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Department of the Treasury Internal Revenue Service

Return of Private Foundation

or Section 4947(a)(1) Nonexempt Charitable Trust

Treated as a Private Foundation Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0052 Open to Public Inspection

Form 990-PF (2012)

For calendar year 2012 or tax year beginning 11/8/2012 . and ending 12/31/2012 Name of foundation Employer identification number THE HELEN J SERINI FOUNDATION INC 46-1353961 Number and street (or P O box number if mail is not delivered to street address) Room/suite Telephone number (see instructions) **471 MOUNTAIN ROAD** 410-215-5044 City or town, state, and ZIP code If exemption application is pending, check here **CROWNSVILLE** 21032 G Check all that apply Initial return Initial return of a former public charity D 1. Foreign organizations, check here Final return Amended return 2. Foreign organizations meeting the 85% test, Address change Name change check here and attach computation **H** Check type of organization X Section 501(c)(3) exempt private foundation 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 J Accounting method X Cash If the foundation is in a 60-month termination of year (from Part II, col (c), under section 507(b)(1)(B), check here Other (specify) line 16) ► \$ 4,512,277 (Part I, column (d) must be on cash basis Analysis of Revenue and Expenses (The total of (d) Disbursements (a) Revenue and (b) Net investment (c) Adjusted net for chantable amounts in columns (b), (c), and (d) may not necessarily equal expenses per income ıncome purposes books the amounts in column (a) (see instructions)) (cash basis only) 4,422,788 Contributions, gifts, grants, etc., received (attach schedule) 2 Check ▶ If the foundation is not required to attach Sch B 3 Interest on savings and temporary cash investments Dividends and interest from securities 5 a Gross rents b Net rental income or (loss) 6 a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2) Net short-term capital gain Income modifications 10 a Gross sales less returns and allowances **b** Less Cost of goods sold c Gross profit or (loss) (attach schedule) 11 Other income (attach schedule) 12 Total. Add lines 1 through 11 0 4,422,790 13 Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages ... 15 Pension plans, employee benefits 16 a Legal fees (attach schedule) b Accounting fees (attach schedule) Administrative c Other professional rees fattach schedules 17 Interest Taxes (attach schedule) (see instructions) 18 Deprecialing (attach schedule) and depletion 19 20 Travel, conferences and meetings 21 and / 22 Printing and publications 23 Other expenses (attach schedule) . Operating 24 Total operating and administrative expenses. Add lines 13 through 23 O 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 0 0 O 0 27 Subtract line 26 from line 12 4,422,790 a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) 0

Page 2

| Pa | rt II | Balance Sheets Attached schedules and amounts in the description column | Beginning of year | End | of year |
|----------------------|--------|---|---|--|---|
| | للجد | should be for end-of-year amounts only (See instructions) | (a) Book Value | (b) Book Value | (c) Fair Market Value |
| | 1 | Cash—non-interest-bearing | | | |
| | 2 | Savings and temporary cash investments | | 846,320 | |
| | 3 | Accounts receivable | | | |
| | | Less: allowance for doubtful accounts | | | |
| | 4 | Pledges receivable ▶ | 设制的基础的基本 类 | A STATE OF THE STA | Construction of |
| | | Less allowance for doubtful accounts | | | |
| | 5 | Grants receivable | | | |
| | 6 | Receivables due from officers, directors, trustees, and other | | | |
| | | disqualified persons (attach schedule) (see instructions) . | | } | |
| | 7 | Other notes and loans receivable (attach schedule) | This see all the | | 22 March 1983 |
| | | Less allowance for doubtful accounts | | | _ |
| ম | 8 | Inventories for sale or use | | | |
| Assets | 9 | Prepaid expenses and deferred charges | | <u> </u> | |
| AS | 10 a | a Investments—U S and state government obligations (attach schedule) | | 200,000 | 200,000 |
| | l _ | b Investments—corporate stock (attach schedule) . | | 3,376,470 | |
| | | C Investments—corporate bonds (attach schedule) | | | |
| | 11 | Investments—land, buildings, and equipment basis | | | |
| | | Less accumulated depreciation (attach schedule) | 100 CO 100 100 100 100 100 100 100 100 100 10 | | 4 P 1 P 2 P 2 P 2 P 2 P 2 P 2 P 2 P 2 P 2 |
| | 12 | Investments—mortgage loans | · | | |
| | 13 | Investments—other (attach schedule) | | | |
| | 14 | Lord buildings and community basis | PARTICIPATION PROPERTY. | ACCUPATION OF THE PARTY OF | STANDARD STANDARD |
| | ' | Land, buildings, and equipment, basis Less accumulated depreciation (attach schedule) | | Feet State S | |
| | 15 | | · | | |
| | 16 | Total assets (to be completed by all filers—see the | ′ | | |
| | '' | instructions Also, see page 1, item I) | 0 | 4,422,790 | 4.512.277 |
| | 17 | Accounts payable and accrued expenses . | | 4,422,730 | 7,512,277 |
| | 18 | Grants payable | | | |
| Liabilities | 19 | Deferred revenue | | | |
| ≝ | 20 | | | | |
| ap | 21 | Loans from officers, directors, trustees, and other disqualified persons | | | - |
| Ï | 22 | Mortgages and other notes payable (attach schedule) Other liabilities (describe ▶ | \ | | |
| | 23 | Total liabilities (add lines 17 through 22) | ' | | 7 |
| | 25 | | | | |
| S | ļ | Foundations that follow SFAS 117, check here | | ļ | |
| lances | ١ | and complete lines 24 through 26 and lines 30 and 31. | | | |
| <u>a</u> | 24 | Unrestricted | | 4,422,790 | |
| Ba | 25 | Temporarily restricted | | | |
| Þ | 26 | Permanently restricted | | | |
| جَ | | Foundations that do not follow SFAS 117, check here | | | |
| ř | | and complete lines 27 through 31. | 1 | 1 | |
| Net Assets or Fund B | 27 | Capital stock, trust principal, or current funds | | | |
| iet | 28 | Paid-in or capital surplus, or land, bldg, and equipment fund | | <u> </u> | |
| SS | 29 | Retained earnings, accumulated income, endowment, or other funds | | | |
| ĭ | 30 | Total net assets or fund balances (see instructions) | 0 | 4,422,790 | |
| Z | 31 | Total liabilities and net assets/fund balances (see | | | |
| | | instructions) | 0 | 4,422,790 |) Harris Carlot |
| | rt III | Analysis of Changes in Net Assets or Fund Balances | | | |
| 1 | | net assets or fund balances at beginning of year—Part II, column (a), line | e 30 (must agree with | | |
| _ | | of-year figure reported on prior year's return) | • | . 1 | 0 |
| _ | | r amount from Part I, line 27a | | . 2 | 4,422,790 |
| 3 | | r increases not included in line 2 (itemize) | | 3 | |
| 4 | | lines 1, 2, and 3 | | . 4 | 4,422,790 |
| 5 | | | | | |
| 6 | Total | net assets or fund balances at end of year (line 4 minus line 5)-Part II, | column (b), line 30 | 6 | 4,422,790 |

| (a) List and describe the | e kınd(s) of property sold (e.g., real esta se, or common stock, 200 shs MLC Co | ite, | (b) How acquired P—Purchase D—Donation | (c) Date acquired (mo , day, yr) | (d) Date sold (mo , day, yr) |
|--|--|--|--|---------------------------------------|---|
| 1a | | | | | |
| b | | | | | |
| С | | | | | |
| <u>d</u> | | | | | |
| <u>e</u> | | | L | | |
| (e) Gross sales price | (f) Depreciation allowed (or allowable) | | r other basis ense of sale | | Gain or (loss) s (f) minus (g) |
| _a | | | | <u> </u> | |
| <u>b</u> | | | | _ | |
| C | | | | | |
| d | | | | | |
| <u>e</u> | | | | | |
| Complete only for assets show | ring gain in column (h) and owner | | | 1 | Col (h) gain minus |
| (i) F M V as of 12/31/69 | (J) Adjusted basis as of 12/31/69 | | ss of col (ı) l (j), ıf any | 1 | not less than -0-) or s (from col (h)) |
| a | | <u> </u> | | <u> </u> | |
| <u>b</u> | | <u> </u> | | ļ | |
| C | i | | | | |
| d | | | | | |
| e | <u> </u> | Ļ <u></u> | | | |
| 2 Capital gain net income or (| net canital insstit | also enter in Pa . enter -0- in Pai | > | 2 | 0 |
| 3 Net short-term capital gain of | or (loss) as defined in sections | 1222(5) and (6 | 5) | | |
| If gain, also enter in Part I, I | ine 8, column (c) (see instruct | ions) If (loss), e | enter -0- | | |
| in Part I, line 8 | · | <u></u> | <u>_</u> | 3 | 0 |
| Part V Qualification Und | der Section 4940(e) for R | educed Tax of | on Net Investm | ent Income | |
| If section 4940(d)(2) applies, lead Was the foundation liable for the If "Yes," the foundation does no | e section 4942 tax on the distr of qualify under section 4940(e |). Do not compl | ete this part. | · · · · · · · · · · · · · · · · · · · | Yes X No |
| | ount in each column for each y | ear, see the ins | tructions before m | naking any entries | |
| (a) Base penod years | (b) | | (c) | | (d) Distribution ratio |
| Calendar year (or tax year beginning in | Adjusted qualifying distribution | ns Net value | of nonchantable-use a | SSAIS I | b) divided by col (c)) |
| 2011 | | | | | 0 000000 |
| 2010 | | | | | 0 000000 |
| 2009 | | | | | 0 000000 |
| 2008 | | | | | 0.000000 |
| 2007 | | | | | 0 000000 |
| 2 Total of line 1, column (d) | | | | . 2 | 0 000000 |
| 3 Average distribution ratio fo the number of years the four | ir the 5-year base period—divi Indation has been in existence | | | 3 | 0 000000 |
| 4 Enter the net value of noncl | haritable-use assets for 2012 t | from Part X, line | 5 . | 4 | |
| 5 Multiply line 4 by line 3 | | | | 5 | |
| 6 Enter 1% of net investment | income (1% of Part I, line 27b |)) | | 6 | 0 |
| 7 Add lines 5 and 6 . | | | | 7 | 0 |
| 8 Enter qualifying distributions If line 8 is equal to or greate the Part VI instructions. | s from Part XII, line 4 er than line 7, check the box in | ı Part VI, line 1b | o, and complete th | 8 at part using a 19 | 0 % tax rate. See |

| Рa | rt | VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 49 | 48- | -see | instruct | ions) | | <u> </u> |
|-----|---------|---|---------|-------|--|-------|-------------|---------------------|
| _ | | Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1 | 5 | | Ī | | $\neg \neg$ | |
| | | Date of ruling or determination letter. (attach copy of letter if necessary—see instructions) | | | | | | |
| b | י זו | Domestic foundations that meet the section 4940(e) requirements in Part V, check | \perp | 1 | | | | |
| | | here $\blacktriangleright X$ and enter 1% of Part I, line 27b | | | | | | |
| C | | All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% | J۱ | | ŀ | | | |
| | c | of Part I, line 12, col (b) | | | | | | |
| 2 | ٦ | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) | | 2 | 1 | | _ 0 | |
| 3 | 1 | Add lines 1 and 2 . | | 3 | | | Ō | |
| 4 | 5 | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) | | 4 | | | | |
| 5 | | Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0- | | 5 | | | 0 | |
| 6 | (| Credits/Payments | | | } | | 1 | |
| а | 1 2 | 2012 estimated tax payments and 2011 overpayment credited to 2012 6a | | | | | - 1 | |
| b |) E | Exempt foreign organizations—tax withheld at source 6b | | | i | | - 1 | |
| Ç | : 1 | Tax paid with application for extension of time to file (Form 8868) 6c | | | | | į | - |
| | l E | Backup withholding erroneously withheld . 6d | | | ļ | | | |
| 7 | | Total credits and payments Add lines 6a through 6d | | 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_ | | | 0 | |
| 10 | | Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid. | | 10 | } | | 0 | |
| 11 | | Enter the amount of line 10 to be Credited to 2013 estimated tax ► Refunde | d ► | 11 | <u> </u> | | 0 | |
| Рα | rτ | VII-A Statements Regarding Activities | | | - | | | |
| 1 a | | During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it | | | | | Yes | No |
| | • | participate or intervene in any political campaign? | | | | 1a | | X_ |
| t | | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see | | | | | | |
| | | Instructions for the definition)? | | | • | 1b | | _X_ |
| | | If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials | | | | ÌÌ | 1 | |
| | | published or distributed by the foundation in connection with the activities | | | | | | |
| | _ | Did the foundation file Form 1120-POL for this year? | | ٠ | | 1c | | <u>X</u> |
| C | | Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year | | | | | | |
| _ | | (1) On the foundation. ▶ \$(2) On foundation managers ▶ \$ | | | | | | |
| e | | Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed | | | | | | |
| 2 | | on foundation managers \$ Has the foundation engaged in any activities that have not previously been reported to the IRS? | | | | | | ~ |
| 2 | | If "Yes," attach a detailed description of the activities | • | | • | 2 | | _X_ |
| 3 | | Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles | | | | | | |
| J | | of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes | | | | 3 | | |
| 4 a | | Did the foundation have unrelated business gross income of \$1,000 or more during the year? | | • | • | 4a | | $\frac{\hat{x}}{x}$ |
| | | If "Yes," has it filed a tax return on Form 990-T for this year? | | | | | N/A | ^ - |
| 5 | | Was there a liquidation, termination, dissolution, or substantial contraction during the year? | | | | 5 | , | X |
| • | | If "Yes," attach the statement required by General Instruction T | | | | | | |
| 6 | | Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either | | | | | | |
| - | | By language in the governing instrument, or | | | | | | 1 |
| | | By state legislation that effectively amends the governing instrument so that no mandatory directions | | | , | | | |
| | | that conflict with the state law remain in the governing instrument? | | | | 6 | X | |
| 7 | ı | Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c |), an | d Pan | tXV. | 7_ | Χ | |
| 8 8 | | Enter the states to which the foundation reports or with which it is registered (see instructions) | | | | | | |
| | | MD | | | | | | |
| t |) | If 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 | Χ | <u> </u> |
| 9 | ı | Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) | | | | | | |
| | (| or 4942(j)(5) for calendar year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If "Yo | es," | | | | | ļ |
| | | complete Part XIV | | | | 9_ | | X |
| 10 | ١ | Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing | | | | | | 1 |
| | ŧ | their names and addresses | | | | 10 | Χ | |

.

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

purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2012?

Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable

if the foundation had excess business holdings in 2012)

N/A

х

3b

4a

4b

| Form | m 990-PF (2012) THE HELEN J SERINI FOL | JNDATION INC | | | 46-1353 | 3961 | P | age 6 |
|------|--|---|---|--|--------------|------------|--------------------|--------------|
| Pa | art VII-B Statements Regarding Activ | vities for Which Fo | rm 4720 May Be | Required (continued |) | | | |
| 5a | (1) Carry on propaganda, or otherwise attemp (2) Influence the outcome of any specific publion, directly or indirectly, any voter registral | t to influence legislation (ic election (see section 4) | . , ,, | Yes Yes | X No | | | |
| | (3) Provide a grant to an individual for travel, s (4) Provide a grant to an organization other the in section 509(a)(1), (2), or (3), or section 4 | study, or other similar pur an a charitable, etc , orga | anization described | Yes T | No No | • | | , |
| | (5) Provide for any purpose other than religious educational purposes, or for the prevention | | • • | · Yes | X No | | | |
| þ | If any answer is "Yes" to 5a(1)-(5), did any of the | | - | | } | | | |
| | Regulations section 53.4945 or in a current notice | | | ns)? . | ¬ ŀ | 5b | N/A | |
| С | Organizations relying on a current notice regards If the answer is "Yes" to question 5a(4), does the tax because it maintained expenditure responsit | e foundation claim exemp | | Yes | No | | | |
| | If "Yes," attach the statement required by Regul | lations section 53 4945 | 5(d) | | | | | |
| 6a | Did the foundation, during the year, receive any premiums on a personal benefit contract? | funds, directly or indirect | ly, to pay | Yes | X No | | | |
| b | Did the foundation, during the year, pay premiur If "Yes" to 6b, file Form 8870. | ns, directly or indirectly, o | on a personal benefit o | contract? | _ · | 6b_ | | X |
| | At any time during the tax year, was the foundat | | | | X No | _ | | |
| | If "Yes," did the foundation receive any proceed: | | | | | 7b | N/A | |
| | art VIII Information About Officer and Contractors | · · · · · · · · · · · · · · · · · · · | | | aid Em | ploy —— | ees, | |
| _1 | List all officers, directors, trustees, found | | | | | | | |
| | (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 | | | se accor owance | |
| 471 | ul A Senni 1 Mountain Road Crownsville, MD 21032 | Director/President | 0 | | | _ | | |
| | san M. Serini | Director | 1 | | ł | | | |
| | 1 Mountain Road Crownsville, MD 21032 erry A. McHugh | Director | 0 | | | | | |
| | 34 Merlin Court Odenton, MD 21113 | - | 0 | | | | | - |
| | | | | | | | | |
| 2 | Compensation of five highest-paid emploenter "NONE." | yees (other than thos | se included on line | 1—see instructions). If | none, | | | |
| (a | a) Name and address of each employee paid more than \$5 | (b) Title, and avera 0,000 hours per week devoted to position | (c) Compensation | (d) Contributions to employee benefit plans and deferred compensation | | | se accor owance | |
| NO | DNE | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | +- | | | |

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

▶

| THE HELEN J SERINI FOUNDATION INC | | 46-1353961 Page / |
|--|--|-------------------|
| Part VIII Information About Officers, Directors, Trustees | s, Foundation Managers, Highly Pai | d Employees, |
| and Contractors (continued) | 1 11 12 12 13 14 14 14 14 14 14 14 14 14 14 14 14 14 | |
| 3 Five highest-paid independent contractors for professional services (| | |
| (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 the number of organizations and other beneficiaries served, conferences convened, research | | Expenses |
| 1 The Foundation is designed to serve as a charitable-giving vehicle for to primary focus will be to make grants to domestic public charities. It will literary and education purposes within the meaning of those terms as un | pursue charitable, scientific, | |
| 2 | | |
| 3 | | |
| 4 | | |
| Part IX-B Summary of Program-Related Investments (se | e instructions) | <u></u> |
| Describe the two largest program-related investments made by the foundation during the tax years. | ear on lines 1 and 2 | Amount |
| 1 | | |
| 2 | | |
| All other program-related investments See instructions | | |
| 3 | | |
| Total. Add lines 1 through 3 | | 0 |

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

income Enter 1% of Part I, line 27b (see instructions)

Adjusted qualifying distributions. Subtract line 5 from line 4

qualifies for the section 4940(e) reduction of tax in those years.

5

0

4

5

| 1 | Distributable amount for 2012 from Part XI, | (a) Corpus | (b) Years pnor to 2011 | (c) 2011 | (d) 2012 |
|----|--|---------------|---------------------------|-------------|-------------|
| | line 7 | | | · | 32,878 |
| 2 | Undistributed income, if any, as of the end of 2012 | | | | |
| а | Enter amount for 2011 only | | · | 0 | |
| b | ,,,,,, | | | | |
| 3 | Excess distributions carryover, if any, to 2012 | | | | |
| а | From 2007 | | | | |
| b | From 2008 . | | | | |
| C | From 2009 | | | | |
| d | From 2010 | | | | |
| е | From 2011 | | | | |
| f | Total of lines 3a through e | 0 | | | |
| 4 | Qualifying distributions for 2012 from Part | , | | | |
| | XII, line 4 • \$ | | | | |
| а | Applied to 2011, but not more than line 2a | | | | |
| b | Applied to undistributed income of prior years | | | | |
| | (Election required—see instructions) | | | | |
| С | Treated as distributions out of corpus (Election | | | | |
| | required—see instructions) | | | | |
| d | Applied to 2012 distributable amount | | | | |
| е | Remaining amount distributed out of corpus | | | | • |
| 5 | Excess distributions carryover applied to 2012 | | | | |
| | (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: | | | | ~ • |
| а | Corpus Add lines 3f, 4c, and 4e Subtract line 5 | 0 | | | |
| b | Prior years' undistributed income Subtract | | | | |
| - | line 4b from line 2b | | o | | - |
| С | Enter the amount of prior years' undistributed | | | | |
| · | income for which a notice of deficiency has | | | | |
| | | | | | |
| | been issued, or on which the section 4942(a) | | | | 1 |
| | tax has been previously assessed . Subtract line 6c from line 6b Taxable | | | | |
| d | | | | | - |
| _ | amount—see instructions . | <u></u> | | | |
| е | Undistributed income for 2011 Subtract line | | | | |
| | 4a from line 2a Taxable amount—see | | í | | |
| | instructions | | | 0 | |
| f | Undistributed income for 2012 Subtract | | | | |
| | lines 4d and 5 from line 1 This amount must | | | | |
| _ | be distributed in 2013 | ļ·- | | | 32,878 |
| 7 | Amounts treated as distributions out of | | | | |
| | corpus to satisfy requirements imposed by | | | | |
| | section 170(b)(1)(F) or 4942(g)(3) (see instructions) | | | | |
| 8 | Excess distributions carryover from 2007 | | | | , |
| | not applied on line 5 or line 7 (see instructions) | | | | |
| 9 | Excess distributions carryover to 2013. | | | | |
| | Subtract lines 7 and 8 from line 6a | | | | |
| 10 | Analysis of line 9 | | | | |
| а | Excess from 2008 . | | | | |
| b | Excess from 2009 | | | | |
| С | Excess from 2010 . | | | | |
| d | Excess from 2011 | | | | |
| е | Excess from 2012 | 1 | | | |

| | n 990-PF (2012) THE HELEN J. SERINI FOUND | ATION INC | | 46-13 | 353961 Page 11 |
|----|---|---|----------------------|----------------------------------|-----------------------|
| Pa | rt XV Supplementary Information (contin | ued) | | | |
| 3 | Grants and Contributions Paid During to | he Year or Approved | for Future F | Payment | |
| | Recipient | If recipient is an individual, show any relationship to | Foundation status of | Purpose of grant or contribution | Amount |
| | Name and address (home or business) | any foundation manager or substantial contributor | recipient | Contribution | |
| | Paid during the year | | | | |
| | Total . | | | . ▶ 3a | |
| b | Approved for future payment | | | | |

Total

▶ 3b

Part XVI-A Analysis of Income-Producing Activities

| Enter gross amounts unless otherwise indicated | Unrelated bus | siness income | Excluded by section | n 512, 513, or 514 | (e) |
|--|---|---|---|--|--|
| 4 Danier | (a) Business code | (b) Amount | (c) Exclusion code | (d) Amount | Related or exempt function income (See instructions) |
| 1 Program service revenue | | | | | |
| a | | | | | |
| b | | | | | |
| <u> </u> | | | <u> </u> | <u>-</u> . | |
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| g Fees and contracts from government agencies | | · | | | |
| 2 Membership dues and assessments | | | | | |
| 3 Interest on savings and temporary cash investments | | | | | 2 |
| 4 Dividends and interest from securities | | | L | | |
| 5 Net rental income or (loss) from real estate | | | | s yhu | |
| a Debt-financed property | | | | | |
| b Not debt-financed property | | | | | |
| 6 Net rental income or (loss) from personal property | | | | | |
| 7 Other investment income | | | | | |
| 8 Gain or (loss) from sales of assets other than inventory . | | | | | |
| 9 Net income or (loss) from special events | | | | | |
| 10 Gross profit or (loss) from sales of inventory | | - | | | |
| 11 Other revenue a | | | | | |
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Use Only

Firm's address ► 716 High Plain Dr, Bel Air, MD 21014

| Pai | t XV | ll In | format | ion Reg | arding Tran | sfers To a | nd Transa | ctions a | nd Rel | ationships Wi | th Noncharit | able | | _ |
|-----|----------------|--------------|---------------------|--------------------------|--|--------------------------------|------------------------------|---------------------------|--|--|--|-------------|-----------------|------|
| | | E | xempt (| Organiza | ations | | _ | | | | | | | |
| 1 | | | | | | | | | | r organization de | | . , | Yes | No |
| | | | | the Code | (other than se | ection 501(c) | (3) organiza | ations) or i | n sectio | n 527, relating to | political | | , | |
| | orgar | nizatio | ns? | | | | | | | | | , ,, | , ; | |
| а | Trans | sfers fi | rom the r | eporting f | oundation to a | noncharitat | ole exempt | organizatio | on of | | | | | |
| | (1) C | | | | | | • | | | | | 1a(1) | | X |
| | (2) | Other a | assets | | • | | | | | | | 1a(2) | | X |
| b | Othe | r trans | actions | | | | | | | | | | | |
| | (1) 5 | Sales | of assets | to a nonc | haritable exer | npt organiza | ition | | | | | 1b(1) | | Х |
| | (2) F | urcha | ses of a | ssets from | n a noncharita | ble exempt o | organization | | | | | 1b(2) | | Х |
| | (3) F | Rental | of faciliti | es, equipi | ment, or other | assets | | | | | | 1b(3) | | Х |
| | (4) F | Reimbi | ursemen | t arranger | ments | • | | | | | | 1b(4) | | Х |
| | (5) L | oans | or loan g | uarantees | 3 | | | | | | | 1b(5) | | Х |
| | (6) F | Perforr | nance of | services | or membershi | p or fundrais | sing solicitat | ions . | | | • | 1b(6) | | Х |
| C | Shar | ing of | facilities, | equipme | nt, mailing list | s, other asse | ets, or paid e | employees | | | | 1c | | X |
| | value value | of the | goods, y transac | other ass ction or sh | ets, or service laring arrange | s given by the ment, show i | ne reporting in column (d | foundation d) the valu | n If the e of the | (b) should always foundation received goods, other ass | ved less than fa ets, or services | receivi | ed | |
| (a) | Line no | (| b) Amount | involved | (c) Name | of noncharitable | exempt organi | zation | (d) De | escription of transfers, | transactions, and sh | nanng am | angeme | ents |
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| | desc | ribed i | n sectior | 1 501(c) o | ndirectly affilia f the Code (ot ng schedule | her than sec | | | | empt organization 27? | | Yes X |] No | |
| | | (a |) Name of | organization | | (| (b) Type of orga | anization | | (c) | Description of relation | onship | | |
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| Sig | gn ere | Signa | | cer or trustee | f preparer (other than | taxpayer) is based Date | | of which prepar | | | May the IRS with the prep instructions)? | arer show | n be <u>lov</u> | |
| | | | Print/Type | preparer's na | ame | Preparer's sign | nature | | | Date | | PTIN | | |
| Pa | |]. | | . | 004 | 2. 1 | 1/1 | | | 7/13/13 | Check X If | DO4 45 | מפסר | |
| Pre | epar | er 🏻 | wichael ` | <u>Treherne,</u> | CPA / | me | 41 /m | <u> </u> | | 9/8/2013 | self-employed | P0142 | 0095 | |

Firm's EIN • 21-9609636

4108934847

Phone no

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

OMB No 1545-0047

Employer identification number

2012

Attach to Form 990, Form 990-EZ, or Form 990-PF.

| THE HELEN J SERINI FOU | NDATION INC | 46-1353961 |
|---|--|--|
| Organization type (check or | | |
| Filers of: | Section: | |
| Form 990 or 990-EZ | 501(c)() (enter number) organization | |
| | 4947(a)(1) nonexempt charitable trust not treated as a private found | ation |
| | 527 political organization | |
| Form 990-PF | X 501(c)(3) exempt private foundation | |
| | 4947(a)(1) nonexempt charitable trust treated as a private foundation | ו |
| | 501(c)(3) taxable private foundation | |
| Note. Only a section 501(c)(instructions General Rule | covered by the General Rule or a Special Rule . 7), (8), or (10) organization can check boxes for both the General Rule and a | , |
| | filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or one contributor. Complete Parts I and II | more (in money or |
| Special Rules | | |
| sections 509(a)(1) a | (3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test nd 170(b)(1)(A)(vi) and received from any one contributor, during the year, a 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line | contribution of the greater |
| the year, total contri | (7), (8), or (10) organization filing Form 990 or 990-EZ that received from an butions of more than \$1,000 for use <i>exclusively</i> for religious, charitable, scies, or the prevention of cruelty to children or animals. Complete Parts I, II, an | ntific, literary, or |
| the year, contribution total to more than \$' year for an exclusive | (7), (8), or (10) organization filing Form 990 or 990-EZ that received from an insign of use exclusively for religious, charitable, etc., purposes, but these contributions that were receively religious, charitable, etc., purpose Do not complete any of the parts unlessization because it received nonexclusively religious, charitable, etc., contributions that were received in the parts unlessization because it received nonexclusively religious, charitable, etc., contributions. | ributions did not ived during the ss the General Rule |
| Caution. An organization that 990-EZ, or 990-PF), but it m | at is not covered by the General Rule and/or the Special Rules does not file to ust answer "No" on Part IV, line 2 of its Form 990; or check the box on line h | Schedule B (Form 990, I of its Form 990-EZ or on |

Part I, line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Name of organization
THE HELEN J SERINI FOUNDATION INC
46-1353961

| 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 | Paul A and Susan M. Serini 471 Mountain Road Crownsville MD 21032 Foreign State or Province Foreign Country. | \$ <u>4,422,788</u> | Person X Payroll | | | |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution | | | |
| | Foreign State or Province Foreign Country | \$ | 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 | | | |
| | Foreign State or Province: Foreign Country | \$ | 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 | | | |
| | Foreign State or Province Foreign Country | \$ | 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 | | | |
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| | Foreign State or Province: Foreign Country | \$ | Person Payroll Noncash (Complete Part II if there is a noncash contribution) | | | |

Name of organization
THE HELEN J SERINI FOUNDATION INC

Employer identification number 46-1353961

| Part II | Noncash Property (see instructions). Use duplicate of | copies of Part II if additional space | e 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 |
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| (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 |
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| (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 |
| | | \$ | |

| | ganization N J SERINI FOUNDATION INC | | | | Employer identification number 46-1353961 | | | |
|-----------------|---|---|--|------------|---|--|--|--|
| art III | Exclusively religious, charitable, etc., indiv | idual contrib | utions to section | 501(c)(7). | | | | |
| | total more than \$1,000 for the year. Complet | | | | | | | |
| | For organizations completing Part III, enter the | | | | | | | |
| | contributions of \$1,000 or less for the year. (E | inter this infor | mation once See ii | nstruction | s) > \$ | | | |
| | Use duplicate copies of Part III if additional sp | ace is needed | 1 | | | | | |
| (a) No. from | (b) Purpose of gift | (a) I | Jse of gift | | d) Description of how gift is held | | | |
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| | | (a) Tra | nsfer of gift | | | | | |
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| | Transferee's flame, address, and ZIF | · • · · · · · · · · · · · · · · · · · · | Neiauc | mamp or | transferor to transferee | | | |
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| | Transferee's name, address, and ZIP | Relation | Relationship of transferor to transferee | | | | | |
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| | 1 1 OI 1 I OV COUNTRY | | | | | | | |

Form **8868**

(Rev January 2013)

Department of the Treasury

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No 1545-1709

If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box 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 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 Part I only 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 Type or Name of exempt organization or other filer, see instructions Employer identification number (EIN) or print THE HELEN J SERINI FOUNDATION INC 46-1353961 Number, street, and room or suite no. If a P O box, see instructions Social security number (SSN) File by the due date for 471 MOUNTAIN ROAD filing your City, town or post office, state, and ZIP code. For a foreign address, see instructions return See instructions **CROWNSVILLE** MD 21032 Enter the Return code for the return that this application is for (file a separate application for each return) 04 **Application** Return **Application** Return Is For Code is For Code Form 990 or Form 990-EZ 01 Form 990-T (corporation) 07 Form 990-BL 02 Form 1041-A 08 Form 4720 (individual) 03 Form 4720 09 Form 990-PF 04 Form 5227 10 Form 990-T (sec 401(a) or 408(a) trust) 05 Form 6069 11 Form 990-T (trust other than above) Form 8870 The books are in the care of

THE HELEN J SERINI FOUNDATION INC Telephone No ► (410) 244-7550 FAX No ► (410) 244-7742 If the organization does not have an office or place of business in the United States, check this box. 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 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time 8/15/2013 , to file the exempt organization return for the organization named above. The extension is for the organization's return for. ____ calendar year _____ or ► X tax year beginning 11/8/2012 , and ending 12/31/2012 If the tax year entered in line 1 is for less than 12 months, check reason. Final return 2 X Initial 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 nonrefundable credits. See instructions If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made Include any prior year overpayment allowed as a credit 3b 0 Balance due. Subtract line 3b from line 3a Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions 0 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

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Page 2

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| Form 9 | | 04 | Form 5227 | | _ | | 10 |
| | 990-T (sec 401(a) or 408(a) trust) | 05 | Form 6069 | | _ | | 11 |
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