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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.

Fore	alendar year 2012 or tax year beginning		, and ending		
Nar	ne of foundation			A Employer identification	u unmper
		D CHARITABLE		45 5540544	
			Beem/cuite		<u> </u>
		·-	0202		
					
				If exemption application is p	bending, check here
		Initial return of a former	nublic charity	D 1 Foreign organization	s check here
uc			public onarity	b 1. Foreign organization	o, check here
	==	==		Foreign organizations m check here and attach call	eeting the 85% test,
H C				•	
I Fa			Accrual		• • •
(fr	om Part II, col. (c), line 16)	her (specify)			
		mn (d) must be on cash basis	s.)		
Name of foundation RLEINS SHOPRITE OF MARYLAND CHARITABLE FUND, INC. Namebe and diverse for P. Deton rumber of mail is not delivered to street addresse) Recentrated Stelephone number (1997) St. St.		(d) Disbursements for charitable purposes (cash basis only)			
	1 Contributions, gifts, grants, etc., received	179.	-	N/A	
	2 Check X if the foundation is not required to attach Sch. B				
	Interest on savings and temporary cash investments			<u> </u>	,
	4 Dividends and interest from securities				
	5a Gross rents			· · · · · · · · · · · · · · · · · · ·	<u> </u>
	Net rental income or (loss)			· · · · · · · · · · · · · · · · · · ·	
nue	Gross sales price for all				
eve			0.		
α	8 Net short-term capital gain				
	10a and allowances				
	l ' ' ' '	110 005			STATEMENT 1
					STATEMENT I
					0.
	•	0.	<u> </u>		
			·		
es	16a Lagalface				
eus	b Accounting fees	SECEIVED IT			
Š	c Other professional fees				
_ ĕ	17 Interest	NOV 1 8 2013 18:			
rati	18 Taxes				
nist	19 Depreciation and depletion				
Ē	20 Occupancy				
¥	21 Travel, conferences, and meetings				
		24 572			
ing	23 Other expenses STMT 2	34,658.	0.		0.
erat	24 Total operating and administrative	24 650	0		
Ö	expenses. Aud lines 13 through 23		<u> </u>	 	0.
					1
		34 658	Λ.		0.
	27 Subtract line 26 from line 12:	3=,000.			
	a Excess of revenue over expenses and disbursements	83,606.		1	
	b Net investment income (if negative, enter -0-)		0.	-	
_	C Adjusted net income (if negative, enter -0-)			N/A	
2231	01				F - 000 DE (0040)

KLEINS SHOPRITE OF MARYLAND CHARITABLE

For	m 99	00-PF (2012) FUND, INC.		45-5	5512541 Page 2
Г	art	II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	year
	ait	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing		83,606.	83,606.
	2	Savings and temporary cash investments	,		
	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 -			
sts	8	Inventories for sale or use			
Assets	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			
		Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other			
	14	Land, buildings, and equipment basis			•
	١	Less accumulated depreciation			
	15	Other assets (describe)			
	16	Total assets (to be completed by all filers)	0.	83,606.	83,606.
	17	Accounts payable and accrued expenses			
	18	Grants payable			•
Ø	19	Deferred revenue			•
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
apı	21	Mortgages and other notes payable			
=	22	Other liabilities (describe)			
					-
	23	Total liabilities (add lines 17 through 22)	0.	0.	•
		Foundations that follow SFAS 117, check here			•
(A		and complete lines 24 through 26 and lines 30 and 31.			
če	24	Unrestricted			, •
alar	25	Temporarily restricted .			
Net Assets or Fund Balances	26	Permanently restricted			
ğ		Foundations that do not follow SFAS 117, check here			•
卢		and complete lines 27 through 31			•
sts	27	Capital stock, trust principal, or current funds	0.	0.	
556	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	` ` `
¥,	29	Retained earnings, accumulated income, endowment, or other funds	0.	83,606.	
ž	30	Total net assets or fund balances	0.	83,606.	
	31	Total liabilities and net assets/fund balances	0.	83,606.	•
P	art		lalances		
_		I net assets or fund balances at beginning of year - Part II, column (a), line			
		r het assets of fund balances at beginning of year - Part if, column (a), line st agree with end-of-year figure reported on prior year's return)	. 00		0.
	-	r amount from Part I, line 27a		2	83,606.
		er increases not included in line 2 (itemize)	••	3	03,000.
		lines 1, 2, and 3		3 4	83,606.
		eases not included in line 2 (itemize)	•	5	03,000.
		I net assets or fund balances at end of year (line 4 minus line 5) - Part II, c	olumn (b), line 30	6	83,606.
<u>~</u>		The state of the s	1-17		Form 990-DF (2012)

Form 990-PF (2012)

Add lines 5 and 6

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

6

7

8

See the Part VI instructions.

Enter 1% of net investment income (1% of Part I, line 27b)

Enter qualifying distributions from Part XII, line 4

q	 KLEINS SHOPRITE OF MARYLAND 	CHARI	TABLE				
orm 990	PF (2012) FUND INC.			45-551	2541		Page 4
Part V		1940(a), 4	1940(b), 4940(e), or	4948 - see	instru	ction	ns)
1a Exe	npt operating foundations described in section 4940(d)(2), check here	-			,		
•	of ruling or determination letter: (attach copy of letter if						
	estic foundations that meet the section 4940(e) requirements in Part V, check here			1 1			0.
	irt I, line 27b	,					
	ther domestic foundations enter 2% of line 27b. Exempt foreign organizations ente	er 4% of Part	t I. line 12, col. (b).				
	under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only			2			0.
	lines 1 and 2	,	,	3		_	0.
	rtle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations on	ılv. Others en	nter -0-)	4	-		0.
	based on investment income Subtract line 4 from line 3. If zero or less, enter -0-	.,,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	5			0.
	its/Payments;					-	
	estimated tax payments and 2011 overpayment credited to 2012	6a					
	npt foreign organizations - tax withheld at source	6b		┤			
	paid with application for extension of time to file (Form 8868)	6c		-			
	up withholding erroneously withheld	, 6d		-			
	credits and payments. Add lines 6a through 6d			7 7			0.
	r any penalty for underpayment of estimated tax. Check here if Form 2220 is	attached		8			
	due If the total of lines 5 and 8 is more than line 7, enter amount owed	7 414407104	•	9			0.
	payment If line 7 is more than the total of lines 5 and 8, enter the amount overpai	id		10			
	the amount of line 10 to be: Credited to 2013 estimated tax		Refunded	11			
Part V					-		-
	ng the tax year, did the foundation attempt to influence any national, state, or local	legislation of	r did it participate or interver	ne in	T	Yes	No
	political campaign?	g			1a		Х
-	t spend more than \$100 during the year (either directly or indirectly) for political pu	urposes (see	e instructions for definition)?	•	1b	•	Х
	e answer is "Yes" to 1a or 1b, attach a detailed description of the activities						
	ibuted by the foundation in connection with the activities	•	,		1		
	he foundation file Form 1120-POL for this year?				1c		Х
	r the amount (if any) of tax on political expenditures (section 4955) imposed during	g the year:					
	On the foundation. > \$ 0. (2) On foundation mana		0	•			i
	r the reimbursement (if any) paid by the foundation during the year for political exp			_			
mar	agers. ▶ \$ 0.	. ~	•				
	the foundation engaged in any activities that have not previously been reported to t	the IRS?			2		x
	es, attach a detailed description of the activities.						
3 Has	the foundation made any changes, not previously reported to the IRS, in its govern	ning instrume	ent, articles of incorporation	, or			
	ws, or other similar instruments? If "Yes," attach a conformed copy of the ch				3		x
4a Did	he foundation have unrelated business gross income of \$1,000 or more during the	e year?			4a		Х
b If "Y	es," has it filed a tax return on Form 990-T for this year?			N/A	4b		
	there a liquidation, termination, dissolution, or substantial contraction during the y	year?			5		X
	es," attach the statement required by General Instruction T						
	he requirements of section 508(e) (relating to sections 4941 through 4945) satisfi	ied either:			'		
	language in the governing instrument, or						
	state legislation that effectively amends the governing instrument so that no mand	datory directi	ions that conflict with the sta	ate law			1
	main in the governing instrument?	=			6	x	

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MD

7 Did the foundation have at least \$5,000 in assets at any time during the year?

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

of each state as required by General Instruction G? If "No," attach explanation

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

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

9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar

If "Yes," complete Part II, col. (c), and Part XV

KLEINS SHOPRITE OF MARYLAND CHARITABLE

orm	990-PF (2012) FUND, INC. 45-5512	541	1	Page 5
Pa	rt VII-A 'Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X_
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			
	If "Yes," attach statement (see instructions)	12		<u>x</u> _
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	х	
	Website address ► N/A		•	
14	The books are in care of ► THE FOUNDATION Telephone no. ► (410)	515	-93	03
	Located at ▶ 2101 ROCK SPRING ROAD, FOREST HILL, MD ZIP+4 ▶21			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		•	
	and enter the amount of tax-exempt interest received or accrued during the year	Ŋ	/A	
16	At any time during calendar year 2012, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16	- 1	X
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of the foreign			-
	country	ĺ	-	
Pa	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 If any item is checked in the "Yes" column, unless an exception applies.	"	Yes	No
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?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)		- }	
	a disqualified person?		<i>'</i>	
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No		- 1	
	(5) Transfer any income or assets to a disqualified person (or make any of either available	-	-	
	for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"		- {	
	If the foundation agreed to make a grant to or to employ the official for a period after	l . ˈ		
	termination of government service, if terminating within 90 days.)	1 1	ľ	
h	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
Ü	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? N/A	16		
	Organizations relying on a current notice regarding disaster assistance check here	"	-	
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected	١. ١		
·	before the first day of the tax year beginning in 2012?	1c		х
9	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	10		
-	defined in section 4942(j)(3) or 4942(j)(5)):			
9	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	'		
a	before 2012? Yes X No			
	16 W/ca Block the creams			
h	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			
J	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
	statement - see instructions.)	2b		
	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	20		<u> </u>
3.	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
Ja	during the year? — Yes 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	- 1		
Û				
	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		١.	
	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,	nL	'	
4.	Form 4720, to determine if the foundation had excess business holdings in 2012). N/A	3b	 	7
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	<u>-</u>	X
D	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	1	ļ	.
	had not been removed from jeopardy before the first day of the tax year beginning in 2012?	4b -		X

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VIETNA GUODDING OF MADVI	AATO CITAD TOADT	79			
KLEINS SHOPRITE OF MARYL	AND CHARLTABL		4E EE10E	41 5	_
orm 990-PF (2012) FUND, INC. Part VII-B Statements Regarding Activities for Which I	Form 4720 May Bo B		45-55125	41 Pa	ge <u>6</u>
	Offit 4720 Iviay De n	equired (continu	ueo)	- 	
5a During the year did the foundation pay or incur any amount to:	46.457.110	<u> </u>	[]		
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	• • • •		es X No		
(2) Influence the outcome of any specific public election (see section 4955); o	r to carry on, directly or indire				
any voter registration drive?			es X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	Ye	s X No		
(4) Provide a grant to an organization other than a charitable, etc., organizatio	n described in section				
509(a)(1), (2), or (3), or section 4940(d)(2)?	-	Ye	s X No	.	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or fo	or	j		
the prevention of cruelty to children or animals?		☐ Ye	s X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify uni	der the exceptions described i	n Regulations			
section 53.4945 or in a current notice regarding disaster assistance (see instru		3	N/A	5h /	
Organizations relying on a current notice regarding disaster assistance check h	•		▶	7 - 1	
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption for		ned	1, -	.	
expenditure responsibility for the grant?		/A 🗀 Ye	s No		
	_	/A	.5 140		
If "Yes," attach the statement required by Regulations section 53 494.					
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on		es X No		
a personal benefit contract?		Ye		,,	**
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?			6b	<u>X_</u>
If "Yes" to 6b, file Form 8870.		ا		1	
7a At any time during the tax year, was the foundation a party to a prohibited tax s		Ye	es 🗓 No 📙		
b If "Yes," did the foundation receive any proceeds or have any net income attribu				7b	
Part VIII Information About Officers, Directors, Trust	ees, Foundation Ma	nagers, Highly	y		
	 				
List all officers, directors, trustees, foundation managers and their	compensation.				
	T		(-3) 6		
(a) Name and address	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans	(e) Expen	se ther
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expen account, o allowanc	se ther es
(a) Name and address	(b) Title, and average hours per week devoted to position PRESIDENT	(If not paid,	ano deterred	(e) Expen account, o allowanc	se ther es
ANDREW P. KLEIN	to position	(If not paid,	ano deterred	(e) Expen account, o allowanc	se ther es
ANDREW P. KLEIN 2101 ROCKSPRING ROAD	to position PRESIDENT	(If not paid, enter -0-)	and deterred compensation	allowanc	es
ANDREW P. KLEIN 2101 ROCKSPRING ROAD FOREST HILL, MD 21050	to position PRESIDENT 1.00	(If not paid, enter -0-)	ano deterred	allowanc	se ther es
ANDREW P. KLEIN 2101 ROCKSPRING ROAD FOREST HILL, MD 21050 MICHAEL J. KLEIN	to position PRESIDENT	(If not paid, enter -0-)	and deterred compensation	allowanc	es
ANDREW P. KLEIN 2101 ROCKSPRING ROAD FOREST HILL, MD 21050 MICHAEL J. KLEIN 2101 ROCKSPRING ROAD	to position PRESIDENT 1.00 VICE PRESIDEN	(If not paid, enter -0-) O.	and deterred compensation	allowanc	<u>0.</u>
ANDREW P. KLEIN 2101 ROCKSPRING ROAD FOREST HILL, MD 21050 MICHAEL J. KLEIN 2101 ROCKSPRING ROAD FOREST HILL, MD 21050	to position PRESIDENT 1.00 VICE PRESIDEN 1.00	(If not paid, enter -0-) O. T	and deterred compensation	allowanc	es
ANDREW P. KLEIN 2101 ROCKSPRING ROAD FOREST HILL, MD 21050 MICHAEL J. KLEIN 2101 ROCKSPRING ROAD FOREST HILL, MD 21050 MARSHALL J. KLEIN	to position PRESIDENT 1.00 VICE PRESIDEN	(If not paid, enter -0-) O. T	and deterred compensation	allowanc	<u>0.</u>
ANDREW P. KLEIN 2101 ROCKSPRING ROAD FOREST HILL, MD 21050 MICHAEL J. KLEIN 2101 ROCKSPRING ROAD FOREST HILL, MD 21050 MARSHALL J. KLEIN 2101 ROCKSPRING ROAD	to position PRESIDENT 1.00 VICE PRESIDEN 1.00 VICE PRESIDEN	(If not paid, enter -0-) O. T	and deterred compensation	allowanc	0. 0.
ANDREW P. KLEIN 2101 ROCKSPRING ROAD FOREST HILL, MD 21050 MICHAEL J. KLEIN 2101 ROCKSPRING ROAD FOREST HILL, MD 21050 MARSHALL J. KLEIN 2101 ROCKSPRING ROAD FOREST HILL, MD 21050 FOREST HILL, MD 21050	to position PRESIDENT 1.00 VICE PRESIDEN 1.00 VICE PRESIDEN 1.00	(If not paid, enter -0-) O. T O.	and deterred compensation	allowanc	<u>0.</u>
ANDREW P. KLEIN 2101 ROCKSPRING ROAD FOREST HILL, MD 21050 MICHAEL J. KLEIN 2101 ROCKSPRING ROAD FOREST HILL, MD 21050 MARSHALL J. KLEIN 2101 ROCKSPRING ROAD FOREST HILL, MD 21050 HOWARD S. KLEIN	to position PRESIDENT 1.00 VICE PRESIDEN 1.00 VICE PRESIDEN	(If not paid, enter -0-) O. T O.	and deterred compensation	allowanc	0. 0.
ANDREW P. KLEIN 2101 ROCKSPRING ROAD FOREST HILL, MD 21050 MICHAEL J. KLEIN 2101 ROCKSPRING ROAD FOREST HILL, MD 21050 MARSHALL J. KLEIN 2101 ROCKSPRING ROAD FOREST HILL, MD 21050 HOWARD S. KLEIN 2101 ROCKSPRING ROAD	to position PRESIDENT 1.00 VICE PRESIDEN 1.00 VICE PRESIDEN 1.00 SECREATRY/TRE	(If not paid, enter -0-) O. T O. ASURER	and deterred compensation	allowanc	0. 0.
ANDREW P. KLEIN 2101 ROCKSPRING ROAD FOREST HILL, MD 21050 MICHAEL J. KLEIN 2101 ROCKSPRING ROAD FOREST HILL, MD 21050 MARSHALL J. KLEIN 2101 ROCKSPRING ROAD FOREST HILL, MD 21050 HOWARD S. KLEIN 2101 ROCKSPRING ROAD FOREST HILL, MD 21050 FOREST HILL, MD 21050	to position PRESIDENT 1.00 VICE PRESIDEN 1.00 VICE PRESIDEN 1.00 SECREATRY/TRE	(If not paid, enter -0-) O. T O. T ASURER	and deterred compensation	allowanc	0. 0.
ANDREW P. KLEIN 2101 ROCKSPRING ROAD FOREST HILL, MD 21050 MICHAEL J. KLEIN 2101 ROCKSPRING ROAD FOREST HILL, MD 21050 MARSHALL J. KLEIN 2101 ROCKSPRING ROAD FOREST HILL, MD 21050 HOWARD S. KLEIN 2101 ROCKSPRING ROAD	to position PRESIDENT 1.00 VICE PRESIDEN 1.00 VICE PRESIDEN 1.00 SECREATRY/TRE 1.00 Cluded on line 1). If none,	(If not paid, enter -0-) O. T O. T ASURER	and deterred compensation O • O •	allowanc	0. 0.
ANDREW P. KLEIN 2101 ROCKSPRING ROAD FOREST HILL, MD 21050 MICHAEL J. KLEIN 2101 ROCKSPRING ROAD FOREST HILL, MD 21050 MARSHALL J. KLEIN 2101 ROCKSPRING ROAD FOREST HILL, MD 21050 HOWARD S. KLEIN 2101 ROCKSPRING ROAD FOREST HILL, MD 21050 FOREST HILL, MD 21050 COMPENSATION OF THE PROPERTY OF THE PROPE	to position PRESIDENT 1.00 VICE PRESIDEN 1.00 VICE PRESIDEN 1.00 SECREATRY/TRE 1.00 cluded on line 1). If none, hours per week	(If not paid, enter -0-) O. T O. ASURER O. enter "NONE."	and deterred compensation O • O •	allowanc	0. 0.
ANDREW P. KLEIN 2101 ROCKSPRING ROAD FOREST HILL, MD 21050 MICHAEL J. KLEIN 2101 ROCKSPRING ROAD FOREST HILL, MD 21050 MARSHALL J. KLEIN 2101 ROCKSPRING ROAD FOREST HILL, MD 21050 HOWARD S. KLEIN 2101 ROCKSPRING ROAD FOREST HILL, MD 21050 FOREST HILL, MD 21050	to position PRESIDENT 1.00 VICE PRESIDEN 1.00 VICE PRESIDEN 1.00 SECREATRY/TRE 1.00 Cluded on line 1). If none,	(If not paid, enter -0-) O. T O. T ASURER	and deterred compensation	allowanc	0. 0.
ANDREW P. KLEIN 2101 ROCKSPRING ROAD FOREST HILL, MD 21050 MICHAEL J. KLEIN 2101 ROCKSPRING ROAD FOREST HILL, MD 21050 MARSHALL J. KLEIN 2101 ROCKSPRING ROAD FOREST HILL, MD 21050 HOWARD S. KLEIN 2101 ROCKSPRING ROAD FOREST HILL, MD 21050 FOREST HILL, MD 21050 COMPENSATION OF THE PROPERTY OF THE PROPE	to position PRESIDENT 1.00 VICE PRESIDEN 1.00 VICE PRESIDEN 1.00 SECREATRY/TRE 1.00 cluded on line 1). If none, hours per week	(If not paid, enter -0-) O. T O. ASURER O. enter "NONE."	O . O . (d) Contributions to employee benefit plans and detered	(e) Exper	0. 0.
ANDREW P. KLEIN 2101 ROCKSPRING ROAD FOREST HILL, MD 21050 MICHAEL J. KLEIN 2101 ROCKSPRING ROAD FOREST HILL, MD 21050 MARSHALL J. KLEIN 2101 ROCKSPRING ROAD FOREST HILL, MD 21050 HOWARD S. KLEIN 2101 ROCKSPRING ROAD FOREST HILL, MD 21050 HOWARD S. KLEIN 2101 ROCKSPRING ROAD FOREST HILL, MD 21050 2 Compensation of five highest-paid employees (other than those incompany) (a) Name and address of each employee paid more than \$50,000	to position PRESIDENT 1.00 VICE PRESIDEN 1.00 VICE PRESIDEN 1.00 SECREATRY/TRE 1.00 cluded on line 1). If none, hours per week	(If not paid, enter -0-) O. T O. ASURER O. enter "NONE."	O . O . (d) Contributions to employee benefit plans and detered	(e) Exper	0. 0.
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Total number of other employees paid over \$50,000

KLEINS SHOPRITE OF MARYLAND CHARITABLE

Form 990-PF (2012) FUND, INC.	45-5	5512541 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	ition Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, ente	r "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities		• 0
List the foundation's four largest direct charitable activities during the tax year. Include relevant statis number of organizations and other beneficiaries served, conferences convened, research papers pro-	tical information such as the duced, etc.	Expenses
1 N/A		•
2		
3		
4		
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 and 2.	Amount
1 <u>N/A</u>		
2		· · · · · · · · · · · · · · · · · · ·
<u> </u>		
All other program-related investments. See instructions. 3		
Total. Add lines 1 through 3		0.

FUND, INC.

45-5512541

Page 8

P	Minimum Investment Return (All domestic foundations must complete this part Foreign foundations	ndations,	see instructions)
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	0.
	Average of monthly cash balances	1b	54,264.
	Fair market value of all other assets	10	.0.
d	Total (add lines 1a, b, and c)	1d	54,264.
	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	54,264.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	814.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	53,450.
6	Minimum investment return Enter 5% of line 5	6	2,673.
=	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	2,673.
2a	Tax on investment income for 2012 from Part VI, line 5		
Ъ	Income tax for 2012. (This does not include the tax from Part VI.)] '	
C	Add lines 2a and 2b	2c	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	2,673.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	2,673.
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	2,673.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	0.
Ь	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:]	•
a	Suitability test (prior IRS approval required)	3a	
Ь	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	<u> </u>
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	<u> </u>
6	Adjusted qualifying distributions Subtract line 5 from line 4	6	0.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation 4940(e) reduction of tax in those years.	qualifies fo	or the section

Form **990-PF** (2012)

FUND, INC.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2011	(c) 2011	(d) 2012
1 Distributable amount for 2012 from Part XI, line 7				2,673.
2 Undistributed income, if any, as of the end of 2012			····	•
a Enter amount for 2011 only		,	0.	
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.		<u>. </u>	
4 Qualifying distributions for 2012 from				
Part XII, line 4: ► \$0.			_	
a Applied to 2011, but not more than line 2a			0.	
b Applied to undistributed income of prior		_		
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2012 distributable amount				0.
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	٠			
4a from line 2a. Taxable amount - see instr	i	_	0.	
f Undistributed income for 2012. Subtract				•
lines 4d and 5 from line 1. This amount must				-
be distributed in 2013			<u> </u>	2,673.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				ì
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2007				
not applied on line 5 or line 7				
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			1,	F . 000 DE (0040)

KLEINS SHOPRITE OF MARYLAND CHARITABLE Form 990-PF (2012) FUND. INC. 45-5512541 Page 10 Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9) N/A 1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2012, enter the date of the ruling 4942(1)(5) b Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) · or Prior 3 years 2 a Enter the lesser of the adjusted net Tax year (c) 2010 (d) 2009 (b) 2011 (e) Total (a) 2012 income from Part I or the minimum investment return from Part X for each year listed **b** 85% of line 2a c Qualifying distributions from Part XII, line 4 for each year listed d Amounts included in line 2c not used directly for active conduct of exempt activities e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c Complete 3a, b, or c for the alternative test relied upon: a "Assets" alternative test - enter: (1) Value of all assets (2) Value of assets qualifying under section 4942(j)(3)(B)(i) b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year c "Support" alternative test - enter: (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) (2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii) (3) Largest amount of support from an exempt organization (4) Gross investment income Part XV Supplementary 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).) NONE 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 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs: Check here Lifthe 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:

Form 990-PF (2012)

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

c Any submission deadlines:

Form 990-PF (2012) FUND, INC.

45-5512541 Page 11

Grants and Contributions Paid During to	ne Year or Approved for Future F	Payment		
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year	Of Substantial Continuor	Toolpion.		
2 · dia dai.ing tino you]
NONE				
NONE -				
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Total			▶ 3a	
b Approved for future payment				
		•		
NONE				
				}
				•
		,		
T-11		<u> </u>		
Total	 	<u> </u>	<u>▶ 3b</u>	 Form 990-PF (201

Part XVI-A Analysis of Income-Producing Activities

nter gross amounts unless otherwise indicated.	Unrelated	ousiness income		by section 512, 513, or 514	(e) _
l Program service revenue:	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
a					
b	1				
·		 _			
J					· · · · · · · · · · · · · · · · · · ·
					·
Fees and contracts from government agencies	 				
Nembership dues and assessments					
nterest on savings and temporary cash					•
nvestments Dividends and interest from securities	-				
	 				
let rental income or (loss) from real estate:					
Debt-financed property					·
Not debt-financed property Net rental income or (loss) from personal					·
• • •					
property					
Other investment income	<u> </u>				
Gain or (loss) from sales of assets other]				
than inventory			0.1	02 420	
Net income or (loss) from special events			01	83,428.	
Gross profit or (loss) from sales of inventory	 , 				
Other revenue:					
·					
d					. •
e Subtotal. Add columns (b), (d), and (e)				83,428.	
Total. Add line 12, columns (b), (d), and (e)	<u> </u>		•1	13	83,428
e worksheet in line 13 instructions to verify calculation:	c /		•	10	05,420
Relationship of Activities The No. Explain below how each activity for which the foundation's exempt purposes (other the foundation's exempt purposes).	ıncome is reported in	column (e) of Part XVI			lishment of
CHARITY GOLF TOURNAM					
					

										age 13
Part 1	XVII			ansfers To a	and Transactions a	and Relations	ships With Nonc	haritable	9	
1 Did	the ora			nv of the followin	g with any other organization	on described in sec	tion 501(c) of		Yes	No
(1)	Cash							1a(1)		X
(2)	Other	assets					-	1a(2)		X
b Oth	er trans	actions:							Ì	
(1)	Sales	of assets to a noncharita	ible exempt organ	nzation				1b(1)	:	X
_(2)	Purch	ases of assets from a no	ncharitable exem	pt organization				1b(2)		X
(3)	Rental	of facilities, equipment,	or other assets				,	1b(3)		X
		-	3				•	1b(4)		X
		_								X
	Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations Did the organization directly or inderectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? Transfers from the reporting foundation to a noncharitable exempt organization of: (1) Cash			X						
	Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations									X
				_					seis,	
					eu iess tiiali iali iiiaiket valt	ie ili aliy tralisacilo	ii or Sharing arrangeme	iii, Silow ia•		
					exempt organization	(d) Description	on of transfers, transactions	and sharing ar	rangem	ents
(-)	<u> </u>	b) i modili mi ottod	(6) //		- gamean	(4) 5000 (5.10	.,, 0, 11410.010, 11410.001010,		-	
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		-				izations described			٦٠	No [2
				r(c)(3)) or in sec	11011 527 7			L 162	ما	טא רל
0 11	165, 00				(b) Type of proapization	T	(c) Description of relat	ionshin		
		<u>`</u>	gamzadon		(b) Typo or or gameation		(0) 2000			
		II/ A								
							·			
			-		· · · · · · · · · · · · · · · · · · ·					
								May the IRS	discuss	this.
Sign	and be	light is true, correct, and co	emplete Declaration	of preparer (other tha	n taxpayer) is based on all infori	mation of which prepar	er has any knowledge	return with th	e prepa	ver
Here		Makenay!	V: Ku	<u> </u>	14/13/13	* DIKE	TOR			No
	Sign	ature of officer or trusted	e			Title		<u> </u>		
		Print/Type preparer's n	ame	Preparer's s	ignature	Date		TIN		
.				\boldsymbol{K}	0 Y ()().	10//	self- employed			
Paid				1/10 00.	1 P 10 1/1 /0 a	112112	j i			
Prep		SUSAN KELI Firm's name ► ELI		CKER, CH	AK PUVU ARTERED	11413.	Firm's EIN ► 52	P00245)

Form **990-PF** (2012)

410-727-5735

Firm's address ▶ 100 S CHARLES ST SUITE 1300

BALTIMORE, MD 21201

Phone no.

FORM 990-PF	OTHER	INCOME		STATEMENT	1
DESCRIPTION		(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	Ξ
GROSS INCOME FROM SPECIAL FUNDRAISING EVENTS		118,085.	0.		
TOTAL TO FORM 990-PF, PART I,	LINE 11 =	118,085.	0.		_
FORM 990-PF (EXPENSES		STATEMENT	2
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITABI E PURPOSES	
GOLF TOURNAMENT	34,658	. 0	•	• (0.
TO FORM 990-PF, PG 1, LN 23	34,658	0	•		0.

(Rev January 2013)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No. 1545-1709

 If you are 	filing for an Automatic 3-Month Extension, o	omplete o	nly Part I and check th	is box	▶ X					
• If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form)										
Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868										
Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs gov/efile and click on e-file for Charities & Nonprofits. Part Automatic 3-Month Extension of Time. Only submit original (no copies needed).										
A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete										
•	• • • • • • • • • • • • • • • • • • • •			•						
All other cor	porations (including 1120-C filers), partnersh	ins. REMIC	Cs. and trusts must use I	Form 7004 to request an extension	of time					
All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Enter filer's identifying number, see instructions										
	Name of exempt organization or other filer, see in	structions		Employer identification number (EIN)						
Type or				, ,						
print File by the due date for	KLEIN'S SHOPRITE OF MARYLAND Number, street, and room or suite no. If a P O. box	45-5512541 Social security number (SSN)								
filing your return See	2101 ROCK SPRING ROAD	<u> </u>								
instructions	City, town or post office, state, and ZIP code For a foreign address, see instructions.									
	FOREST HILL, MD 21050									
Enter the Re	eturn code for the return that this application i	s for (file a	a separate application for	or each return)	0 4					
Application		Return	Application		Return					
ls For	i	Code	Is For		Code					
	Form 990-EZ	01	Form 990-T (corporat	tion)	07					
Form 990-BI		02	Form 1041-A		08					
Form 4720- (individual)			Form 4720		09					
Form 990-Pi		03 04	Form 5227		10					
Form 990-T (sec 401(a) or 408(a) trust)			Form 6069		11					
Form 990-T (trust other than above)			Form 8870		12					
• The book	s are in the care of ► <u>THE ORGANIZATIO</u>	JN								
Telephone No. ▶ FAX No ▶										
	anization does not have an office or place of l				▶ 🔲					
If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is										
for the whole group, check this box ▶ If it is for part of the group, check this box ▶ and attach										
a list with the names and EINs of all members the extension is for.										
1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time										
until AUGUST 15 , 20 13 , to file the exempt organization return for the organization named above The extension is										
for the organization's return for:										
	tox year beginning	20	and ending	20						
▼ x calendar year 20 12 or tax year beginning										
2 If the t	ax year entered in line 1 is for less than 12 m	onths che	ck reason: X Initial i	return Final return						
2 If the tax year entered in line 1 is for less than 12 months, check reason: X Initial return Final return Change in accounting period										
3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any										
nonref	3a \$	0.00								
	efundable credits and									
estima	l l	0.00								
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS										
(Electi	ronic Federal Tax Payment System) See instru	ictions.		3c \$	0.00					
Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.										
For Privacy	Form 8868	Rev 1-2013)								

	868 (Rev. 1-2013)					Page 2								
	u are filing for an Additional (Not Automatic) 3-Mo					. ▶ ☑								
	Only complete Part II if you have already been granu are filing for an Automatic 3-Month Extension, of			usly filed	Form 8	3868								
				200100.0	oodod)									
Fair	Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed). Enter filer's identifying number, see instru													
	Name of exempt organization or other filer, see in	structions		Employer identifying number, see instructions										
Type or print	or f	Employor tochunos	45-5512541											
•	Number, street, and room or suite no. If a P.O. bo	LEIN'S SHOPRITE OF MARYLAND CHARITABLE FUND lumber, street, and room or suite no. If a P O. box, see instructions.												
File by to	the													
filing yo	City, town or post office, state, and ZIP code Fo.	City, town or post office, state, and ZIP code For a foreign address, see instructions.												
return.	1	FOREST HILL, MD 21050												
Enter	the Return code for the return that this application i	s for (file a	separate application for each return)			0 4								
Application Is For		Return	Application	polication										
		Code	Is For			Return Code								
Form 990 or Form 990-EZ		01		k k	7. 5									
Form 990-BL			Form 1041-A			08								
Form 4720 (individual)			Form 4720		•	09								
Form 990-PF			Form 5227			10								
Form 990-T (sec. 401(a) or 408(a) trust)			Form 6069			11								
Form 990-T (trust other than above)		06	Form 8870			12								
	Do not complete Part II if you were not already gra				ed Forn	n 8868.								
• The	books are in the care of ► THE ORGANIZATION													
1010	phone No. P	. 1700				. =								
	e organization does not have an office or place of o	usiness in	the United States, check this box .											
• If thi	s is for a Group Return, enter the organization's fou					this is								
	-	-	t of the group, check this box	. ▶ [_J and a	attach a								
iist wi	th the names and EINs of all members the extension	n is ior.												
4	I request an additional 3-month extension of time	until	NOVEMBER 15 20	13										
5	I request an additional 3-month extension of time until NOVEMBER 15 , 20 13 . For calendar year 2012 , or other tax year beginning , 20 , and ending , 20													
6	If the tax year entered in line 5 is for less than 12 months, check reason: Initial return Final return													
•	Change in accounting period													
7	State in detail why you need the extension													
			••											
	16 th 15 - th 6 - 15 000 PL 000 PE 000	0 T 4700	ar COCO anton the tentature to be less		1									
8a	If this application is for Form 990-BL, 990-PF, 990 nonrefundable credits. See instructions.	U-1, 4/2U,	•	=										
1.		4700 0	\$	(
b	If this application is for Form 990-PF, 990-T, estimated tax payments made. Include any price				1									
estimated tax payments made. Include any prior amount paid previously with Form 8868.			spayment allowed as a credit and a		\$									
С	Balance due. Subtract line 8b from line 8a. Include ye	our navmen	t with this form if required, by using FFT		 -									
J	(Electronic Federal Tax Payment System). See instruc		and the second of the second o	8c	\$	(
	· · · · · · · · · · · · · · · · · · ·					•								

Signature and Verification must be completed for Part II only.

Under penalties of	perjury, I	declare 1	that I have	examined	this	form,	including	accompanying	schedules	and	statements,	and	to t	he best	of n	ny
knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form																

Krister King Title CPA

Date > 8.15,13

Form **8868** (Rev 1-2013)