omobile	e 1	_
24:	Do you have evidence						res		24b lf "\					Yes	- INC
		T	(c)	T 030	Cidillica	<u>' </u>	(e)	140				Ĭ .			No
	(a) Type of property (list	(b)	Business/		(d)	Ва	asis for depr	eciation	(f)	1	9)	1	h)		i) section
	vehicles first)	Date placed in service	investment use	Cost	or other b	asıs _{(b}	usiness/inve		Recovery period	Meti Conve			ciation action		cost
	<u> </u>		percentage				use only	')	<u> </u>			-			
25	Special depreciation	•	•		•			-							
	year and used more t				nstructio	ons)				• • • •	. 25	<u> </u>			
26	Property used more	than 50% in a qualified	d business use												
			%						ļ						
			%										_		
			%												
27	Property used 50% of	or less in a qualified bu	siness use							•		•			
			%							S/L -					
			%		_					S/L -					
			%	+	· -					S/L -		<u> </u>			
	Add amounts in colu	ma (b) lines 25 thre		1	nd on lin	. 21 -			<u> </u>		1 20	 			
20	Add amounts in colu	min (ii), lines 25 tilro ma (i), line 26. Enter	ugn 27 Enter	nere a	na on IIn	e∠ı, pa	age I				. 28	<u> </u>			
	Add amounts in colu	iiii (i), iiile 20 Ciilei								• • • •	· · · ·	·.· · ·	. 29	<u> </u>	
_			Section												
	nplete this section for												rovided	vehicles	to your
- COLIF	oloyees, first answer th	e questions in Section	ii C to see ii yo		-			ting tr				es T			
					a) icle 1		(b) hicle 2	v	(c)		i) ala 1		e)	(°	
30	Total business/inve	stment miles drive	en during	ven	icie i	l ve	ilicie 2	\	ehicle 3	Vehi	CIE 4	Ven	icle 5	veni	cle 6
	the year (do not inclu	ide commuting miles))					ļ							
3 1	Total commuting mil	les driven during the	year												
	Total other person												•		
	driven		l							i					
33	Total miles driven												-		
	30 through 32					1									
34	Was the vehicle			Yes	No	Yes	No	Yes	No.	Yes	No	Yes	No	Yes	No
•	during off-duty hours?	•					1	1		7.00		1		-:	
3 5	Was the vehicle														
,,															
	than 5% owner or rela						1					 		_	
30		le available for											1		
	use?					L	1	L		<u>. </u>		1	L. —-		<u> </u>
		ction C - Questic	-	-						-					
	swer these question				ption to	com	pleting S	Sectio	n B for v	ehicles	used b	y empl	oyees v	vho are	not
no	re than 5% owners o	or related persons (see instruction	ons)											
37	Do you maintain	a written policy	statement th	at pr	ohibits	all pe	ersonal u	ıse o	f vehicles	s, includ	ding co	ommutin	g, by	Yes	No
	your employees?														
38	Do you maintain a									_			•		
	See the instructions f	or vehicles used by c	orporate office	rs, dire	ectors, o	r 1% or	more owi	ners.							
39	Do you treat all use of	of vehicles by employe	es as personal	use?											
10	Do you provide i	more than five ve	ehicles to y	our e	mployee										
	use of the vehicles, a	nd retain the informa	tion received?												
11	Do you meet the re-	quirements concerni	ing qualified a	utomo	obile der	 monstr	ation use	? (Se	e instruction	ons.)					
	Note: If your answer t														
Pa	rt VI Amortizat				i				-						
											(e	1	_		
	(a)		(b) Date amortiz	ation		(c			(d)		Amorti			(f)	
	Description of	of costs	begins	J. 1011	Am	nortizabl	e amount		Code se	ction	perio		Amortiza	ition for th	ns year
12	Amortization of cost	ts that begins during	L VOUR 2011	lav w	ar leac	inetric	rtione)	L			percei	naye			
	Amortization of Cost	o mac begins dufin	9 your 2011	tax ye	a (See	การเกินใ	AIU(15)	1							
_								-+							
	Amadesta	that he !	2011:		L			l	-			, 			
13	Amortization of costs		-									43			
14	Total. Add amounts i	n column (1) See the	e instructions t	or whe	re to rep	υπ <u></u>	<u> </u>					44			

Form **4562** (2011)

Form **8868**

(Rev January 2012)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

File a separate application for each return.

internal Revenue	e Service Fille a	soparate at	pplication for cach return.						
	filing for an Automatic 3-Month Extension, of filing for an Additional (Not Automatic) 3-Mo				▶ X				
	olete Part II unless you have already been grain				8868.				
a corporation 8868 to req Return for instructions)	ling (e-file). You can electronically file Form on required to file Form 990-T), or an addition puest an extension of time to file any of the Transfers Associated With Certain Personal. For more details on the electronic filing of the tomatic 3-Month Extension of Time. On	nal (not au forms liste I Benefit (nis form, vis	tomatic) 3-month exter ed in Part I or Part II w Contracts, which mus sit www.irs.gov/efile an	nsion of time. You can electron that the exception of Form 88 to be sent to the IRS in particular to the IRS in particula	nically file Form 70, Information per format (see				
A corporatio	n required to file Form 990-T and requesting	an automa	atic 6-month extension	- check this box and complete					
Part I only . All other cor	porations (including 1120-C filers), partnersh	 ips, REMIC			▶ ☐				
to file incom				Enter filer's identifying numb	er, see instructions				
Type or print	Name of exempt organization or other filer, see in	structions.		Employer identification nui	nber (EIN) or				
File by the	Number, street, and room or suite no If a P O box	v coo inctriv	otions	 					
due date for		A, 300 III31I U	Cuoris	Social security number (SS	N)				
filing your return See	1049 30TH STREET, NW City, town or post office, state, and ZIP code For	a foreign ad	drace can instructions	11					
instructions		a loreign au	uress, see mstructions						
	WASHINGTON, DC 20007								
Enter the Re	eturn code for the return that this application	is for (file a	a separate application to	or each return)	[0] 4				
A		Datum	I A - di - di		Deture				
Application		Return	Application		Return				
Is For		Code	Is For		Code				
Form 990		01	Form 990-T (corpora	iion)	07				
Form 990-BI		02	Form 1041-A	-	08				
Form 990-E2	· · · · · · · · · · · · · · · · · · ·	01	Form 4720		09				
Form 990-PF		04	Form 5227		10				
	(sec. 401(a) or 408(a) trust)	05	Form 6069						
FOLUI 990-1	(trust other than above)	06	Form 8870 12						
Telephone If the orga If this is for the whole a list with the until for the	e No 202 333-9095 anization does not have an office or place of lor a Group Return, enter the organization's for e group, check this box e names and EINs of all members the extensions that a nautomatic 3-month (6 months for a coroganization's return for: calendar year 20 or tax year entered in line 1 is for less than 12 members in accounting period	business ir ur digit Gro f it is for pa ion is for. poration re exempt org	oup Exemption Number art of the group, check equired to file Form 990 ganization return for the	this box and an open and above 1	If this is d attach				
b If this estima	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS								
Caution. If	onic Federal Tax Payment System) See instru you are going to make an electronic fund v	withdrawal	with this Form 8868	3c \$. see Form 8453-EO and For	2,000. m 8879-EO for				
payment ins				, <u></u> , . .					
	Act and Paperwork Reduction Act Notice, see Insti	ructions.		Form 8	868 (Rev 1-2012)				