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Form **990-PF**Department of the Treasury

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.

2012

For calendar year 2012 or tax year beginning and ending Name of foundation A Employer identification number THE DORNEY-KOPPEL FAMILY CHARITABLE FOUNDATION, INC 52-2214925 Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number 10701 ARDNAVE PLACE 301-340-0280 City or town, state, and ZIP code C If exemption application is pending, check here POTOMAC, MD 20854-1261 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, check here and attach computation Address change Name change H Check type of organization: Section 501(c)(3) exempt private foundation 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: ___ Cash X Accruat 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 ▶\$ 2,973,093. (Part I, column (d) must be on cash basis) **Analysis of Revenue and Expenses** Part I (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 income 146,270 N/AContributions, gifts, grants, etc., received Check In the foundation is not required to attach Sch. B Interest on savings and temporary cash investments 2 STATEMENT 28,557 28,557 4 Dividends and interest from securities STATEMENT 5a Gross rents b Net rental income or (loss) -354 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 476,697. 0 7 Capital gain net income (from Part IV line 2) 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 174,475 28,559 Total, Add lines 1 through 11 0 0 0. Compensation of officers, directors, trustees, etc Other employee salaries and wages 15 Pension plans, employee benefits 4,217 STMT 3 0 Si 0. 16a Legal fees 3,671 **b** Accounting fees STMT 0. 0. c Other professional fees 3. 0. 3. 17 Interest STMT 5 980. 0 0. 18 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 4,573 0. 0. 22 Printing and publications 23 Other expenses 24 Total operating and administrative 13,444 3 expenses Add lines 13 through 23 0. 8,150 8,150. 25 Contributions, gifts, grants paid 26 Total expenses and disbursements 21,594 8,150. Add lines 24 and 25 27 Subtract line 26 from line 12: 152,881 a Excess of revenue over expenses and disbursements 28,556 b Net investment income (if negative enter -0-) N/A c Adjusted net income (if negative, enter -0-)

12 LHA For Paperwork Reduction Act Notice, see instructions

Form **990-PF** (2012)

THE DORNEY-KOPPEL FAMILY

<u>For</u>	m 99	00-PF (2012) CHARITABLE FOUNDATION,	INC		214925 Page 2
Р	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year (a) Book Value	(b) Book Value	year (c) Fair Market Value
	2	Cash - non-interest-bearing Savings and temporary cash investments Accounts receivable	12,557.	22,662.	22,662.
	4	Less: allowance for doubtful accounts ► Pledges receivable ►			
	5	Less: allowance for doubtful accounts ►			
		Receivables due from officers, directors, trustees, and other disqualified persons Other notes and loans receivable			
	•	Less: allowance for doubtful accounts			
Assets	9	Inventories for sale or use Prepaid expenses and deferred charges			
	b	Investments - U.S. and state government obligations Investments - corporate stock STMT 6 Investments - corporate bonds	1,582,586.	1,965,794.	2,451,069.
	ŀ	Investments - Land buildings and equipment basis Less accumulated depreciation			
	12 13 14	Investments - mortgage loans Investments - other STMT 7 Land, buildings, and equipment: basis	720,000.	499,000.	499,362.
		Less accumulated depreciation Other assets (describe STATEMENT 8)	210,083.	485,275.	0.
	10	Tatal accests (to be completed by all filers)	2,525,226.	2,972,731.	2,973,093.
_		Total assets (to be completed by all filers) Accounts payable and accrued expenses Grants payable	2,323,220.	2,912,131.	2,913,093.
ities	19 20	Deferred revenue Loans from officers, directors, trustees, and other disqualified persons			
Liabilities	21	Mortgages and other notes payable Other liabilities (describe ▶)			
	23	Total liabilities (add lines 17 through 22)	0.	0.	-
ses	24	Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. Unrestricted			
Balan	25 26	Temporarily restricted Permanently restricted			
or Fund Balances		Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.			
Assets o	27 28	Capital stock, trust principal, or current funds Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
Net A	29 30	Retained earnings, accumulated income, endowment, or other funds Total net assets or fund balances	2,525,226. 2,525,226.	2,972,731. 2,972,731.	
_	31	Total liabilities and net assets/fund balances	2,525,226.	2,972,731.	
P	art	Analysis of Changes in Net Assets or Fund E	Balances		
1		I net assets or fund balances at beginning of year - Part II, column (a), line	30		2 525 226
2		st agree with end-of-year figure reported on prior year's return) r amount from Part I, line 27a		2	2,525,226. 152,881.
3	Othe	er increases not included in line 2 (itemize) <u>NET INCREAS</u>	SE IN UNREALIZE	D GAINS 3	<u> 294,624.</u>
		Innes 1, 2, and 3 eases not included in line 2 (itemize)		4 5	2,972,731. 0.
		I net assets or fund balances at end of year (line 4 minus line 5) - Part II, or	column (b), line 30	6	2,972,731.
					Form 990-PF (2012)

	nd Losses for Tax on Interpreted to the kind(s) of property sold (e.ç		income	(b) H	low acqui Purchas	red (c) Date acquired	(d) Date sold
	house; or common stock, 200 sh			D-	- Donatioi	<u>'</u>	(mo., day, yr.)	(mo., day, yr.)
1a M&T SECURITIES				ļ	P		ARIOUS	VARIOUS
b CERTIFICATES OF DEPOSIT REDEEMED P							ARIOUS	VARIOUS
C				 				
d				 				
<u>e</u>	(f) Depreciation allowed	(m) Con	t or other basis	\perp			(h) Gain or (lo	nc)
(e) Gross sales price	(or allowable)		xpense of sale	1		((e) plus (f) minu	
a 52.			477,00	1.				
b 476,645.		-	4//,00	10.				
d		 						,
e								
Complete only for assets showing	gain in column (h) and owned by	the foundation	on 12/31/69			(I) G	aıns (Col. (h) ga	un minus
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Ex	cess of col. (I)			col. (k	i), but not less the cosses (from co	han -0-) or
								1.
a b					<u> </u>			-355.
c		 	· ·					
d		 						
e			. ==-					
2 Capital gain net income or (net cap	If gain, also ente	er in Part I, line O- in Part I, line	7 7	}	2			-354
3 Net short-term capital gain or (loss	•			7				
If gain, also enter in Part I, line 8, c		iiiu (0).		J				
If (loss), enter -0- in Part I, line 8	nder Section 4940(e) fo				3		N/	A
Was the foundation liable for the section of the section of the foundation does not qualiful to the foundation does not provide the fo			•	rıod?				Yes X No
1 Enter the appropriate amount in ea	ach column for each year; see the	instructions bet	fore making any e	entries.				
(a) Base period years Calendar year (or tax year beginnin	g in) Adjusted qualifying di	stributions	Net value of no	(c) onchar	itable-use	e assets	Dıs (col. (b)	(d) tribution ratio divided by col. (c))
2011		73,900.				,307.		.068510
2010		23,375.				<u>,312.</u>		.090168
2009		70,430.				<u>,736.</u>		.182682
2008		94,000.				,829.		
2007	4.0	<u>66,000.</u>		2	<u>,832</u>	<u>,709.</u>		.16450
2 Total of line 1, column (d)							2	.669020
3 Average distribution ratio for the 5- the foundation has been in existen-		i on line 2 by 5,	or by the number	r of yea	ars		3	.13380
4 Enter the net value of noncharitable-use assets for 2012 from Part X, line 5			4	2,778,457				
5 Multiply line 4 by line 3	-						5	371,771
							1 [
6 Enter 1% of net investment income	e (1% of Part I, line 27b)						6	286
	e (1% of Part I, line 27b)						7	
7 Add lines 5 and 6								372,057
 6 Enter 1% of net investment income 7 Add lines 5 and 6 8 Enter qualifying distributions from If line 8 is equal to or greater than See the Part VI instructions. 	Part XII, line 4	ne 1b, and comp	olete that part usir	ng a 19	% tax rate).	7	286 372,057 8,150

THE DORNEY-KOPPEL FAMILY

Let Exempt operating foundations discorbed in section 4940(x)(2), back here ▶		n 990-PF (2012) CHARITABLE FOUNDATION, INC ort VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4		2214			Page 4
Date of ruling or determination letter: All other ordinations that meet the section 4940(e) requirements in Part V, check here I and enter 1% of Part I, line 27b			5-10 -	3661	nsu c	CHO	15)
b Domestic Gundations that meet the section 4940(e) requirements in Part V, check here	ıa						
of Part I, line 27b. 6 All other domestic foundations enter 2% of line 27b. Exempt Loseign 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-) 3 Add lines 1 and 2 3 Add lines 1 and 2 4 Subitide A (nomestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 5 Tax based on investment income. Subtract line 4 from line 3. If zero or loss, enter -0- 5 Tax based on investment income. Subtract line 4 from line 3. If zero or loss, enter -0- 5 Credits-Payments; a 2012 estimated tax payments and 2011 overpayment credited to 2012 5 Exempt foreign organizations - Lax withheld at source 6 Tax paid with application for extension of time to file (Form 8868) 6 Bectup withholding erroneously withheld 7 Total credits and payments. Add lines 6s through 6d 8 Enter any peasity for underpayment of estimated tax. Neck here I of Form 2200 s attached 8 Enter any peasity for underpayment of estimated tax. Neck here I of Form 2200 s attached 8 Enter any peasity for underpayment of estimated tax. Neck here I of Form 2200 s attached 9 2 2. 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 1 Enter the mount of the 10 to be Credited to 2013 settlement at the settlement of the 10 transpayment of the 10 transpayment of the 10 transpayment of the 10 transpayment of 10 transpay						_	71
e All other demostic foundations enter 2% of the 2Tb. Exempt to region or ganizations enter 4% of Part I, line 12, cot. (b). 2	U						<u>/ I .</u>
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3							Λ
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9 Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 11 Enter the amount of line 10 to be: Credited to 2013 estimated tax \rightary Refunded \rightary 10 Part VII-A Statements Regarding Activities 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 1b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)? 1b If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities. 1c Did the foundation file Form 1120-POL for this year? 2 If the foundation file Form 1120-POL for this year? 3 If the foundation is political expenditures (section 4955) imposed during the year: 4 If Yes, attach a detailed description of the activities 3 If 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 3 If 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 If Yes, attach the statement required by General Instruction T 4 If "Yes," attach the statement required by General Instruction T 5 If Yes, attach the statement required by General Instruction T 6 Are the requirements of section 508(s) (relating to sections 4941 through 4945) satisfied either: 9 If yeap year 2012 are the states to which the foundation reports or with which it is registered (see instructio	_						03.
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 11 Enter the amount of line 10 to be: Credited to 2013 estimated tax ▶ 12 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 13 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 14 Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)? 15 Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)? 16 Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)? 16 Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)? 17 His different intervents into any intervents into any intervents into any intervents into any intervents published or distributed by the foundation in connection with the activities. 18 Did it spending into any intervents (section 4955) imposed during the year: 19 The remover intervent (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$ Q. • • • Enter the remover intervent (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$ Q. • • • • • • • • • • • • • • • • • •	_			<u> </u>	· - · · · · -		
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The companies of the statements Regarding Activities		,			 -		
1a During the lax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaigin? 1a X 1b Did it spend more than \$100 during the year (either directly) or indirectly) for political purposes (see instructions for definition)? 1f the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities. 1c Did the foundation file Form 1120-PDL for this year? 2 Enter the rembursement (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. ► \$ 0 . (2) On foundation managers. ► \$ 0. 2 Has the foundation and by the foundation during the year for political expenditure tax imposed on loundation managers. ► \$ 0. 2 Has the foundation engaged in any activities that have not previously been reported to the IRS? 1f "Yes," attach a detailed description of the activities 3 Has the foundation made any changes, not previously reported to the IRS? 1f "Yes," attach a detailed description of the activities 3 Has the foundation have unrelated business gross income of \$1,000 or more during the year? 4 Did the foundation have unrelated business gross income of \$1,000 or more during the year? 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? 7 Was there a liquidation, termination, dissolution, or substantial contraction during the year? 8 Are the requirements of section 508(e) (relating to sections 494) through 4945) satisfied either: 9 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, or 9 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? 7 Did the foundation have at least \$5,000 in asse							
any political campaign? b Did it speand more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)? if the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities. c Did the foundation file Form 1120-POL for this year? d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (11) On the foundation. ► \$ 0. (2) On foundation managers. ► \$ 0. e 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 X 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 4 But the foundation have interleted business gross income of \$1,000 or more during the year? 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 • 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, or • 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, or • By language in the governing instrument of (c), and Part XV Ba Enter the states to which the foundation runnished 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 b If the answer			.n		1	Yes	No
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)? If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities. c Did the foundation file Form 1120-PDL for this year? d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. \(\) \\(\) \(\) \(\) \(\) \(\) \(\) \(\) \\(\) \\(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \(\) \\(\) \\(\) \\(\) \\(\) \(\) \\(\) \(\) \(\) \(\) \\(11)		10		
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year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If "Yes," complete Part XIV	9		ndar				
					9		Х
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses 10 X	10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses			-		X

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

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

Form 4720, to determine if the foundation had excess business holdings in 2012)

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

b 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,

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

Form **990-PF** (2012)

X

3b

4a

N/A

during the year?

.THE DORNEY-KOPPEL FAMILY Form 990-PF (2012) CHARITABLE FOUNDATION, INC 52-2214925 Page 6 Part VII-B | Statements Regarding Activities for Which Form 4720 May Be Required (continued) 5a During the year did the foundation pay or incur any amount to: Yes X No (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, Yes 🗶 No any voter registration drive? Yes X No (3) Provide a grant to an individual for travel, study, or other similar purposes? (4) Provide a grant to an organization other than a charitable, etc., organization described in section Yes X No 509(a)(1), (2), or (3), or section 4940(d)(2)? (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for Yes X No the prevention of cruelty to children or animals? b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? 5b Organizations relying on a current notice regarding disaster assistance check here c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained] Yes 🔲 No N/A expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53 4945-5(d). 6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on Yes X No a personal benefit contract? Х b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 6b If "Yes" to 6b, file Form 8870 Yes X No 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? 7b Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors 1 List all officers, directors, trustees, foundation managers and their compensation. (c) Compensation (d) Contributions to employee benefit plans and deferred compensation (b) Title, and average hours per week devoted to position (e) Expense account, other (If not paid, enter -0-) (a) Name and address allowances EDWARD J. KOPPEL DIRECTOR -V/P 10701 ARDNAVE PLACE POTOMAC, MD 20854-1261 0 0. 2.50 0 GRACE ANNE DORNEY KOPPEL DIRECTOR - PRESIDENT 10701 ARDNAVE PLACE POTOMAC, MD 20854-1261 4.00 0. 0. 0. 2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (d) Contributions to employee benefit plans and deferred compensation (b) Title, and average (e) Expense account, other (a) Name and address of each employee paid more than \$50,000 (c) Compensation hours per week allowances devoted to position NONE

Form **990-PF** (2012)

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

Form 990-PF (2012) CHARITABLE FOUNDATION, INC	52-22 1492 5 Pag	e 7
Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Paid Employees, and Contractors (continued)	Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."		_
(a) Name and address of each person paid more than \$50,000 (b) Typ	pe of service (c) Compensati	ion
NONE		_
T	•	0
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 statistical information such as number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	s the Expenses	
1 N/A		
1N/A		
2		
3		
4		
Dort IV P C		—
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	7	—
<u> </u>		
2		_
All other program-related investments. See instructions.		
3 N/A		
		<u>0.</u>
Total. Add lines 1 through 3		0.
	Form 990-PF (2)	J12)

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	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	2,776,324.
b	Average of monthly cash balances	1b	2,776,324. 44,445.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	2,820,769.
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	2,820,769.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	42,312.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	2,778,457.
6	Minimum investment return. Enter 5% of line 5	6	138,923.
P	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part.)	d certain	
1	Minimum investment return from Part X, line 6	1	138,923.
2a	Tax on investment income for 2012 from Part VI, line 5		· · · · · · · · · · · · · · · · · · ·
b	Income tax for 2012. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	571 .
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	138,352.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	138,352.
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	138,352.
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	8,150.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	·
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	8,150.
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	8,150.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation (qualifies fo	or the section

Form **990-PF** (2012)

4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

THE DORNEY-KOPPEL FAMILY

CHARITABLE FOUNDATION, INC

	(a) Corpus	(b) Years prior to 2011	(c) 2011	(d) 2012
1 Distributable amount for 2012 from Part XI,		· · · · · · · · · · · · · · · · · · ·		
line 7				138,352.
2 Undistributed income, if any, as of the end of 2012				130,332.
a Enter amount for 2011 only			0.	
b Total for prior years:				
		0.		
3 Excess distributions carryover, if any, to 2012:				
a From 2007 326,933.				
b From 2008 273,528.				
c From 2009 269,336.				
d From 2010 105,571.				
e From 2011 47,384.				
f Total of lines 3a through e	1,022,752.			
4 Qualifying distributions for 2012 from	1,022,732.			
Part XII, line 4: ►\$8, 150.				
a Applied to 2011, but not more than line 2a			o.l	
b Applied to undistributed income of prior			0.	1,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2012 distributable amount				8,150.
e Remaining amount distributed out of corpus	0.			0,130.
5 Excess distributions carryover applied to 2012	130,202.			130,202.
(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	892,550.			
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			,	0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by		Í		
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2007				
not applied on line 5 or line 7	196,731.			
9 Excess distributions carryover to 2013.				
Subtract lines 7 and 8 from line 6a	695,819.			
10 Analysis of line 9:	000,010.			
a Excess from 2008 273,528.		İ		
b Excess from 2009 269, 336.				
c Excess from 2010 105,571.				
d Excess from 2011 47,384.				
e Excess from 2012				
C 2COO II OIII EO IE	L		اي.	Form 000 DE (2010)

Part XIV Private Operating Fo	oundations (see in		II-A, question 9)	N/A	
1 a If the foundation has received a ruling or	determination letter that	t it is a private operating			
foundation, and the ruling is effective for	2012, enter the date of	the ruling	▶		
b Check box to indicate whether the found		ng foundation described		4942(j)(3) or49	42(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	(L) 0044	Prior 3 years	1 (4) 0000	/a) Tak-1
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 e Qualifying distributions made directly					
for active conduct of exempt activities.					
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) 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		A-Abi	. :6 4b - 6	had 65 000 ax m	ove in eccets
Part XV Supplementary Info			it the toundation	nad \$5,000 or m	ore in assets
at any time during t					
1 Information Regarding Foundation	•	then OP/ of the total agr	atributions reserved by the	foundation before the ele	so of any tay
a List any managers of the foundation where year (but only if they have contributed representation).			imbutions received by the	TOURGARION DEFORE THE CIC	ise of ally lax
SEE STATEMENT 9	, , , ,	,,,,,			
b List any managers of the foundation wh	o own 10% or more of t	he stock of a corporation	or an equally large porti	on of the ownership of a r	artnership or
other entity) of which the foundation ha			· (or an equally large per a	on or and ormanding or a p	
NONE					
2 Information Regarding Contribut	ion, Grant, Gift, Loar	, Scholarship, etc., F	Programs:	<u> </u>	
			e organizations and does i	not accept unsolicited req	uests for funds. If
the foundation makes gifts, grants, etc.	(see instructions) to indi	ividuals or organizations	under other conditions, c	omplete items 2a, b, c, an	d d
a The name, address, and telephone num			should be addressed:		
GRACE ANNE DORNEY KO)PPEL, 301-3	340-0280			
10701 ARDNAVE PLACE,	POTOMAC, N	MD 20854-12	61	-	
\boldsymbol{b} The form in which applications should by \boldsymbol{NONE}	oe submitted and informa	ation and materials they	should include:		
c Any submission deadlines: NONE					
d Any restrictions or limitations on award	e such as hy geographi	cal areas charitable field	s kinds of institutions or	other factors:	
NONE	o, soon as by geographic	oar areae, enarnabie neiu	o, ando of monduono, of	C Idolo10.	

CHARITABLE FOUNDATION, INC

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3 Grants and Contributions Paid During the Y		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	, mount
a Paid during the year				
			<u> </u>	
			<u> </u>	
AMERICAN FORESTS	NONE	PUBLIC	GENERAL PURPOSES	
#800, 734 15TH STREET NW				
WASHINGTON, DC 20005	ļ			100.
BASILICA OF THE NATIONAL SHRINE	NONE	PUBLIC	GENERAL PURPOSES	
400 MICHIGAN AVENUE NE	NONE	T GERTC	SERVERAL FORFOSES	
WASHINGTON DC 20017				100,
			1	
BISHOP MCDONNELL ALUMNAE ASSOCIATION	NONE	PUBLIC	GENERAL PURPOSES	
357 CLERMONT AVENUE				
BROOKLYN, NY 11238				250.
CUECADDAVE DAY POINDAMION	NONE	DIDI IC	amunna nunnaga	
CHESAPEAKE BAY FOUNDATION 6 HERNDON AVENUE	NONE	PUBLIC	GENERAL PURPOSES	
ANNAPOLIS MD 21403				100.
				100,
LEGAL AID BUREAU	NONE	PUBLIC	GENERAL PURPOSES	
500 EAST LEXINGTON STREET		1		
BALTIMORE MD 21202	<u> </u>	<u> </u>		5,000.
	NTINUATION SHE	<u>er(s)</u>	<u>▶ 3a</u>	8,150.
b Approved for future payment				
NONE				
			1	
Total		· ·	▶ 3b	0.

0.11 A	A ! !	- ()	D	a Activities
(VI_A)	Analyele	AT INCAMA.	. Producin	a Activitice

Enter gross amounts unless otherwise indicated.	Unrelated	business income	Excluded	by section 512, 513, or 514	(e)
Program service revenue:	(a) Business code	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income
	Code				-
ab					
С					· · · · · · · · · · · · · · · · · · ·
d	1 1				
e					
f					
g Fees and contracts from government agencies			1 1-		
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments			14	2.	
4 Dividends and interest from securities			14	28,557.	
5 Net rental income or (loss) from real estate:					
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			18	-354.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a		·			
b	1				
c					
d					
e					
12 Subtotal. Add columns (b), (d), and (e)		0		28,205.	0.
13 Total Add line 12, columns (b), (d), and (e)				13	28,205.
(See worksheet in line 13 instructions to verify calculation Part XVI-B Relationship of Activities		nolishment of F	xempt F	Purposes	
Line No. Explain below how each activity for which	income is reported in	column (e) of Part XVI-			olishment of
the foundation's exempt purposes (other	than by providing fund	ls for such purposes).			
		····			
					· · · ·
		·			
		·			
					
			·····		
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			.,		

CHARITABLE FOUNDATION, INC

52-2214925

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Part)	(VII Information Re Exempt Organi		sfers To a	and Transactions	and Relation	ships With Nonch	aritabl		<u>gc 10</u>
1 Did	the organization directly or indir	ectly engage in any	of the followin	g with any other organizati	on described in se	ction 501(c) of		Yes	No
	Code (other than section 501(c)					. ,			
	nsters from the reporting founda								
(1)	Cash		, ,				1a(1)		Х
(2)	Other assets						1a(2)		X
	er transactions:								
(1)	Sales of assets to a noncharitat	ble exempt organiza	tion				16(1)		Х
	Purchases of assets from a nor						1b(2)	1	X
	Rental of facilities, equipment,						1b(3)		Х
	Reimbursement arrangements						1b(4)		X
	Loans or loan guarantees			•			1b(5)		X
	Performance of services or me	mbership or fundra	sın o solicitatio	ns			1b(6)		Х
	iring of facilities, equipment, mai				•		10		Х
	e answer to any of the above is	-			wavs show the fair	r market value of the good:	-	sets.	
	services given by the reporting fo							,	
	ımn (d) the value of the goods, (Ž	ŭ ŭ	•		
(a) Line n	(b) Amount involved	(c) Name o	f noncharitable	exempt organization	(d) Descript	ion of transfers transactions, ar	nd sharing a	rangeme	nts
			N/A						
				-		· · · · · · · · · · · · · · · · · · ·			
								• • • •	
								•	
				· · · · · · · · · · · · · · · · · · ·					
				<u></u>					
			_				······		
								· · · · · ·	
								·	
	he foundation directly or indirect	•	· ·	, ,	iizations described				_
	ection 501(c) of the Code (other	•)(3)) or in sect	ion 527?			Yes	LX	No
P 11 _/	es," complete the following scho			(A) T					
·	(a) Name of org	amzanon		(b) Type of organization		(c) Description of relatio	riship		
·	N/A				 	· · · · · · · · · · · · · · · · · · ·	•-		
									
					-				
	Under penalties pf perjury, I declare	that I have examined th	ıs return, ıncludın	I ig accompanying schedules and	d statements, and to t	he best of my knowledge			
Sign	and belief, it is tue, correct, and con	nplete Declaration of p	reparer (other that	n taxpayer) is based on all infori	mation of which prepa	arer has any knowledge	May the IRS return with ti	ne prepar	er
Here	W8 /	Lundt		rail 9-4-20	17 PM	SITIPAH	X Yes] No
	Signature of officer or trustice		men (4)	Date	Title		LAX 16:	<u> </u>	
	Print/Type preparer's na	····	Preparer's s		Date	Check If PTI	N	_	
				-		self- employed			
Paid	STEVEN HAL	T (TE		08/29/13	3 р	01083	643	
Prepa			& POWE	LL, LTD.		Firm's EIN ▶ 26-			
Use (, - - - -		· • —					
	Firm's address ▶ 11	99 N. FA	RFAX S	T. 10TH FLOO	OR			-	

223622

ALEXANDRIA, VA 22314

(703) 836-1350 Form **990-PF** (2012)

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

Employer identification number

2012

THE DORNEY-KOPPEL FAMILY CHARITABLE FOUNDATION, INC 52-2214925 Organization type (check one): Filers of: Section: Form 990 or 990-EZ ____ 501(c)() (enter number) organization 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 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 money or property) from any one contributor Complete Parts I and II. Special Rules For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on Part II, line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2012)

Name of organization THE DORNEY-KOPPEL FAMILY CHARITABLE FOUNDATION, INC Employer identification number

52-2214925

Part I	Contributors (see instruct	ions) Use duplicate copies of Part I if additional space is needed
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			T
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	EDWARD J. & GRACE ANNE KOPPEL 10701 ARDNAVE PLACE POTOMAC, MD 20854-1261	\$146,270.	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 Payroli Noncash (Complete Part II if there is a noncash contribution.)
(a) N o.	(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 Oncash 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)

Name of organization

THE DORNEY-KOPPEL FAMILY CHARITABLE FOUNDATION, INC

Employer identification number

52-2214925

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed

Part	Part II	Noncash Property (see instructions). Use duplicate copies of Pa	an II if additional space is needed	
(a) No. from Part I (a) No. (b) FMV (or estimate) (see instructions) (a) No. (c) FMV (or estimate) (see instructions) (b) FMV (or estimate) (see instructions) (c) FMV (or estimate) (see instructions) (d) Date receive from Part I (a) No. (c) FMV (or estimate) (see instructions) (a) No. (c) FMV (or estimate) (see instructions) (d) Date receive from Part I (a) No. (c) FMV (or estimate) (see instructions) (d) Date receive from Description of noncash property given (a) No. (c) FMV (or estimate) (see instructions) (d) Date receive from Description of noncash property given (d) Date receive from Description of noncash property given (d) Date receive from Description of noncash property given (e) FMV (or estimate) (see instructions) (f) Date receive from Description of noncash property given (d) Date receive from Description of noncash property given (e) FMV (or estimate) (see instructions) (f) Date receive from Description of noncash property given (g) FMV (or estimate) (see instructions)	No. from		FMV (or estimate)	(d) Date received
No. (b) FMV (or estimate) (c) (d) Date receive				
(a) No. room Description of noncash property given (b) FMV (or estimate) (see instructions) (c) FMV (or estimate) (see instructions) (d) Date received (a) No. room Description of noncash property given (a) No. room Description of noncash property given (a) No. room Description of noncash property given (b) FMV (or estimate) (see instructions) (c) FMV (or estimate) (see instructions) (d) Date received (a) No. room Description of noncash property given (a) No. room Description of noncash property given (b) FMV (or estimate) (see instructions) (c) FMV (or estimate) (see instructions) (d) Date received (e) FMV (or estimate) (see instructions) (d) Date received	No. from		FMV (or estimate)	(d) Date received
No. (a) No. (b) (b) (c) FMV (or estimate) (see instructions) (a) No. (b) (b) FMV (or estimate) (see instructions) (b) (c) FMV (or estimate) (see instructions) (c) FMV (or estimate) (see instructions) (d) Date received (d) Date received (esee instructions) (a) No. (b) (b) FMV (or estimate) (see instructions) (a) No. (c) FMV (or estimate) (see instructions) (a) No. (b) Description of noncash property given (a) No. (c) FMV (or estimate) (see instructions) (b) Date received (esee instructions) (c) FMV (or estimate) (see instructions) (d) Date received (esee instructions) (esee instructions) (f) FMV (or estimate) (see instructions) (or or or operation of noncash property given (esee instructions) (d) Date received (esee instructions)			\$	
(a) No. (b) FMV (or estimate) (see instructions) (a) No. (c) FMV (or estimate) (see instructions) (b) FMV (or estimate) (see instructions) (a) No. (b) FMV (or estimate) (see instructions) (b) FMV (or estimate) (see instructions) (c) FMV (or estimate) (see instructions) (d) Date received (see instructions) (a) No. (b) FMV (or estimate) (see instructions) (a) No. (b) FMV (or estimate) (see instructions) (b) FMV (or estimate) (see instructions) (c) FMV (or estimate) (see instructions) (d) Date received (see instructions)	No. from		FMV (or estimate)	(d) Date received
No. from Description of noncash property given (a) No. from Description of noncash property given (b) FMV (or estimate) (see instructions) (c) FMV (or estimate) (d) Date received from Description of noncash property given (d) FMV (or estimate) (see instructions) (d) Date received from Description of noncash property given (a) No. (b) FMV (or estimate) (see instructions) (a) No. (b) FMV (or estimate) (see instructions) (b) FMV (or estimate) (see instructions) (c) FMV (or estimate) (see instructions)			\$	
(a) No. (b) FMV (or estimate) (see instructions) (a) No. (b) FMV (or estimate) (see instructions) (b) FMV (or estimate) (see instructions) (c) FMV (or estimate) (see instructions) (d) FMV (or estimate) (see instructions) (d) FMV (or estimate) (see instructions) Date received	No. from		FMV (or estimate)	(d) Date received
No. (b) from Description of noncash property given (c) FMV (or estimate) (see instructions) (d) Date receive \$ (a) No. (b) FMV (or estimate) (see instructions) (c) FMV (or estimate) (see instructions) (d) Date receive (e) FMV (or estimate) (see instructions) Description of noncash property given (d) Date receive (e) FMV (or estimate) (see instructions) Date receive			\$	
(a) No. (b) FMV (or estimate) from Description of noncash property given (see instructions) Date received	No. from		FMV (or estimate)	(d) Date received
No. (b) (c) (d) FMV (or estimate) Description of noncash property given (see instructions)				
	No. from		FMV (or estimate)	(d) Date received

Schedule B (Form 990, 990-EZ, or 990-PF) (2012) Page 4 Name of organization **Employer identification number** THE DORNEY-KOPPEL FAMILY CHARITABLE FOUNDATION, <u>52-2214925</u> Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations that total more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once) Part III Use duplicate copies of Part III if additional space is needed. (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

3 Grants and Contributions Paid During the '		,		
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	
ANTER CARRY CONGUENTAN				
SANIBEL CAPTIVA CONSERVATION FOUNDATION	NONE	PUBLIC	GENERAL PURPOSES	
3333 SANIBEL-CAPTIVA ROAD				
SANIBEL, FL 33957				10
WETA	NONE	PUBLIC	GENERAL PURPOSES	
3939 CAMPBELL AVENUE				
ARLINGTON, VA 22206				1,00
PARK FRIENDS, INC.	NONE	PUBLIC	GENERAL PURPOSES	
1791 MADISON AVENUE, #102	NO.12		GENERAL TORTOBES	
MEMPHIS TN 38104				1,00
VISITING NURSE SERVICE OF NEW YORK	NONE	PUBLIC	GENERAL PURPOSES	
107 E. 70TH STREET, 5TH FLOOR			SHADIGID TORTOODS	
NEW YORK, NY 10021				50
		1		
			_	
		 		
	1	1		

FORM 990-PF	INTEREST	ON SAVINGS	AND	TEMPORARY	CASH	INVESTMENTS	STATEMENT	1
SOURCE							AMOUNT	
M&T BANK CHE	CKING ACC	OUNT					-	2.
TOTAL TO FOR	M 990-PF,	PART I, LI	NE 3	, COLUMN A			<u>.</u>	2.

FORM 990-PF DIVIDENDS AND	INTEREST FROM	SECURITIES	STATEMENT 2
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	COLUMN (A) AMOUNT
M&T SECURITIES	28,557.	0.	28,557.
TOTAL TO FM 990-PF, PART I, LN 4	28,557.	0.	28,557.

FORM 990-PF	LEGAL	FEES	STATEMENT		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
LEGAL FEES	4,217.	0.		0.	
TO FM 990-PF, PG 1, LN 16A	4,217.	0.		0.	

FORM 990-PF	ACCOUNTI	NG FEES	STATEMENT	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING FEES	3,671.	0.		0.
TO FORM 990-PF, PG 1, LN 16B	3,671.	0.		0.

FORM 990-PF	TAX	ES	S	FATEMENT 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
EXCISE TAXES OTHER TAXES AND FEES	331. 649.	0.		0.
TO FORM 990-PF, PG 1, LN 18	980.	0.		0.

FORM 990-PF CORPORATE STO	OCK	STATEMENT 6
DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
M&T SECURITIES	1,965,794.	2,451,069.
TOTAL TO FORM 990-PF, PART II, LINE 10B	1,965,794.	2,451,069.

FORM 990-PF OTH	IER INVESTMENTS		STATEMENT 7
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
CERTIFICATES OF DEPOSIT	COST	499,000.	499,362.
TOTAL TO FORM 990-PF, PART II, LIN	IE 13	499,000.	499,362.

FORM 990-PF	OTHER ASSETS		STATEMENT 8
DESCRIPTION	BEGINNING OF YR BOOK VALUE	END OF YEAR BOOK VALUE	FAIR MARKET VALUE
UNREALIZED GAIN (LOSS) ON INVESTMENTS DUE FROM M&T	190,651. 19,432.	485,275.	0.
TO FORM 990-PF, PART II, LINE 15	210,083.	485,275.	0.

FORM 990-PF

PART XV - LINE 1A LIST OF FOUNDATION MANAGERS STATEMENT

9

NAME OF MANAGER

EDWARD J. KOPPEL GRACE ANNE DORNEY KOPPEL

Form 886	8 (Rev. 1-2013)				Page 2
• If you a	re filing for an Additional (Not Automatic) 3-Month Ex	xtension,	complete only Part II and check th	is box	X
	y complete Part II if you have already been granted an		-		
	re filing for an Automatic 3-Month Extension, comple				
Part II	Additional (Not Automatic) 3-Month E	xtensio	on of Time. Only file the origi	nal (no copies needed).	
			Enter filer'	s identifying number, see ins	tructions
Type or	Name of exempt organization or other filer, see instru	ıctions		Employer identification number	per (EIN) or
print	THE DORNEY-KOPPEL FAMILY				
File by the	CHARITABLE FOUNDATION, INC			52-221492	25
due date for	Number, street, and room or suite no. If a P.O. box, s	ee instruc	ctions.	Social security number (SSN	
filing your return See	10701 ARDNAVE PLACE			,	
ınstructions	City, town or post office, state, and ZIP code. For a for ${\tt POTOMAC}$, MD ${\tt 20854-1261}$	oreign add	dress, see instructions.		
	20034 1201				
Enter the F	Return code for the return that this application is for (fike	e a separa	ite application for each return)		0 4
Applicatio	in	Return	Application		Return
Is For		Code	Is For		Code
	or Form 990-EZ	01		San Commence of the San Commence	19.50 c
Form 990-E		02	Form 1041-A		08
	(individual)	03	Form 4720		09
Form 990-F		04	Form 5227		10
	F (sec. 401(a) or 408(a) trust)	05	Form 6069		11
	(trust other than above)	06	Form 8870	· · · · · · · · · · · · · · · · · · ·	12
	not complete Part II if you were not already granted	·	<u> </u>	viously filed Form 8868	
	GRACE ANNE DORM oks are in the care of 10701 ARDNAVE II	NEY K	OPPEL		
	ne No. ► 301-340-0280		FAX No. >		
-	ganization does not have an office or place of business	s in the Ur			
	for a Group Return, enter the organization's four digit (heck this
box ▶ 🗀			ch a list with the names and EINs o		
4 I requ	uest an additional 3-month extension of time until	OVEM	BER 15, 2013.		
5 For c	alendar year 2012 , or other tax year beginning		, and endin	ıg	
6 If the	tax year entered in line 5 is for less than 12 months, ch	heck reas	on: Initial return	Final return	
	Change in accounting period				
7 State	in detail why you need the extension				
ADI	DITIONAL TIME IS NEEDED TO F	REPA	RE A COMPLETE AND	ACCURATE TAX	
RET	TURN.				
8a If this	application is for Form 990-BL, 990-PF, 990-T, 4720, o	or 6069, ei	nter the tentative tax, less any	1 1	
nonre	efundable credits. See instructions.			8a \$	0.
b If this	application is for Form 990-PF, 990-T, 4720, or 6069, e	enter any	refundable credits and estimated		
tax pa	ayments made. Include any prior year overpayment allo	owed as a	credit and any amount paid		
previ	ously with Form 8868.			8b \$	101.
c Balan	nce due. Subtract line 8b from line 8a. Include your pay	yment with	n this form, if required, by using	1 1	
EFTP:	S (Electronic Federal Tax Payment System). See instru			8c \$	0.
	Signature and Verificati	on mus	t be completed for Part II o	only.	
Inder penalti is true, corr	es of perjury, I declare that I have examined this form, includu ect, and complete, and that I am authorized to prepare this for	ng accomp rm.	anying schedules and statements, and to		lief,
ignature 🕨	. Cary mount	PA.		Date > 8/2/13	