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Form 990-PF

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

For calendar year 2012 or tax year beginning and ending A Employer identification number Name of foundation II CORINTHIANS FOUNDATION 22-3887024 C/O BARBARA & LOUIS GIULIANO Room/suite Number and street (or P O box number if mail is not delivered to street address) B Telephone number 540-364-2891 7149 ROCK HILL MILL ROAD City or town, state, and ZIP code C If exemption application is pending, check here THE PLAINS, VA 20198-1909 D 1. Foreign organizations, check here G Check all that apply Initial return Initial return of a former public charity Final return Amended return Foreign organizations meeting the 85% test, check here and attach computation Address change Name change X Section 501(c)(3) exempt private foundation H Check type of organization E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here X Cash J Accounting method Accrual Fair market value of all assets at end of year F If the foundation is in a 60-month termination Other (specify) under section 507(b)(1)(B), check here (from Part II, col. (c), line 16) 5,374,318. (Part I, column (d) must be on cash basis) ▶\$ Analysis of Revenue and Expenses (d) Disbursements (c) Adjusted net Part I (a) Revenue and (b) Net investment for chantable purposes (cash basis only) (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) expenses per books ıncome ıncome 102,720 N/A Contributions, gifts, grants, etc., received if the foundation is not required to attach Sch. B. Interest on savings and temporary cash investments STATEMENT 116,489 116,489 Dividends and interest from securities 5a Gross rents Net rental income or (loss) 0. 6a Net gain or (loss) from sale of assets not on line 10 Gross sales price for all 192,000. assets on line 6a Ο. 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain Income modifications 10a Gross sales less returns and allowances b Less Cost of goods sold c Gross profit or (loss) 11 Other income 219,209116,489 12 Total Add lines 1 through 11 0. Compensation of officers, directors, trust 14 Other employee salaries and wages 15 Pension plans, employee benefits Expenses 16a Legal fees 1,401. 1,375.**b** Accounting fees c Other professional fees CINNAUS erating and Administrative 17 Interest 441 0. 0. 18 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses 24 Total operating and administrative 1,401. 3,217 1,375 expenses. Add lines 13 through 23 254,589. 254,589 25 Contributions, gifts, grants paid 26 Total expenses and disbursements 255,990. 257,806 1,375 Add lines 24 and 25 27 Subtract line 26 from line 12 -38,597 3 Excess of revenue over expenses and disbursements 115,114 b Net investment income (if negative, enter -0-) N/A c Adjusted net income (if negative, enter -0-) LHA For Paperwork Reduction Act Notice, see instructions.

C/O BARBARA & LOUIS GIULIANO

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Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of y	
Part II Balance Officers column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
1 Cash - non-interest-bearing	0.10.050	0.05 0.16	005 016
2 Savings and temporary cash investments	248,350.	205,016.	205,016.
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			
Less allowance for doubtful accounts	1		
9 Prepaid expenses and deferred charges			
10a Investments - U S and state government obligations			
b Investments - corporate stock			
c Investments - corporate bonds			· · ·
11 Investments - land, buildings, and equipment basis			
	- [1	
Less accumulated depreciation	<u> </u>		
12 Investments - mortgage loans 13 Investments - other STMT 4	4,821,289.	4,826,026.	5,169,302.
To involutions outloo	1,021,2031	1,020,020	
14 Land, buildings, and equipment basis	- [1	
Less accumulated depreciation			
15 Other assets (describe ►)			
	5,069,639.	5,031,042.	5,374,318
16 Total assets (to be completed by all filers)	3,009,039.	3,031,042.	3/3/1/310
17 Accounts payable and accrued expenses	-		
18 Grants payable			
19 Deferred revenue			
20 Loans from officers, directors, trustees, and other disqualified persons			
20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable	-		
22 Other liabilities (describe >)	·		
	0.	0.	
23 Total liabilities (add lines 17 through 22)	0.		
Foundations that follow SFAS 117, check here			
and complete lines 24 through 26 and lines 30 and 31	1		
24 Unrestricted			
25 Temporarily restricted			
26 Permanently restricted			
Foundations that do not follow SFAS 117, check here			
and complete lines 27 through 31		0.	
2 27 Capital stock, trust principal, or current funds	0.	0.	
25 Temporarily restricted 26 Permanently restricted Foundations that do not follow SFAS 117, check here and complete lines 27 through 31 27 Capital stock, trust principal, or current funds 28 Paid-in or capital surplus, or land, bldg, and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds	0.		
29 Retained earnings, accumulated income, endowment, or other funds	5,069,639.	5,031,042.	
30 Total net assets or fund balances	5,069,639.	5,031,042.	
		5 001 040	
31 Total liabilities and net assets/fund balances	5,069,639.	5,031,042.	
Part III Analysis of Changes in Net Assets or Fund	Balances		
Total net assets or fund balances at beginning of year - Part II, column (a), lin	ne 30		
(must agree with end-of-year figure reported on prior year's return)		1	5,069,639
Enter amount from Part I, line 27a		2	-38,597
Other increases not included in line 2 (itemize)		3	0
Add lines 1, 2, and 3		4	5,031,042
Decreases not included in line 2 (itemize)		5	0
Total net assets or fund balances at end of year (line 4 minus line 5) - Part II,	column (b), line 30	6	5,031,042
Total net assets of junu datances at end of year (line 4 fillings line 5) - Part II,	Column (a), mic 30		Form QQOPF (201

	BARBARA & LOUIS						3887	024	Page 3
	nd Losses for Tax on Ir	~	Income	(h) How acqui	rod .			445	
	pe the kind(s) of property sold (e g shouse, or common stock, 200 sh			(b) How acqui P - Purchase D - Donation	eu (c) Date acquii mo , day, yr		(d) Date s (mo , day,	
1a BMW BANK			····	P D - Donation	'	5/18/0		05/29	
b SALLIE MAE BK				P		5/19/0		05/29	
С									
<u>d</u>									
_e									
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale			(h) Gain or (e) plus (f) m			
a 96,000.			96,00	0.					0.
ь 96,000.			96,00	0.					0.
<u>C</u>	· —					— <u>—</u> —			
d									
Complete only for assets showing	gain in column (h) and owned by	the foundation	on 12/31/69		(1) (2	ains (Col (h)	\ calb m		
	(j) Adjusted basis	T	cess of col (I)		còl (k), but not les	s than -(0-) ar	
(I) F M V as of 12/31/69	as of 12/31/69		col (j), if any			osses (from	col (h)))	
<u>a</u>									0.
b						_			0.
d		 -							
e									
	∫ If gain, also ente	rın Part I line	7						
2 Capital gain net income or (net capi	ital loss) { If (loss), enter -0	- in Part I, line	7) 2					0.
3 Net short-term capital gain or (loss		nd (6)							
If gain, also enter in Part I, line 8, co	olumn (c)			}		N	I/A		
If (loss), enter -0- in Part I, line 8 Part V Qualification Un	der Section 4940(e) for	Reduced	Tax on Net	Investmen	nt Inco		1, 11		
(For optional use by domestic private f	oundations subject to the section	4940(a) tax on	net investment in	come)					
If section 4940(d)(2) applies, leave this	s nart hlank								
				40			Г	Yes [⊽ 1 ,,_
Was the foundation liable for the section if "Yes," the foundation does not qualify		, ,	•	100 /			_	162 [2	Œ IVU
Enter the appropriate amount in ea				ntries					
(a) Base period years	(b)			(c)			(d Distribut	ión ratio	
Calendar year (or tax year beginning			Net value of no			(col ((b) divide	ed by col (c	
2011		19,130. 28,196.		5,158, 5,046,					829 <i>6</i> 5217
2010		3,827.		4,677,					2128
2008	23	36,009.	-	4,937,					7796
2007	20	7,734.		4,834,	324.			.04	2971
								2.2	<i>-</i> 100
2 Total of line 1, column (d)		an line 0 hii C	a - bu the aumher	of woore		2		.23	6408
3 Average distribution ratio for the 5- the foundation has been in existence		on line 2 by 5,	or by the number	ui years		3		.04	7282
the touristant has soon in existence	oo ii lood tilali o youlo								
4 Enter the net value of noncharitable	e-use assets for 2012 from Part X,	line 5				4	<u>5</u>	,165,	<u>619.</u>
								244	241
5 Multiply line 4 by line 3						5		244,	241.
6 Enter 1% of net investment income	(10/ of Part Line 27h)					6		1.	151.
Citter 1 % of thet investment income	(1 % 01 Fait i, iiile 270)								
7 Add lines 5 and 6						7		245,	392.
								255	000
8 Enter qualifying distributions from	•					8		255,	990.
If line 8 is equal to or greater than I See the Part VI instructions	ine 7, check the box in Part VI, line	e 1b, and comp	plete that part usin	g a 1% tax rate					
Joo tho i are vi morrabilono									

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year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If "Yes," complete Part XIV

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

1a	During the year did the foundation (either directly or indirectly)			
-	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	X No		1
- ((2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?	X No		1
-	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	X No		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	X No		
-	(5) Transfer any income or assets to a disqualified person (or make any of either available			
		X No		
1	(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			
		X No		
h i	If any answer is "Yes" to 1a(1)-(6), did any of the acts fall 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	16	1
	Organizations relying on a current notice regarding disaster assistance check here			
	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			
	before the first day of the tax year beginning in 2012?		10	X
	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))			
	At the end of tax year 2012, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
		X No		
	If "Yes," list the years ▶			
	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
	statement - see instructions)	N/A	2b]
	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here	,		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
		X No		
	If "Yes," did it have excess business holdings in 2012 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 disp	ose		
	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 2012)	N/A	3b	
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	• -	4a	Х
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose the	nat		
				1
	had not been removed from jeopardy before the first day of the tax year beginning in 2012?		4b	X

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11

12

13

N/A

Yes

X

Yes No

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

3 Five highest-paid independent contractors for professional services. If none, enter "NONE	ıı	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities		> 0
<u> </u>		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical informumber of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	nation such as the	Expenses
1 N/A		
1		
2		
3		
4		
D. A.W.D.		
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines 1 an	12	Amount
1 N/A		Amount
I N/A		
2		
All other program-related investments. See instructions		
3		
Total. Add lines 1 through 3	<u>▶</u>	0.
		Form 990-PF (2012

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations, s	see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
a	Average monthly fair market value of securities	1 <u>a</u>	4,971,949. 272,334.
b	Average of monthly cash balances	1b	272,334.
C	Fair market value of all other assets	10	
d	Total (add lines 1a, b, and c)	1 <u>d</u>	5,244,283.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	5,244,283.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	78,664.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5_	5,165,619.
<u>6</u> _	Minimum investment return Enter 5% of line 5	6_	258,281.
P	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.)	nd certain	
1	Minimum investment return from Part X, line 6	1	258,281.
	Tax on investment income for 2012 from Part VI, line 5		· · · · · · · · · · · · · · · · · · ·
b	Income tax for 2012 (This does not include the tax from Part VI)	1	
	Add lines 2a and 2b	20	1,151.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	$\frac{1,151}{257,130}$.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	257,130.
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	257,130.
P	art XII Qualifying Distributions (see Instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		255 000
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	255,990.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
Ò	Cash distribution test (attach the required schedule)	3b	255 000
4	Qualifying distributions Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	255,990.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		1 161
_	income Enter 1% of Part I, line 27b	5	1,151. 254,839.
6	Adjusted qualifying distributions Subtract line 5 from line 4	6	
	Note. The amount on line 6 will be used in Part V. column (b) in subsequent years when calculating whether the foundation	qualifies for	the section

4940(e) reduction of tax in those years

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Part XIII Undistributed Income (see	e instructions)			
	(a)	(b)	(c)	(d)
<u> </u>	Corpus	Years prior to 2011	2011	2012
1 Distributable amount for 2012 from Part XI, line 7	,			257,130.
2 Undistributed income, if any, as of the end of 2012	,			
a Enter amount for 2011 only			254,599.	· · · · · · · · · · · · · · · · · · ·
b Total for prior years		0.		
3 Excess distributions carryover, if any, to 2012				
a From 2007				
b From 2008				
c From 2009				
d From 2010				
e From 2011				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2012 from				
Part XII, line 4 ►\$ 255,990.				
a Applied to 2011, but not more than line 2a		.,,	254,599.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		w.
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2012 distributable amount				1,391.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2012 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.	· ·		
b Prior years' undistributed income Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b Taxable				
amount - see instructions		0.		
e Undistributed income for 2011. Subtract line				
4a from line 2a Taxable amount - see instr			0.	
f Undistributed income for 2012 Subtract				
lines 4d and 5 from line 1. This amount must				255 720
be distributed in 2013	11.2			255,739.
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 2007	•			
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2013	•			
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9				
a Excess from 2008				
b Excess from 2009				
c Excess from 2010				
d Excess from 2011				
e Excess from 2012		<u> </u>		

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4942(j)(5)

(e) Total

C	"Supp	ort"	alternative	test	- enter

listed

b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year

- (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 Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see instructions.)

Information Regarding Foundation Managers:

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2))

LOUIS J. GIULIANO

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

NONE

2	Information R	legarding (Contribution,	Grant, (Gift, Loan,	Scholarship, etc	., Programs
---	---------------	-------------	---------------	----------	-------------	------------------	-------------

Check here $\triangleright X$ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

a The name, address, and telephone number or e-mail of the person to whom applications should be addressed

b The form in which applications should be submitted and information and materials they should include

c Any submission deadlines

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

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Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual. show any relationship to Foundation Purpose of grant or Amount any foundation manager status of contribution Name and address (home or business) or substantial contributor recipient a Paid during the year BETHANY CHRISTIAN SERVICES N/A OTHER PUBLIC UNRESTRICTED 2130 PRIEST BRIDGE DRIVE CHARITY CONTRIBUTION TO THE CROFTON, MD 21114 CHARITY 20,000. OTHER PUBLIC UNRESTRICTED BIRTH CHOICE HEALTH CLINIC N/A CONTRIBUTION TO THE 92 ARGONAUT, SUITE 205 CHARITY CHARITY 5,000. ALISO VIEJO, CA 62676 OTHER PUBLIC UNRESTRICTED CEO FORUM N/A CHARITY CONTRIBUTION TO THE 640 CHAPEL HILLS DRIVE CHARITY 15,000. COLORADO SPRINGS, CO 80920 COUNTY CHRISTIAN SCHOOL N/A OTHER PUBLIC SCHOLARSHIP FUND 21637 BEAUMEADE CIRCLE CHARITY 10,000. ASHBURN, VA 20147 FAUQUIER FAMILY SHELTER SERVICES. N/A OTHER PUBLIC UNRESTRICTED CHARITY CONTRIBUTION TO THE INC P.O. BOX 3599 CHARITY 15,000. WARRENTON, VA 20188 SEE CONTINUATION SHEET(S) ➤ 3a 254,589. Total b Approved for future payment NONE **▶** 3b Total

223611

nter gross amounts unless otherwise indicated	Unrelated	d business income		ed by section 512, 513, or 514	(e)
I Program service revenue	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
			-		
	-		1		
	1 1		 		
	11				
e	1 1	·	+ +		
e	_	-	++		
g Fees and contracts from government agencies	-		+-+		
Membership dues and assessments			+-+		
Interest on savings and temporary cash			1		
investments					
Dividends and interest from securities			14	116,489.	
Net rental income or (loss) from real estate			1		
a Debt-financed property					
b Not debt-financed property					
Net rental income or (loss) from personal					
property] ,	j	
Other investment income					
Gain or (loss) from sales of assets other					
than inventory	1		18		
Net income or (loss) from special events			1-1-		
Gross profit or (loss) from sales of inventory			1		
Other revenue					·
a			+-+		
0	_				
_	l l				
c			++		
d					
c d		0		116,489.	
c d E Subtotal Add columns (b), (d), and (e)		0	•	116,489.	116,48
c d e Subtotal Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e)		0	•		116,48
c d e Subtotal Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations	S)			13	116,48
t d e Subtotal Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie ne No. Explain below how each activity for which in	es to the Acco	omplishment of l	Exempt	Purposes	116,48
c d e Subtotal Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie	es to the Acco	omplishment of l	Exempt	Purposes	116,48
c d e Subtotal Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) se worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie Ine No. Explain below how each activity for which in	es to the Acco	omplishment of l	Exempt	Purposes	116,48
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t d e Subtotal Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) the worksheet in line 13 instructions to verify calculations tart XVI-B Relationship of Activitie ne No. Explain below how each activity for which is	es to the Acco	omplishment of l	Exempt	Purposes	116,48
t d e Subtotal Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie ne No. Explain below how each activity for which in	es to the Acco	omplishment of l	Exempt	Purposes	116,48
c d e Subtotal Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) se worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie Ine No. Explain below how each activity for which in	es to the Acco	omplishment of l	Exempt	Purposes	116,48
t d e Subtotal Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) the worksheet in line 13 instructions to verify calculations tart XVI-B Relationship of Activitie ne No. Explain below how each activity for which is	es to the Acco	omplishment of l	Exempt	Purposes	116,48
c d e Subtotal Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations art XVI-B Relationship of Activitie ne No. Explain below how each activity for which in	es to the Acco	omplishment of l	Exempt	Purposes	116,48
c d e Subtotal Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations art XVI-B Relationship of Activitie ne No. Explain below how each activity for which in	es to the Acco	omplishment of l	Exempt	Purposes	116,48
c d e Subtotal Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations art XVI-B Relationship of Activitie ne No. Explain below how each activity for which in	es to the Acco	omplishment of l	Exempt	Purposes	116,48
c d e Subtotal Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations art XVI-B Relationship of Activitie ne No. Explain below how each activity for which in	es to the Acco	omplishment of l	Exempt	Purposes	116,48
t d e Subtotal Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) the worksheet in line 13 instructions to verify calculations tart XVI-B Relationship of Activitie ne No. Explain below how each activity for which is	es to the Acco	omplishment of l	Exempt	Purposes	116,48
c d e Subtotal Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) se worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie Ine No. Explain below how each activity for which in	es to the Acco	omplishment of l	Exempt	Purposes	116,48
t d e Subtotal Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) the worksheet in line 13 instructions to verify calculations tart XVI-B Relationship of Activitie ne No. Explain below how each activity for which is	es to the Acco	omplishment of l	Exempt	Purposes	116,48
c d e Subtotal Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) se worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie Ine No. Explain below how each activity for which in	es to the Acco	omplishment of l	Exempt	Purposes	116,48
c d e Subtotal Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) se worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie Ine No. Explain below how each activity for which in	es to the Acco	omplishment of l	Exempt	Purposes	116,48
c d e Subtotal Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) se worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie Ine No. Explain below how each activity for which in	es to the Acco	omplishment of l	Exempt	Purposes	116,48
c d e Subtotal Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie line No. Explain below how each activity for which in	es to the Acco	omplishment of l	Exempt	Purposes	116,48

C/O BARBARA & LOUIS GIULIANO

Part XVII	Information Re Exempt Organ		and Transactions a	nd Relationships With No		<u>ye 10</u>
1 Did the or		ectly engage in any of the followin	ig with any other organization	n described in section 501(c) of	Yes	No
		(3) organizations) or in section 52		• •		
		ition to a noncharitable exempt or	- · ·			
(1) Cash	ı				1a(1)	X
(2) Othe	r assets				1a(2)	X
b Other tran	isactions					
	s of assets to a noncharital	_			1b(1)	<u>X</u>
		ncharitable exempt organization			1b(2)	X
	al of facilities, equipment, o	or other assets			1 <u>b(3)</u>	X
	bursement arrangements				1b(4)	X
	s or loan guarantees				1b(5)	X
		mbership or fundraising solicitatio iling lists, other assets, or paid em			1b(6)	$\frac{\lambda}{X}$
			•	rays show the fair market value of the g	<u> </u>	
or service	es given by the reporting fo	-		e in any transaction or sharing arrange		
(a) Line no	(b) Amount involved	(c) Name of noncharitable	e exempt organization	(d) Description of transfers, transaction	ns, and sharing arrangeme	nts
	``	N/A				
				<u> </u>		
					_	
						
	<u>.</u> .			-	_	
			 -			
					 	
			-			
				-	 	
						
	<u> </u>		 -			
	•	tly affiliated with, or related to, one r than section 501(c)(3)) or in section 501(c)(3))		ations described	Yes X] No
b If "Yes," c	omplete the following sch	edule				
	(a) Name of org	anization	(b) Type of organization	(c) Description of re	lationship	
	N/A					
						
Sign Here	elief, it is true, correct, and con	nplete Beclaration of preparer (other tha	in taxpayer) is based on all informa	statements, and to the best of my knowledge ation of which preparer has any knowledge PRESIDENT	May the IRS discuss t return with the prepara shown below (see insi	this er tr)?
Sigi	nature of officer or trustee		Date	Title Check If	PTIN	
	Print/Type preparer's na	me Preparer's s	ignature	Date Check If self- employed	1 1111	
Paid	DAVID R MA	LCOLM DAVID	R MALCOLM	11/10/13	P00180050	
Preparer		IGAN RYAN MALCO		11/10/13 Eirm's EIN > 5	2-1259972	
Use Only		TOWN KIMM MADEO	ALI G DOIDE FO	riiii S Cily P J		
		5 QUINCE ORCHAR	D ROAD SUITE	600		
		ITHERSBURG, MD			01-258-890	0
	· · · · · · · · · · · · · · · · · · ·				Form QQQ-PF /	

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

2012

Employer identification number

II CORINTHIANS FOUNDATION C/O BARBARA & LOUIS GIULIANO 22-3887024 Organization type (check one): Filers of: Section: 501(c)(Form 990 or 990-EZ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization X 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule [X] For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. Special Rules For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year ▶ \$

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) (2012)

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on Part II, line 2 of its Form 990-PF, to

certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization
II CORINTHIANS FOUNDATION
C/O BARBARA & LOUIS GIULIANO

Employer identification number

22-3887024

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

(a)	(b) Name, address, and ZIP + 4	(c)	(d)
No.		Total contributions	Type of contribution
1	LOUIS GIULIANO 7149 ROCK HILL MILL ROAD THE PLAINS, VA 201981909	\$2,775.	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	THE PLAINS, VA 201981909	\$ 99,945.	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 Onncash 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.)

Name of organization II CORINTHIANS FOUNDATION C/O BARBARA & LOUIS GIULIANO

Employer identification number

22-3887024

'art II	Noncash Property (see instructions). Use duplicate copies of Part II	if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_2	\$88,000 FACE VALUE AUSTRALIAN GOV'T SECURITIES TRANSFERRED TO II CORINTHIANS	- - - - \$\$99,945.	12/17/12
(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
3453 12-21		\$	90, 990-EZ, or 990-PF) (2

Name of orga			Employer identification number					
II COR	INTHIANS FOUNDATION							
Part III	RBARA & LOUIS GIULIANO Exclusively religious, charitable, etc., indiv year. Complete columns (a) through (e) and th the total of exclusively religious, charitable, etc Use duplicate copies of Part III if additional	e following line entry For organizations , contributions of \$1,000 or less for th	22-3887024 7), (8), or (10) organizations that total more than \$1,000 for the s completing Part III, enter ne year (Enter this information once) \$\\$\\$\$					
(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, an	d 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, an	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 gift	Relationship of transferor to transferee					
	Transferee 3 hame, address, at		Treationship of transferor to transferor					
(a) No.	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
Part I	(b) Furpose of gift	(c) use of gift	(a) Description of now girt is field					
		(1) **						
	Transferee's name, address, ar	(e) Transfer of gift	Relationship of transferor to transferee					

Part XV Supplementary Information 3 Grants and Contributions Paid During the Y				
Recipient	If recipient is an individual,	Foundation	Purpose of grant or	
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	status of recipient	contribution	Amount
		ļ		
GOOD SHEPHERD ALLIANCE	N/A	OTHER PUBLIC	CAPITAL ASSET PURCHASE	
37 SYCOLIN ROAD, SE LEESBURG, VA 20175		CHARITY		10,000
				···
GOOD SHEPHERD ALLIANCE	N/A	OTHER PUBLIC	UNRESTRICTED	
37 SYCOLIN ROAD, SE		CHARITY	CONTRIBUTION TO THE	
LEESBURG, VA 20175			CHARITY	41,000
LAWS SHELTER	N/A	OTHER PUBLIC	UNRESTRICTED	
105 EAST MARKET STREET	,,,	CHARITY	CONTRIBUTION TO THE	
LEESBURG, VA 20176			CHARITY	25,000
LCI, INC.	N/A	OTHER PUBLIC	UNRESTRICTED	
ECI, INC. 27 PROPERTY ROAD II 219 ROGE BOOM SAMFORD NO 27222 RESTON, VA 20	702 0190	CHARITY	CONTRIBUTION TO THE	10 000
SAME TO TON, VAICE	1110		CHARITY	10,000
PRINCETON UNIVERSITY FAITH AND WORK	N/A	OTHER PUBLIC	UNRESTRICTED	
INITIATIVE		CHARITY	CONTRIBUTION TO THE	
5 IVY LANE			CHARITY	
PRINCETON, NJ 08544				10,000
RESTON BIBLE CHURCH	N/A	OTHER PUBLIC	UNRESTRICTED	
11979 NORTH SHORE DRIVE	N/A	CHARITY	CONTRIBUTION TO THE	
RESTON, VA 20190			CHARITY	22,295
RESTON BIBLE CHURCH	N/A	OTHER PUBLIC	NEEDY FUND	
11979 NORTH SHORE DRIVE RESTON, VA 20190		CHARITY		22,294
SEATTLE SCHOOL OF THEOLOGY &	N/A	OTHER PUBLIC CHARITY	UNRESTRICTED CONTRIBUTION TO THE	
PHYCHOLOGY 2501 ELLIOTT AVENUE		CHARITI	CHARITY	
SEATTLE, WA 98121				35,000
SEGS 4 VETS	N/A	OTHER PUBLIC	UNRESTRICTED	
500 FOX RIDGE ROAD		CHARITY	CONTRIBUTION TO THE	_
ST. LOUIS, MO 63131			CHARITY	4,000
WGTS 91.9 FM RADIO	N/A	OTHER PUBLIC	UNRESTRICTED	
7600 FLOWER AVENUE		CHARITY	CONTRIBUTION TO THE	
TAKOMA PARK, MD 20945			CHARITY	5,000
Total from continuation sheets				189,589

3 Grants and Contributions Paid During the		·		 	
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount	
Name and address (home or business)	or substantial contributor	recipient			
YOUNG LIFE INTL (LEE CODER INTERNATIONAL DIVISION)	N/A	OTHER PUBLIC	UNRESTRICTED CONTRIBUTION TO THE		
P.O. BOX 520			CHARITY		
COLORADO SPRINGS, CO 80901				5,000.	
			1		
		 			
				· ·	
			1		
	-		-		
Total from continuation sheets		l			

FORM 990-PF DIVIDENT	S AND	INTER	EST FROM	SECUE	RITIES	STATEMENT	1
SOURCE		GROSS	AMOUNT		ITAL GAINS IVIDENDS	COLUMN (A AMOUNT)
UBS			116,489.		0.	116,4	89.
TOTAL TO FM 990-PF, PART I, I	N 4		116,489.	=	0.	116,4	89.
FORM 990-PF	AC	COUNTI	NG FEES			STATEMENT	2
DESCRIPTION	EXPE	A) NSES BOOKS	(B) NET INVE MENT INC		(C) ADJUSTED NET INCOM		
TAX RETURN PREPARATION BOOKKEEPING CONSULTING - CHARITABLE		889. 1,610.		489. 886.			00. 24.
PURPOSES		277.		0.		2	77.
TO FORM 990-PF, PG 1, LN 16B		2,776.	1,	375.		1,4	01.
FORM 990-PF		TAX	ES			STATEMENT	3
DESCRIPTION	EXPE	A) NSES BOOKS	(B) NET INVE MENT INC		(C) ADJUSTED NET INCOM		
EXCISE TAXES ON INVESTMENT INCOME		441.		0.			0.
TO FORM 990-PF, PG 1, LN 18		441.		0.			0.
FORM 990-PF	ОТН	ER INV	ESTMENTS			STATEMENT	4
DESCRIPTION			LUATION ETHOD	вос	OK VALUE	FAIR MARKE VALUE	Т
INVESTMENTS- MUTUAL FUNDS INVESTMENTS- CD'S COMMON STOCKS & OPTIONS ALTERNATIVE INVESTMENTS STRUCTURED PRODUCTS			COST COST COST COST COST		3,327,608. 288,000. 42,560. 747,913. 320,000.	3,601,1 315,0 35,4 802,0 317,0	44. 86. 55.

II CORINTHIANS FOUNDATION C/	O BARBARA &		2:	2-3887024
AUSTRALIAN GOVT SECURITIES	COST	99,94	 15.	98,534.
TOTAL TO FORM 990-PF, PART II,	LINE 13	4,826,02	26. 5	,169,302.
	LIST OF OFFICERS, I		STAT	EMENT 5
NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	
LOUIS J. GIULIANO 7149 ROCK HILL MILL ROAD THE PLAINS, VA 201981909	PRESIDENT 9.00	0.	0.	0.
BARBARA J. GIULIANO 7149 ROCK HILL MILL ROAD	CHAIRMAN 1.00	0.	0.	0.

TREASURER

SECRETARY

DIRECTOR

DIRECTOR

1.00

1.00

1.00

1.00

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0.

VICTORIA JENNIFER MASTRAN

11316 STONEHOUSE PLACE

POTOMAC FALLS, VA 20165

KRISTIE GIULIANO STOVER

21091 MILL BRANCH DRIVE

MARK ZACHARY GLASCOCK

11316 STONEHOUSE PLACE

POTOMAC FALLS, VA 20165

21091 MILL BRANCH DRIVE

TOTALS INCLUDED ON 990-PF, PAGE 6, PART VIII

LEESBURG, VA 20175

LEESBURG, VA 20175

REX STOVER

Form 8868 (Rev 1-2013)					Dogo O
If you are filing for an Additional (Not Automatic) 3-Month Ext	tension c	omplete only Part II and check this	hov		Page 2 ► X
Note. Only complete Part II if you have already been granted an a		· · · · · · · · · · · · · · · · · · ·		2969	
 If you are filing for an Automatic 3-Month Extension, complet 			ieu i oiiii c	1000	
Part II Additional (Not Automatic) 3-Month Ex			al (no co	pies ne	eded)
		······································	`	- '	r, see instructions
Type or Name of exempt organization or other filer, see instruc	ctions	Litter lifer s			tion number (EIN) or
print II CORINTHIANS FOUNDATION	01.07.0		Linployer	locrimoa	non namber (Env) or
File by the C/O BARBARA & LOUIS GIULIANO)			22-3	887024
due date for Number, street, and room or suite no. If a P.O. box, so		tions	Social sec		nber (SSN)
filing your return See 7149 ROCK HILL MILL ROAD	00 11101100		COCIAI SC	Junity Hum	1501 (5014)
instructions City, town or post office, state, and ZIP code For a fo	oreign add	ress, see instructions			
THE PLAINS, VA 20198-1909	g a.a.a	roos, coo manachono			
Enter the Return code for the return that this application is for (file	a separa	te application for each return)			0 4
		approation to out totally			. (4)-
Application	Return	Application			Return
Is For	Code	Is For			Code
Form 990 or Form 990-EZ	01			_	
Form 990-BL	02	Form 1041-A			08
Form 4720 (Individual)	03	Form 4720			09
Form 990-PF	04	Form 5227			10
Form 990-T (sec 401(a) or 408(a) trust)	05	Form 6069			11
Form 990-T (trust other than above)	06	Form 8870			12
STOP! Do not complete Part II if you were not already granted	an autor	natic 3-month extension on a prev	nously file	d Form 8	868.
LOUIS J. GIULIZ	ANO				
• The books are in the care of ▶ 7149 ROCK HILL	MILL	ROAD - THE PLAINS	, VA	20198	-1909
Telephone No. ► 540-364-2891		FAX No ▶			
If the organization does not have an office or place of busines	s in the Ui	nited States, check this box			` ▶ □
• If this is for a Group Return, enter the organization's four digit	Group Ex	emption Number (GEN)	lf this is fo	r the whol	e group, check this
box ▶ If it is for part of the group, check this box ▶	and atta	ach a list with the names and EINs o	f all memb	ers the ex	tension is for
4 I request an additional 3-month extension of time until	NOVEM	BER 15, 2013			
5 For calendar year 2012, or other tax year beginning		, and endir	ng		
6 If the tax year entered in line 5 is for less than 12 months, of	check reas	son 🔲 initial return [Final r	eturn	
Change in accounting period					
7 State in detail why you need the extension SEE ST.	ATEME	NT			
					····
					·
8a If this application is for Form 990-BL, 990-PF, 990-T, 4720,	or 6069, e	enter the tentative tax, less any		1	
nonrefundable credits See instructions			8a	\$	<u>1,320.</u>
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 a	llowed as	a credit and any amount paid			
previously with Form 8868.			8b	\$	1,320.
c Balance due. Subtract line 8b from line 8a Include your pa	ayment w	th this form, if required, by using			
EFTPS (Electronic Federal Tax Payment System). See instr			8c	\$	0.
Signature and Verifica	tion mu	st be completed for Part II	only.		
Under penalties of perjury, I declare that I have examined this form, inclu-	ding accom	panying schedules and statements, and	to the best o	of my know	ledge and belief,
it is true, correct, and complete, and that I am authorized to prepare this f				,,	1112
Signature ► Mile ► Title ►	<u>CPA</u>		Date	<u>;</u> ► 8	[7113
				For	m 8868 (Rev 1-2013)

Form **8868**

(Rev January 2013)
Department of the Treasury

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No 1545-1709

		TOTO OPPI	TOTAL TOT OBOIL TOTAL TIL			
If you ar	re filing for an Automatic 3-Month Extension, complete	e only Pa	rt I and check this box			▶ X
If you ar	re filing for an Additional (Not Automatic) 3-Month Ext	ension, c	omplete only Part II (on page 2 of	this form).		
Do not co	emplete Part II unless you have already been granted a	n automa	tic 3-month extension on a previous	sly filed For	rm 8868	
Electronic	filing (e-file). You can electronically file Form 8868 if yo	ou need a	3-month automatic extension of tir	ne to file (6	months for a	corporation
equired to	ofile Form 990-T), or an additional (not automatic) 3-mon	nth extens	ion of time. You can electronically f	ile Form 88	368 to request	an extension
of time to f	file any of the forms listed in Part I or Part II with the exc	eption of	Form 8870, Information Return for	Transfers A	Associated Wif	th Certain
Personal B	Benefit Contracts, which must be sent to the IRS in paper	er format ((see instructions) For more details o	on the elec	tronic filing of	this form,
visit www i	irs gov/efile and click on e-file for Charities & Nonprofits					
Part I	Automatic 3-Month Extension of Time	. Only s	ubmit original (no copies ne	eded)		
· ·	ion required to file Form 990-T and requesting an autom	natic 6-mo	nth extension · check this box and	complete		
Part I only						
_	orporations (including 1120-C filers), partnerships, REMI me tax returns	Cs, and ti	usts must use Form 7004 to reques	st an exten	sion of time	
Type or	Name of exempt organization or other filer, see instruc	ctions		Employer	identification	number (EIN) or
print	II CORINTHIANS FOUNDATION					
	C/O BARBARA & LOUIS GIULIAN	10			22-388	7024
File by the due date for	Number, street, and room or suite no. If a P.O. box, se	ee instruct	tions.	Social se	curity number	(SSN)
filing your return See	7149 ROCK HILL MILL ROAD					
instructions	City, town or post office, state, and ZIP code. For a fo THE PLAINS, VA 20198-1909	reign add	ress, see instructions			
					······································	
Enter the F	Return code for the return that this application is for (file	a separa	te application for each return)			0 4
Applicatio	חס	Return	Application			Return
s For	İ	Code	Is For			Code
	or Form 990-EZ	01	Form 990-T (corporation)	<u> </u>		07
Form 990-l		02	Form 1041-A			08
) (individual)	03	Form 4720			09
Form 990-	· · · · · · · · · · · · · · · · · · ·	04	Form 5227			10
	T (sec 401(a) or 408(a) trust)	05	Form 6069			11
	T (trust other than above)	06	Form 8870		*** * **** * ****	12
	LOUIS J. GIULIA					I '-
• The boo	oks are in the care of ▶ 7149 ROCK HILL		ROAD - THE PLAINS	. VA	20198-1	909
	one No ► 540-364-2891		FAX No. ▶	,		<u></u>
· ·	rganization does not have an office or place of business	s in the Ur				▶ □
	s for a Group Return, enter the organization's four digit			If this is fo	r the whole ar	oun check this
oox ► [-	7	ach a list with the names and EINs c			
	juest an automatic 3-month (6 months for a corporation				010 1110 0710110	2011 10 1011
			ation return for the organization nam		The extension	1
	r the organization's return for.	. Organiza	men return for the organization ham	100 00000	THE EXICHSION	ı
	X calendar year 2012 or					
	tax year beginning	ar	nd ending			
, _	tax year beginning	, u	- Criting			
2 If the	e tax year entered in line 1 is for less than 12 months, c	heck reas	son Initial return	Final retur	'n	
	Change in accounting period	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	maa /otom	1 11101 70101		
	Change in accounting period					
3a If the	is application is for Form 990-BL, 990-PF, 990-T, 4720,	or 6069, e	enter the tentative tax, less any			<u> </u>
	refundable credits. See instructions			3a	\$	0.
	s application is for Form 990-PF, 990-T, 4720, or 6069,	enter any	refundable credits and			
	mated tax payments made Include any prior year overp			3ь	\$	879.
	ance due. Subtract line 3b from line 3a Include your pa				-	<u></u>
	Ising EFTPS (Electronic Federal Tax Payment System)		• • •	3c	S	0.
	f you are going to make an electronic fund withdrawal i					
·	or Privacy Act and Paperwork Reduction Act Notice.			5,.,, 55, 5		368 (Rev. 1-2013

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