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Form . 990-PF

Return of Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation

2012

Department of the Treasury Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements For calendar year 2012 or tax year beginning JUN 8, 2012 and endino DEC 31, 2012 A Employer identification number Name of foundation 45-5537745 MARIE G. SOLIS FOUNDATION Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number 400 215-345-4301 308 N. MAIN STREET City or town, state, and ZIP code C If exemption application is pending, check here 18914 CHALFONT, PA X Initial return Initial return of a former public charity G Check all that apply: D 1 Foreign organizations, check here Final return Amended return 2. Foreign organizations meeting the 85% test check here and attach computation Address change Name change X Section 501(c)(3) exempt private foundation 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 I Fair market value of all assets at end of year | J | Accounting method: X Cash Accrual If the foundation is in a 60-month termination (from Part II, col. (c), line 16) Other (specify) under section 507(b)(1)(B), check here 236, 283. (Part I, column (d) must be on cash basis.) ▶\$ Part I Analysis of Revenue and Expenses (d) Disbursements (a) Revenue and (b) Net investment (c) Adjusted net (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) for charitable purposes (cash basis only) expenses per books income ıncome 249,881. N/A Contributions, gifts, grants, etc., received Check If the foundation is not required to attach Sch. B. Interest on savings and temporary cash investments 241 241 STATEMENT 4 Dividends and interest from securities 5a Gross rents b Net rental income or (loss) 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 0. 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 250,122. 241 Total. Add lines 1 through 11 12,000. 0. 0. Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits Operating and Administrative Expenses 16a Legal fees **b** Accounting fees c Other professional fees RECEIVED 17 Interest 0. STMT 2 850. 0 18 Taxes)SO-8 19 Depreciation and depletion OCT 1 1 2013 20 Occupancy 21 Travel, conferences, and meetings OGDEN. UT 22 Printing and publications STMT 3 1,580 0 0. 23 Other expenses 24 Total operating and administrative 14,430 0 0. expenses Add lines 13 through 23 0. 25 Contributions, gifts, grants paid 0. 26 Total expenses and disbursements. 14.430 0 0. Add lines 24 and 25 27 Subtract line 26 from line 12: 235,692. 2 Excess of revenue over expenses and disbursements 241 b Net investment income (if negative, enter -0-)

C Adjusted net income (if negative, enter -0-)

N/A

For	m 99	0-PF (2012) MARIE G. SOLIS FOUNDATI			5537745 Page 2
P	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
		Cash - non-interest-bearing		200 515	000 515
		Savings and temporary cash investments		200,517.	200,517.
	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			
ts	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
⋖	10 a	Investments - U.S. and state government obligations			
	b	Investments - corporate stock STMT 4	0.	24,639.	<u> 25,591.</u>
	C	Investments - corporate bonds			
	11	Investments - land, buildings, and equipment basis]		
		Less accumulated depreciation	1		
	12	Investments - mortgage loans			· · · · · · · · · · · · · · · · · · ·
	13	Investments - other STMT 5	0.	10,536.	10,175.
	14	Land, buildings, and equipment: basis			1
		Less accumulated depreciation			<u> </u>
	15	Other assets (describe ►)			
					1
	16	Total assets (to be completed by all filers)	0.	235,692.	236,283.
	17	Accounts payable and accrued expenses			1
	18	Grants payable			1
S	19	Deferred revenue			
Liabılities	20	Loans from officers, directors, trustees, and other disqualified persons			
aþi	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			
		and complete lines 24 through 26 and lines 30 and 31.			
Ses	24	Unrestricted			
Fund Balances	25	Temporarily restricted			
Bal	26	Permanently restricted			
pu		Foundations that do not follow SFAS 117, check here			
		and complete lines 27 through 31.			
s or	27	Capital stock, trust principal, or current funds	0.	0.	
set	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
As	29	Retained earnings, accumulated income, endowment, or other funds	0.	235,692.	
Net Assets	30	Total net assets or fund balances	0.	235,692.	
_					
	31	Total liabilities and net assets/fund balances	0.	235,692 <u>.</u>	
	\	Analysis of Changes in Net Assets or Fund E	Ralances	-	
	art				
1	Tota	I net assets or fund balances at beginning of year - Part II, column (a), line	e 30		
	(mu	st agree with end-of-year figure reported on prior year's return)		1	0.
2	Ente	r amount from Part I, line 27a		2	235,692.
3	Othe	r increases not included in line 2 (itemize)		3_	0.
4	Add	lines 1, 2, and 3		4	235,692.
		reases not included in line 2 (itemize) 🕨		5	0.
6	Tota	I net assets or fund balances at end of year (line 4 minus line 5) - Part II, o	column (b), line 30	6	235,692.

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See the Part VI instructions.

Enter qualifying distributions from Part XII, line 4

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.

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Pa	irt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or	4948	- see	instru	ctio	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here 🕨 🔲 and enter "N/A" on line 1.					
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)					
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%	1				_5.
	of Part I, line 27b					·
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).		,			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2				0.
3	Add lines 1 and 2	3				5.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4				0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5				5.
6	Credits/Payments:					
а	2012 estimated tax payments and 2011 overpayment credited to 2012		ļ			
	Exempt foreign organizations - tax withheld at source 6b	7	1			
	Tax paid with application for extension of time to file (Form 8868)	7				
	Backup withholding erroneously withheld 6d	7				
	Total credits and payments. Add lines 6a through 6d	7 7	ļ			0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8		•		
9	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed	9				5.
10	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10				
	Enter the amount of line 10 to be: Credited to 2013 estimated tax	11				
	art VII-A Statements Regarding Activities					
18	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or interven	e ın			Yes	No
	any political campaign?			1a		Х
Ŀ	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?			16		х
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials publish	ned or				
	distributed by the foundation in connection with the activities.					
	Did the foundation file Form 1120-POL for this year?			1c		X
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:					
	(1) On the foundation. \blacktriangleright \$ 0 . (2) On foundation managers. \blacktriangleright \$					
•	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation	_				
	managers. ► \$ 0.					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		Х
	If "Yes," attach a detailed description of the activities					
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation,	or				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		Х
48	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		Х
	o If "Yes," has it filed a tax return on Form 990-T for this year?	N	/ A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		•	5		Х
	If "Yes," attach the statement required by General Instruction T.					
6	and the second s					
	By language in the governing instrument, or					
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the sta	te law				
	remain in the governing instrument?			6		Х
7	Did the foundation have at least \$5,000 in assets at any time during the year?			7	Х	
	If "Yes," complete Part II, col. (c), and Part XV.					
88	Enter the states to which the foundation reports or with which it is registered (see instructions)					
-	PA					
t	of the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)					
	of each state as required by General Instruction G? If "No," attach explanation			8b	Х	1
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for ca	endar				
	year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If "Yes," complete Part XIV			9		х
		этмп		40	v	

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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	<u> </u>	_X_
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privilege	s?		
	If "Yes," attach statement (see instructions)	12_	<u> </u>	<u>X</u>
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► N/A			
14	The books are in care of \blacktriangleright RENEE C. ROCK			
	Located at ► 308 N. MAIN STREET, STE 400, CHALFONT, PA ZIP+4	▶ <u>18914</u>		
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	N.	[/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	L.,	_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			
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?	」No │		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)	_		
	a disqualified person?	_		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	_ No		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	l No		
	(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)?	」No		
	(6) Agree to pay money or property to a government official? (Exception Check "No"			
	if the foundation agreed to make a grant to or to employ the official for a period after	_		
	termination of government service, if terminating within 90 days.)	」No │		
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	<u>1b</u>		<u>X</u>
	Organizations relying on a current notice regarding disaster assistance check here	·Ш		
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			
	before the first day of the tax year beginning in 2012?	1c		<u>X</u>
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			
	defined in section 4942(j)(3) or 4942(j)(5)).			
а	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	¬		
	before 2012?	」No		
	If "Yes," list the years , , , , , , , , , , , , , , , , , , ,			
b	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	/3 0		
_		/A 2b		
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
0	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
Ja		7 No		
L		ן אוי ב		
0	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 dispose			
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,			
		/A 3b		
				X
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	4a		
0		46		x
	had not been removed from jeopardy before the first day of the tax year beginning in 2012?	Form 99 0)-PF /	
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Part VII-B Statements Regarding Activities for Which F	orm 4720 May Be F	Required (continu	ıed)	
5a' During the year did the foundation pay or incur any amount to:				
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	1 4945(e))?	☐ Ye	s X No	
(2) Influence the outcome of any specific public election (see section 4955); o		ectly,		
any voter registration drive?	•		s X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes	7	☐ Ye	s X No	
(4) Provide a grant to an organization other than a charitable, etc., organization				
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 f			
the prevention of cruelty to children or animals?	or oddodnorial parposos, or i		s X No	1 1
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	fer the excentions described i			1 1
section 53.4945 or in a current notice regarding disaster assistance (see instru		iii riogalationo	N/A	5b
Organizations relying on a current notice regarding disaster assistance check h				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fi		ınad		1 1
expenditure responsibility for the grant?		I/A 🔲 Ye	s No	
		1/A	5 <u> </u>	
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		s X No	
a personal benefit contract?		үе		a. 37
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?		<u> </u>	6b X
If "Yes" to 6b, file Form 8870.	.		[32]	
7a At any time during the tax year, was the foundation a party to a prohibited tax s		Ye	s X No	71
b If "Yes," did the foundation receive any proceeds or have any net income attribu	itable to the transaction?			7b
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors	ees, Foundation Ma	inagers, Higniy	/	
1 List all officers, directors, trustees, foundation managers and their		(c) Compensation	(d) Contributions to	(a) Evpance
(a) Name and address	(b) Title, and average hours per week devoted	(If not paid,	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
	to position	enter -0-)	compensation	allowances
	PRESIDENT			
308 N. MAIN STREET, STE 400	1 00	10.000	•	
CHALFONT, PA 18914	1.00	12,000.	0.	0.
			ı	
	<u></u>			<u> </u>
				<u> </u>
		<u> </u>		
2 Compensation of five highest-paid employees (other than those inc	Γ΄	enter "NONE."	(d) Contributions to	T
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
(a) Hamis and addition of out of the project of the	devoted to position	(c) companion	compensation	allowances
NONE				
			_	
	Į			
Total number of other employees paid over \$50,000	·			0
		_	Form	990-PF (2012)

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		
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	stical information such as the duced, etc.	Expenses
1 N/A		
1 44/ 42		
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 or	lines 1 and 2.	Amount
1 N/A		
2		
All other program-related investments. See instructions.		1000
3		
Tabel Add base 4 through 2	•	0.
Total. Add lines 1 through 3		

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P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign fou	ndations, se	e 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	24,061.
ь	Average of monthly cash balances	1b	24,061. 194,597.
C	Fair market value of all other assets	10	
d	Total (add lines 1a, b, and c)	1d	218,658.
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	218,658.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	3,280.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4	5	215,378.
6	Minimum investment return. Enter 5% of line 5 ADJUSTED FOR SHORT TAX PERIOD	6	6,107.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are	nd certain	<u>-</u>
_	toreign organizations check here and do not complete this part.)		6 100
1	Minimum investment return from Part X, line 6	1	6,107.
2a	Tax on investment income for 2012 from Part VI, line 5		
b			-
	Add lines 2a and 2b	2c	5.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	6,102.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	6,102.
6	Deduction from distributable amount (see instructions)	6	0.
<u>7_</u>	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	6,102.
P	Part XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	200	1a	0.
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	
	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	0.
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	0.
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	qualifies for th	ie section
	4940(e) reduction of tax in those years.		

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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,	Оограз	rears prior to 2011	2011	2012
line 7				6,102.
2 Undistributed income, if any, as of the end of 2012				0,102.
a Enter amount for 2011 only			0.	
b Total for prior years:				
, starter print 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				<u>-</u>
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	0.			0.
(If an amount appears in column (d), the same amount must be shown in column (a))				
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				
be distributed in 2013				6,102.
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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Part XIV Private Operating F	oundations (see in	structions and Part VI	I-A, question 9)	N/A	
1 a If the foundation has received a ruling of					
foundation, and the ruling is effective fo	r 2012, enter the date of	the ruling	▶ ∟		
b Check box to indicate whether the found	d <u>ation is a private operatii</u>	ng foundation described	n section	4942(j)(3) or 4	1942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2012	(b) 2011	(c) 2010	(d) 2009	(e) Total
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					
 Qualifying distributions made directly 					
for active conduct of exempt activities.				1	
Subtract line 2d from line 2c					
3 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 listed					
c "Support" alternative test - enter:				1	
(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	rmation (Comple	to this new entre	if the foundation	- had \$5 000 as w	oro in coorts
Part XV Supplementary Info			if the foundation	n nad \$5,000 or m	iore in assets
		iuctions.)			
 Information Regarding Foundation List any managers of the foundation with 	-	than 20% of the total cont	tributions received by the	a foundation hafara tha al	aca of any tay
vear (but only if they have contributed i			indutions received by the	e toutidation before the ci	use of any lax
, , , ,	11010 than 40,000). (000 t	0000011 007 (4)(2).)			
NONE b List any managers of the foundation when the foundation wh	no own 10% or more of th	ne stock of a corporation	(or an equally large port	ion of the ownership of a	nartnershin or
other entity) of which the foundation ha			(or an oqually large port	ion of the owneromp of the	paranoromp or
NONE					
2 Information Regarding Contribut	tion, Grant, Gift, Loan	, Scholarship, etc., Pi	rograms:		
	only makes contributions			not accept unsolicited rec	quests for funds. If
the foundation makes gifts, grants, etc.	(see instructions) to indiv	viduals or organizations i	ınder other conditions, c	complete items 2a, b, c, ar	nd d.
a The name, address, and telephone num	ther or e-mail of the perso	on to whom applications:	should be addressed:		
RENEE C. ROCK	c. c man or mo poroc	applications			
b The form in which applications should	he cultimitted and informa	tion and materials they s	hould include:		
NO SPECIFIC FORM	DE SUDMILLEO AND INIOTHIA	tion and materials they s	nodia include.		
c Any submission deadlines:					
NONE		 			
d Any restrictions or limitations on award	is, such as by geographic	al areas, charitable fields,	kınds of ınstitutions, or	other factors:	
NONE					
223601 12-05-12					Form 990-PF (2012)
EL0001 1E 00 1E					101111 222 1 1 (2012)

	(
3 Grants and Contributions Paid During the Y	ear or Approved for Future	Payment		
Recipient	If recipient is an individual,	Foundation	Purpose of grant or	
Namę and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	status of recipient	Purpose of grant or contribution	Amount
a Paid during the year				
Y0Y5				
NONE				
	1			
				
Total			▶ 3a	0.
b Approved for future payment				
NONE				
110112				
				•
Total		ł	▶ 3b	. 0

Part XVI-A Analysis of Income-Producing Activities

inter gross amounts unless otherwise indicated.	Unrelated business income		Exclu	ided by section 512, 513, or 514	(e)
•	(a) Business	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
1 Program service revenue:	code		Code		Tanoton moonto
a				-	
b	_		 		
<u> </u>		_		_	
d					
e				_	
- Francisco de la constanta de	· - ·				
g Fees and contracts from government agencies			<u> </u>		
2 Membership dues and assessments			i	-	
3 Interest on savings and temporary cash			1		
Investments 4 Devide de end interest from executives			14	241.	
4 Dividends and interest from securities	-		1 44	241.	
5 Net rental income or (loss) from real estate:		<u></u>			
a Debt-financed property			1		
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other				!	
than inventory	<u> </u>		<u> </u>		
9 Net income or (loss) from special events	<u> </u>				
10 Gross profit or (loss) from sales of inventory			1		
11 Other revenue:					
a			 		
b			<u> </u>		
C					
)			
d					
e		0		241	0
e		0.			0.
e		0.			0. 241.
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.)	o the Acc			13	0. 241.
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to		omplishment of Ex	kemp	13 ot Purposes	241.
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which incor	me is reported	omplishment of Ex	kemp	13 ot Purposes	241.
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which incor	me is reported	omplishment of Ex	kemp	13 ot Purposes	241.
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which incor	me is reported	omplishment of Ex	kemp	13 ot Purposes	241.
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which incor	me is reported	omplishment of Ex	kemp	13 ot Purposes	241.
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which incor	me is reported	omplishment of Ex	kemp	13 ot Purposes	241.
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which incor	me is reported	omplishment of Ex	kemp	13 ot Purposes	241.
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which incor	me is reported	omplishment of Ex	kemp	13 ot Purposes	241.
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which incor	me is reported	omplishment of Ex	kemp	13 ot Purposes	241.
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which incor	me is reported	omplishment of Ex	kemp	13 ot Purposes	241.
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which incor	me is reported	omplishment of Ex	kemp	13 ot Purposes	241.
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which incor	me is reported	omplishment of Ex	kemp	13 ot Purposes	241.
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e 12 Subtotal. Add columns (b), (d), and (e) 13 Total Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which incor	me is reported	omplishment of Ex	kemp	13 ot Purposes	241.
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which incor	me is reported	omplishment of Ex	kemp	13 ot Purposes	241.
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which incor	me is reported	omplishment of Ex	kemp	13 ot Purposes	241.
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which incor	me is reported	omplishment of Ex	kemp	13 ot Purposes	241.
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which incor	me is reported	omplishment of Ex	kemp	13 ot Purposes	241.
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which incor	me is reported	omplishment of Ex	kemp	13 ot Purposes	241.
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which incor	me is reported	omplishment of Ex	kemp	13 ot Purposes	241.
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total Add line 12, columns (b), (d), and (e) 15 See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which incompared to the second seco	me is reported	omplishment of Ex	kemp	13 ot Purposes	241.

2) MARIE G. SOLIS FOUNDATION 45-5537745 Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

	_	rectly engage in any of the following			1 501(c) of		Yes	No
)(3) organizations) or in section 52		zations?				
a Transf	ers from the reporting founda	ation to a noncharitable exempt or	ganization of:					
(1) C	ash					1a(1)		X
(2) 0	ther assets					1a(2)		Х
b Other	transactions;							
(1) S	ales of assets to a nonchantal	ble exempt organization				16(1)		_X_
		ncharitable exempt organization				1b(2)		
	ental of facilities, equipment,					1b(3)		Y
	eimbursement arrangements					1b(4)		Y
	oans or loan guarantees					1b(5)		v
		mbership or fundraising solicitation	nne			1b(6)		v
		iling lists, other assets, or paid em				1c		X X X X X
		"Yes," complete the following sche		our about the four me	rivet value of the seeds of			
		oundation. If the foundation receiv					515,	
		other assets, or services received.		s iii airy transaction o	i Sharing arrangement, Sh	OW III		
a) Line no	(b) Amount involved	(c) Name of noncharitable		(d) p				
a) Line no	- (b) Amount involved	 ''		(u) Description o	f transfers, transactions, and si	naring arr	angeme	nts
		N/A						
					<u> </u>			
								
	-							
			· -					
	-				·			
2a Isthe	foundation directly or indirect	tly affiliated with, or related to, one	or more tay-eyempt organiz	ations described		_		
		r than section 501(c)(3)) or in sect		anons acsombed		Yes	Y] No
	," complete the following sch		11011 021		<u> </u>	_ 163] 140
<u>u 11 163</u>	(a) Name of org		(b) Type of organization		Description of relationship			
·		unzation	(b) Type of organization	10	Description of relationship	p		
	N/A							
	-							
1			<u> </u>					
		that I have examined this return, includir nplete Declaration of preparer (other tha			May	he IRS d	scuss t	his
oign 🗀				ND.	show	with the n below (
Here	Hu	CO X LE	1/0/7/13	Presi	dent x	Yes		No
	Signature of officer or trustee		Date	Title	<u> </u>			
	Print/Type preparer's na	ame Preparer's s	ignature \	Date C	heck if PTIN			
		$V \cup V$	/ /	s	elf- employed			
Paid	DENNIS K.	DUNLAP /	- Muy	10/1/13	P00	010	512	
Prepare	er Firm's name ► DUN	LAP & ASSOCIATE	S, P.C.		Firm's EIN ► 23-30			
Use On	ly		<i>,</i>				-	
	Firm's address ▶ 13	00 HORIZON DRIV	E, SUITE 106					
	l l	ALFONT, PA 1891			Phone no. (215)	997.	-56	በበ
						າ 990.		

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

Organization type (check one) Filers of: Section: Form 990 or 990-EZ	
Form 990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation	
4947(a)(1) nonexempt charitable trust not treated as a private foundation	
527 political organization	
Form 990-PF X 501(c)(3) exempt private foundation	
4947(a)(1) nonexempt charitable trust treated as a private foundation	
501(c)(3) taxable private foundation	
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	e See instructions
General Rule	
For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in mo contributor. Complete Parts I and II	ney or property) from any one
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 regulation 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the goof 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 contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or edu 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 contributions for use <i>exclusively</i> for religious, charitable, etc., purposes, but these contributions did not total if this box is checked, enter here the total contributions that were received during the year for an <i>exclusively</i> purpose. Do not complete any of the parts unless the General Rule applies to this organization because it religious, charitable, etc., contributions of \$5,000 or more during the year.	al to more than \$1,000 y religious, charitable, etc ,
Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on Part I certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF) LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B	, line 2 of its Form 990-PF, to

Name of organization

Employer identification number

MARIE G. SOLIS FOUNDATION

45-5537745

Part I	Contributors (see instructions) Use duplicate copies of Part I if	additional space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	ESTATE OF MARIE SOLIS 308 N. MAIN STREET, SUITE 400 CHALFONT, PA 18914	\$249,421.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
223452 12-2	1-12	Schedule B (Form	990, 990-EZ, or 990-PF) (2012)

Name of organization

Employer identification number

MARIE G. SOLIS FOUNDATION

45-5537745

Part li	Noncash Property (see instructions) Use duplicate copies of Part	additional space is needed				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received			
		\$				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received			
		\$				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received			
		\$				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received			
		 \$	00 000 E7 or 000 PE) /2012)			

Employer identification number

MARIE C	S. SOLIS FOUNDATION			45-5537745			
Part III	Exclusively religious, charitable, etc., indiv, year. Complete columns (a) through (e) and the total of exclusively religious, charitable, etc.	ne following line entry. For organizations, contributions of \$1,000 or less for	ons completing Part III. enter				
/=\ NI=	Use duplicate copies of Part III if addition	al space is needed					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held			
_	Transferee's name, address, a	(e) Transfer of git		nsferor to transferee			
-							
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	(d) Description of how gift is held			
		(e) Transfer of git	ht				
_	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee				
-							
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held			
-		(e) Transfer of git					
-	Transferee's name, address, a	nd ZIP + 4	Relationship of tra	insferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held			
-							
	(e) Transfer of gift						
-	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee				
-							

	, ,					•	•
Form 8	3868 (Rev. 1-2013)						Page 2
	ou are filing for an Additional (Not Automatic) 3-Month Ex	tension, d	complete only Part II and check this	box			X
Note.	Only complete Part II if you have already been granted an a	utomatic	3-month extension on a previously fi	led Form	3868		
	ou are filing for an Automatic 3-Month Extension, comple		•				
Part				al (no co	opies nee	eded).	
			Enter filer's	identifvin	a number.	see inst	ructions
Type	or Name of exempt organization or other filer, see instru	ctions			identificati		
print					01 (2111) 01		
•	hby the MARIE G. SOLIS FOUNDATION					3774	5
due date	e date for Number, street, and room or suite no. If a P.O. box, see instructions			Social security number (SSN)			
filing you return S	" 200 M MATAL CONDERS NO. 400					, (OO, 1)	,
instructi		oreign add	ress, see instructions				
	CHALFONT, PA 18914	or origin acco	nood, ood mediaettorio.				
							
Enter	the Return code for the return that this application is for (file	a senara	te application for each return)				0 4
	the country of the country and the application to for the	o a copara	to application for each return,		•	•	(ATE)
Applic	cation	Return	Application	· · · · · · · · · · · · · · · · · · ·			Return
Is For		Code	Is For				Code
	990 or Form 990-EZ	01	13101	·-··			Oode
	990-BL	02	Form 1041-A		- `'	 .	08
	4720 (individual)	03	Form 4720				09
	990-PF	04	Form 5227				10
	990-T (sec. 401(a) or 408(a) trust)	05	Form 6069				11
	990-T (trust other than above)	06	Form 8870				12
	! Do not complete Part II if you were not already granted			iously file	d Form 88		1 12
9101	RENEE C. ROCK	an autor	natic o-month extension on a prev	IOUSIY IIIE	CU FORIII OO	00.	
• The	e books are in the care of 308 N. MAIN STI	REET.	STE 400 - CHALFON	Ψ. РА	18914	ı	
	ephone No. ► 215-345-4301		FAX No. ▶ 215-997-39			-	
	he organization does not have an office or place of business	s in the Ui				•	
	his is for a Group Return, enter the organization's four digit			f this is fo	r the whole	oroup. c	heck this
box		7	ach a list with the names and EINs or				
	· · · · · · · · · · · · · · · · · · ·		BER 15, 2013.		<u> </u>		
	For calendar year, or other tax year beginning			a DEC	31. 2	2012	
	If the tax year entered in line 5 is for less than 12 months, or			Final r			
	Change in accounting period						
7	State in detail why you need the extension						
	ADDITIONAL TIME IS NEEDED TO	GATHE	R THE INFORMATION	NECES	SARY 7	ľO	
	PREPARE AN ACCURATE RETURN.						
8a	If this application is for Form 990-BL, 990-PF, 990-T, 4720,	or 6069. e	nter the tentative tax. less any				
	nonrefundable credits. See instructions.	·	,,	8a	\$		0.
	If this application is for Form 990-PF, 990-T, 4720, or 6069,	enter anv	refundable credits and estimated		· *		
	tax payments made. Include any prior year overpayment all						
	previously with Form 8868		,	8b	\$		0.
	Balance due. Subtract line 8b from line 8a. Include your pa	yment wit	th this form, if required, by using		<u> </u>	-	``
	EFTPS (Electronic Federal Tax Payment System). See instri	=	, , , , , , , , , , , , , , , , , , , ,	8c	\$		0.
					• • • • • • • • • • • • • • • • • • • •		

Signature and Verification must be completed for Part II only.

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct and complete, and that I am authorized to prepare this form.

Form 8868 (Rev. 1-2013)

FORM 990-PF DIVIDENI	DS AND	INTER	EST FROM	SECUE	RITIES	STATEMENT	1
SOURCE .		GROSS	AMOUNT		ITAL GAINS IVIDENDS	COLUMN (A	۲)
LPL FINANCIAL	-		241.		0.	2	41.
TOTAL TO FM 990-PF, PART I, 1	LN 4		241.		0.	2	41.
FORM 990-PF		TAX	ES			STATEMENT	2
DESCRIPTION	EXPE	A) NSES BOOKS	(B) (C) NET INVEST- ADJUSTED MENT INCOME NET INCOM				
IRS PAYMENT		850.		0.		0.	
TO FORM 990-PF, PG 1, LN 18		850.		0.			0.
FORM 990-PF	0'	THER E	XPENSES	·····		STATEMENT	3
FORM 990-PF DESCRIPTION	() EXPE	A)	(B) NET INV	EST-	(C) ADJUSTED NET INCOM	(D) CHARITA	BLE
	EXPE PER	A) NSES	(B) NET INV	EST-	ADJUSTED	(D) CHARITA	BLE
DESCRIPTION	EXPE	A) NSES BOOKS	(B) NET INV	EST- COME	ADJUSTED	(D) CHARITA	BLE
DESCRIPTION INVESTMENT ADVISOR FEES	EXPE PER	A) NSES BOOKS 1,580.	(B) NET INV	EST- COME 0.	ADJUSTED	(D) CHARITA	ABLE SES
DESCRIPTION INVESTMENT ADVISOR FEES TO FORM 990-PF, PG 1, LN 23	EXPE PER	A) NSES BOOKS 1,580.	(B) NET INVI MENT INC	EST- COME 0.	ADJUSTED	(D) CHARITA IE PURPOS	BLE SES 0. 0.
DESCRIPTION INVESTMENT ADVISOR FEES TO FORM 990-PF, PG 1, LN 23 FORM 990-PF	EXPE PER	A) NSES BOOKS 1,580.	(B) NET INVI MENT INC	EST- COME 0.	ADJUSTED NET INCOM	(D) CHARITA IE PURPOS STATEMENT FAIR MARKE	BLE SES 0. 0. 4

FORM 990-PF		OTHER	INVESTMENTS		STATEMENT	5
DESCRIPTION			VALUATION METHOD	BOOK VALUE	FAIR MARKE	т
MUTUAL FUNDS			COST	10,536.	10,1	75.
TOTAL TO FORM 990-PF,	PART	II, LINE 1	.3	10,536.	10,1	75.
FORM 990-PF	LIST		TIAL CONTRIB	UTORS	STATEMENT	
NAME OF CONTRIBUTOR		A	ADDRESS			
ESTATE OF MARIE SOLIS		_				