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

Department of the Treasury  
 Internal Revenue Service

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

Open to Public Inspection

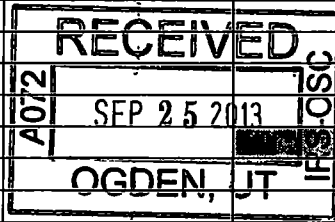
For calendar year 2012 or tax year beginning

04/01, 2012, and ending

03/31, 2013

|                                                                                                                                  |                                                                    |                                                                                                                         |
|----------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------|
| Name of foundation<br><b>TRULAND FOUNDATION</b>                                                                                  |                                                                    | <b>A</b> Employer identification number<br>54-6037172                                                                   |
| Number and street (or P.O. box number if mail is not delivered to street address)<br>1900 ORACLE WAY, SUITE 700                  |                                                                    | <b>B</b> Telephone number (see instructions)<br>(703) 464-3000                                                          |
| Room/suite                                                                                                                       |                                                                    |                                                                                                                         |
| City or town, state, and ZIP code<br>RESTON, VA 20190                                                                            |                                                                    |                                                                                                                         |
| <b>G</b> Check all that apply:                                                                                                   |                                                                    | <b>C</b> If exemption application is pending, check here <input type="checkbox"/>                                       |
| <input type="checkbox"/> Initial return                                                                                          | <input type="checkbox"/> Initial return of a former public charity | <b>D</b> 1. Foreign organizations, check here <input type="checkbox"/>                                                  |
| <input type="checkbox"/> Final return                                                                                            | <input type="checkbox"/> Amended return                            | 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>               |
| <input type="checkbox"/> Address change                                                                                          | <input type="checkbox"/> Name change                               | <b>E</b> If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>    |
| <b>H</b> Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation             |                                                                    | <b>F</b> If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/> |
| <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation |                                                                    |                                                                                                                         |
| <b>I</b> Fair market value of all assets at end of year (from Part II, col. (c), line 16) ▶ \$ 196,885.                          |                                                                    |                                                                                                                         |
| <b>J</b> Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual                            |                                                                    |                                                                                                                         |
| <input type="checkbox"/> Other (specify) _____                                                                                   |                                                                    |                                                                                                                         |
| (Part I, column (d) must be on cash basis.)                                                                                      |                                                                    |                                                                                                                         |

| Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions)) |                                                                                              | (a) Revenue and expenses per books | (b) Net investment income | (c) Adjusted net income | (d) Disbursements for charitable purposes (cash basis only) |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|------------------------------------|---------------------------|-------------------------|-------------------------------------------------------------|
| Revenue                                                                                                                                                            | 1 Contributions, gifts, grants, etc., received (attach schedule) . . . . .                   | 546,186                            | ATCH 1                    |                         |                                                             |
|                                                                                                                                                                    | 2 Check <input type="checkbox"/> if the foundation is not required to attach Sch B . . . . . |                                    |                           |                         |                                                             |
|                                                                                                                                                                    | 3 Interest on savings and temporary cash investments . . . . .                               | 57                                 | 57                        |                         |                                                             |
|                                                                                                                                                                    | 4 Dividends and interest from securities . . . . .                                           | 1,939                              | 658                       |                         | ATCH 2                                                      |
|                                                                                                                                                                    | 5a Gross rents . . . . .                                                                     |                                    |                           |                         |                                                             |
|                                                                                                                                                                    | b Net rental income or (loss) . . . . .                                                      |                                    |                           |                         |                                                             |
|                                                                                                                                                                    | 6a Net gain or (loss) from sale of assets not on line 10 . . . . .                           | 8,490                              |                           |                         |                                                             |
|                                                                                                                                                                    | b Gross sales price for all assets on line 6a . . . . .                                      | 35,000                             |                           |                         |                                                             |
|                                                                                                                                                                    | 7 Capital gain net income (from Part IV, line 2) . . . . .                                   |                                    | 8,490                     |                         |                                                             |
|                                                                                                                                                                    | 8 Net short-term capital gain . . . . .                                                      |                                    |                           |                         |                                                             |
|                                                                                                                                                                    | 9 Income modifications . . . . .                                                             |                                    |                           |                         |                                                             |
|                                                                                                                                                                    | 10a Gross sales less returns and allowances . . . . .                                        |                                    |                           |                         |                                                             |
| b Less Cost of goods sold . . . . .                                                                                                                                |                                                                                              |                                    |                           |                         |                                                             |
| c Gross profit or (loss) (attach schedule) . . . . .                                                                                                               |                                                                                              |                                    |                           |                         |                                                             |
| 11 Other income (attach schedule) ATCH 3 . . . . .                                                                                                                 | 15,000                                                                                       |                                    |                           |                         |                                                             |
| 12 Total. Add lines 1 through 11 . . . . .                                                                                                                         | 571,672                                                                                      | 9,205                              |                           |                         |                                                             |
| 13 Compensation of officers, directors, trustees, etc. . . . .                                                                                                     | 0                                                                                            |                                    |                           |                         |                                                             |
| 14 Other employee salaries and wages . . . . .                                                                                                                     |                                                                                              |                                    |                           |                         |                                                             |
| 15 Pension plans, employee benefits . . . . .                                                                                                                      |                                                                                              |                                    |                           |                         |                                                             |
| 16a Legal fees (attach schedule) . . . . .                                                                                                                         |                                                                                              |                                    |                           |                         |                                                             |
| b Accounting fees (attach schedule) ATCH 4 . . . . .                                                                                                               | 2,500                                                                                        | 500                                |                           | 2,000                   |                                                             |
| c Other professional fees (attach schedule) . . . . .                                                                                                              |                                                                                              |                                    |                           |                         |                                                             |
| 17 Interest . . . . .                                                                                                                                              |                                                                                              |                                    |                           |                         |                                                             |
| 18 Taxes (attach schedule) (see instructions) ATCH 5 . . . . .                                                                                                     | 441                                                                                          |                                    |                           |                         |                                                             |
| 19 Depreciation (attach schedule) and depletion . . . . .                                                                                                          |                                                                                              |                                    |                           |                         |                                                             |
| 20 Occupancy . . . . .                                                                                                                                             |                                                                                              |                                    |                           |                         |                                                             |
| 21 Travel, conferences, and meetings . . . . .                                                                                                                     |                                                                                              |                                    |                           |                         |                                                             |
| 22 Printing and publications . . . . .                                                                                                                             |                                                                                              |                                    |                           |                         |                                                             |
| 23 Other expenses (attach schedule) ATCH 6 . . . . .                                                                                                               | 11,128                                                                                       | 11,112                             |                           | 16                      |                                                             |
| 24 Total operating and administrative expenses. Add lines 13 through 23 . . . . .                                                                                  | 14,069                                                                                       | 11,612                             |                           | 2,016                   |                                                             |
| 25 Contributions, gifts, grants paid . . . . .                                                                                                                     | 514,417                                                                                      |                                    |                           | 284,417                 |                                                             |
| 26 Total expenses and disbursements. Add lines 24 and 25 . . . . .                                                                                                 | 528,486                                                                                      | 11,612                             | 0                         | 286,433                 |                                                             |
| 27 Subtract line 26 from line 12:                                                                                                                                  |                                                                                              |                                    |                           |                         |                                                             |
| a Excess of revenue over expenses and disbursements . . . . .                                                                                                      | 43,186                                                                                       |                                    |                           |                         |                                                             |
| b Net investment income (if negative, enter -0-) . . . . .                                                                                                         |                                                                                              | 0                                  |                           |                         |                                                             |
| c Adjusted net income (if negative, enter -0-) . . . . .                                                                                                           |                                                                                              |                                    |                           |                         |                                                             |



SCANNED OCT 21 2013  
Operating and Administrative Expenses

| Part II Balance Sheets      |                                                                                                                             | Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)              |                | Beginning of year     | End of year |  |
|-----------------------------|-----------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------|----------------|-----------------------|-------------|--|
|                             |                                                                                                                             | (a) Book Value                                                                                                                    | (b) Book Value | (c) Fair Market Value |             |  |
| Assets                      | 1                                                                                                                           | Cash - non-interest-bearing . . . . .                                                                                             | 57,663.        | 127,359.              | 127,359.    |  |
|                             | 2                                                                                                                           | Savings and temporary cash investments . . . . .                                                                                  |                |                       |             |  |
|                             | 3                                                                                                                           | Accounts receivable ▶                                                                                                             |                |                       |             |  |
|                             |                                                                                                                             | Less: allowance for doubtful accounts ▶                                                                                           |                |                       |             |  |
|                             | 4                                                                                                                           | Pledges receivable ▶                                                                                                              |                |                       |             |  |
|                             |                                                                                                                             | Less: allowance for doubtful accounts ▶                                                                                           |                |                       |             |  |
|                             | 5                                                                                                                           | Grants receivable . . . . .                                                                                                       |                |                       |             |  |
|                             | 6                                                                                                                           | Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) . . . . . |                |                       |             |  |
|                             | 7                                                                                                                           | Other notes and loans receivable (attach schedule) ▶                                                                              |                |                       |             |  |
|                             |                                                                                                                             | Less: allowance for doubtful accounts ▶                                                                                           |                |                       |             |  |
|                             | 8                                                                                                                           | Inventories for sale or use . . . . .                                                                                             |                |                       |             |  |
|                             | 9                                                                                                                           | Prepaid expenses and deferred charges . . . . .                                                                                   |                |                       |             |  |
|                             | 10 a                                                                                                                        | Investments - U.S. and state government obligations (attach schedule) . . . . .                                                   |                |                       |             |  |
|                             | b                                                                                                                           | Investments - corporate stock (attach schedule) ATCH 7 . . . . .                                                                  | 75,957.        | 49,447.               | 69,526.     |  |
|                             | c                                                                                                                           | Investments - corporate bonds (attach schedule) . . . . .                                                                         |                |                       |             |  |
|                             | 11                                                                                                                          | Investments - land, buildings, and equipment basis ▶                                                                              |                |                       |             |  |
|                             | Less: accumulated depreciation (attach schedule) ▶                                                                          |                                                                                                                                   |                |                       |             |  |
| 12                          | Investments - mortgage loans . . . . .                                                                                      |                                                                                                                                   |                |                       |             |  |
| 13                          | Investments - other (attach schedule) . . . . .                                                                             |                                                                                                                                   |                |                       |             |  |
| 14                          | Land, buildings, and equipment basis ▶                                                                                      |                                                                                                                                   |                |                       |             |  |
|                             | Less: accumulated depreciation (attach schedule) ▶                                                                          |                                                                                                                                   |                |                       |             |  |
| 15                          | Other assets (describe ▶) . . . . .                                                                                         |                                                                                                                                   |                |                       |             |  |
| 16                          | <b>Total assets</b> (to be completed by all filers - see the instructions. Also, see page 1, item I) . . . . .              | 133,620.                                                                                                                          | 176,806.       | 196,885.              |             |  |
| Liabilities                 | 17                                                                                                                          | Accounts payable and accrued expenses . . . . .                                                                                   |                |                       |             |  |
|                             | 18                                                                                                                          | Grants payable . . . . .                                                                                                          |                |                       |             |  |
|                             | 19                                                                                                                          | Deferred revenue . . . . .                                                                                                        |                |                       |             |  |
|                             | 20                                                                                                                          | Loans from officers, directors, trustees, and other disqualified persons . . . . .                                                |                |                       |             |  |
|                             | 21                                                                                                                          | Mortgages and other notes payable (attach schedule) . . . . .                                                                     |                |                       |             |  |
|                             | 22                                                                                                                          | Other liabilities (describe ▶) . . . . .                                                                                          |                |                       |             |  |
| 23                          | <b>Total liabilities</b> (add lines 17 through 22) . . . . .                                                                | 0                                                                                                                                 | 0              |                       |             |  |
| Net Assets or Fund Balances | Foundations that follow SFAS 117, check here ▶ <input type="checkbox"/>                                                     |                                                                                                                                   |                |                       |             |  |
|                             | and complete lines 24 through 26 and lines 30 and 31.                                                                       |                                                                                                                                   |                |                       |             |  |
|                             | 24                                                                                                                          | Unrestricted . . . . .                                                                                                            |                |                       |             |  |
|                             | 25                                                                                                                          | Temporarily restricted . . . . .                                                                                                  |                |                       |             |  |
|                             | 26                                                                                                                          | Permanently restricted . . . . .                                                                                                  |                |                       |             |  |
|                             | Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. ▶ <input checked="" type="checkbox"/> |                                                                                                                                   |                |                       |             |  |
|                             | 27                                                                                                                          | Capital stock, trust principal, or current funds . . . . .                                                                        |                |                       |             |  |
|                             | 28                                                                                                                          | Paid-in or capital surplus, or land, bldg, and equipment fund . . . . .                                                           |                |                       |             |  |
| 29                          | Retained earnings, accumulated income, endowment, or other funds . . . . .                                                  | 133,620.                                                                                                                          | 176,806.       |                       |             |  |
| 30                          | <b>Total net assets or fund balances</b> (see instructions) . . . . .                                                       | 133,620.                                                                                                                          | 176,806.       |                       |             |  |
| 31                          | <b>Total liabilities and net assets/fund balances</b> (see instructions) . . . . .                                          | 133,620.                                                                                                                          | 176,806.       |                       |             |  |

**Part III Analysis of Changes in Net Assets or Fund Balances**

|   |                                                                                                                                                                      |   |          |
|---|----------------------------------------------------------------------------------------------------------------------------------------------------------------------|---|----------|
| 1 | Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) . . . . . | 1 | 133,620. |
| 2 | Enter amount from Part I, line 27a . . . . .                                                                                                                         | 2 | 43,186.  |
| 3 | Other increases not included in line 2 (itemize) ▶                                                                                                                   | 3 |          |
| 4 | Add lines 1, 2, and 3 . . . . .                                                                                                                                      | 4 | 176,806. |
| 5 | Decreases not included in line 2 (itemize) ▶                                                                                                                         | 5 |          |
| 6 | <b>Total net assets or fund balances at end of year</b> (line 4 minus line 5) - Part II, column (b), line 30 . . . . .                                               | 6 | 176,806. |

Part IV Capital Gains and Losses for Tax on Investment Income

Table with columns (a) through (k) for capital gains and losses. Includes rows for 'SEE PART IV SCHEDULE', 'Capital gain net income or (net capital loss)', and 'Net short-term capital gain or (loss)'. Total capital gain net income is 8,490.

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? [ ] Yes [X] No
If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part.

1 Enter the appropriate amount in each column for each year; see the instructions before making any entries.

Table with columns (a) Base period years, (b) Adjusted qualifying distributions, (c) Net value of noncharitable-use assets, and (d) Distribution ratio. Includes rows for 2011-2007, Total of line 1, Average distribution ratio, and Qualifying distributions from Part XII.

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions)

Table with 11 rows for excise tax calculations. Includes fields for exempt foundations, domestic foundations, tax under section 511, add lines 1 and 2, subtitle A tax, tax based on investment income, credits/payments (2012 estimated tax, exempt foreign orgs, etc.), total credits, penalty, tax due, overpayment, and amount to be credited to 2013 estimated tax.

Part VII-A Statements Regarding Activities

Table with 10 rows for activity statements. Includes questions about influencing legislation, political campaign spending, Form 1120-POL filing, political expenditure tax, IRS reporting, unrelated business income, liquidation, 508(e) requirements, state reporting, private operating foundation status, and substantial contributors.

Part VII-A Statements Regarding Activities (continued)

11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application?
Website address N/A
14 The books are in care of THE FOUNDATION Telephone no. 703-464-3000
Located at 1900 ORACLE WAY, #700 RESTON, VA ZIP+4 20190
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the year 15
16 At any time during calendar year 2012, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of the foreign country

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

1a During the year did the foundation (either directly or indirectly):
(1) Engage in the sale or exchange, or leasing of property with a disqualified person?
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?
(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)
b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2012?
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):
a At the end of tax year 2012, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2012? If "Yes," list the years
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions.)
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?
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, Form 4720, to determine if the foundation had excess business holdings in 2012.)
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2012?

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:

- (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, any voter registration drive?
(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 509(a)(1), (2), or (3), or section 4940(d)(2)? (see instructions)
(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for 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)?

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 expenditure responsibility for the grant? ATCH 8

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?

b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870.

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?

Table with 3 columns and 4 rows. Row 1: 5b, X. Row 2: 6b, X. Row 3: 7b.

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).

Table with 5 columns: (a) Name and address, (b) Title, and average hours per week devoted to position, (c) Compensation (If not paid, enter -0-), (d) Contributions to employee benefit plans and deferred compensation, (e) Expense account, other allowances. Row 1: ATCH 9, 0, 0, 0.

2 Compensation of five highest-paid employees (other than those included on line 1 - see instructions). If none, enter "NONE."

Table with 5 columns: (a) Name and address of each employee paid more than \$50,000, (b) Title, and average hours per week devoted to position, (c) Compensation, (d) Contributions to employee benefit plans and deferred compensation, (e) Expense account, other allowances. Row 1: NONE.

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

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**

**3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE."**

| (a) Name and address of each person paid more than \$50,000                               | (b) Type of service | (c) Compensation |
|-------------------------------------------------------------------------------------------|---------------------|------------------|
| NONE                                                                                      |                     |                  |
|                                                                                           |                     |                  |
|                                                                                           |                     |                  |
|                                                                                           |                     |                  |
|                                                                                           |                     |                  |
|                                                                                           |                     |                  |
| <b>Total number of others receiving over \$50,000 for professional services . . . . .</b> |                     |                  |

**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 the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

| 1   | Expenses |
|-----|----------|
| N/A |          |
| 2   |          |
| 3   |          |
| 4   |          |

**Part IX-B Summary of Program-Related Investments (see instructions)**

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2

| 1                                                      | Amount |
|--------------------------------------------------------|--------|
| NONE                                                   |        |
| 2                                                      |        |
| All other program-related investments See instructions |        |
| 3                                                      |        |
| NONE                                                   |        |
| <b>Total. Add lines 1 through 3 . . . . .</b>          |        |

**Part X Minimum Investment Return** (All domestic foundations must complete this part. Foreign foundations, see instructions.)

|   |                                                                                                             |    |          |
|---|-------------------------------------------------------------------------------------------------------------|----|----------|
| 1 | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: |    |          |
| a | Average monthly fair market value of securities                                                             | 1a | 76,389.  |
| b | Average of monthly cash balances                                                                            | 1b | 72,677.  |
| c | Fair market value of all other assets (see instructions)                                                    | 1c |          |
| d | <b>Total</b> (add lines 1a, b, and c)                                                                       | 1d | 149,066. |
| e | Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)   | 1e |          |
| 2 | Acquisition indebtedness applicable to line 1 assets                                                        | 2  |          |
| 3 | Subtract line 2 from line 1d                                                                                | 3  | 149,066. |
| 4 | Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)   | 4  | 2,236.   |
| 5 | <b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4 | 5  | 146,830. |
| 6 | <b>Minimum investment return.</b> Enter 5% of line 5                                                        | 6  | 7,342.   |

**Part XI Distributable Amount** (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here  and do not complete this part.)

|    |                                                                                                           |    |         |
|----|-----------------------------------------------------------------------------------------------------------|----|---------|
| 1  | Minimum investment return from Part X, line 6                                                             | 1  | 7,342.  |
| 2a | Tax on investment income for 2012 from Part VI, line 5                                                    | 2a |         |
| b  | Income tax for 2012. (This does not include the tax from Part VI.)                                        | 2b |         |
| c  | Add lines 2a and 2b                                                                                       | 2c |         |
| 3  | Distributable amount before adjustments. Subtract line 2c from line 1                                     | 3  | 7,342.  |
| 4  | Recoveries of amounts treated as qualifying distributions                                                 | 4  | 15,000. |
| 5  | Add lines 3 and 4                                                                                         | 5  | 22,342. |
| 6  | Deduction from distributable amount (see instructions)                                                    | 6  |         |
| 7  | <b>Distributable amount as adjusted.</b> Subtract line 6 from line 5. Enter here and on Part XIII, line 1 | 7  | 22,342. |

**Part 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 | 286,433. |
| b | Program-related investments - total from Part IX-B                                                                                                   | 1b |          |
| 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 | <b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4                                    | 4  | 286,433. |
| 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 (see instructions) | 5  | 0        |
| 6 | <b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4                                                                                | 6  | 286,433. |

**Note.** The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

**Part XIII Undistributed Income (see instructions)**

|                                                                                                                                                                                      | (a)<br>Corpus | (b)<br>Years prior to 2011 | (c)<br>2011 | (d)<br>2012 |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|----------------------------|-------------|-------------|
| 1 Distributable amount for 2012 from Part XI, line 7 . . . . .                                                                                                                       |               |                            |             | 22,342.     |
| 2 Undistributed income, if any, as of the end of 2012                                                                                                                                |               |                            |             |             |
| a Enter amount for 2011 only . . . . .                                                                                                                                               |               |                            |             |             |
| b Total for prior years: 20 10, 20 09, 20 08 . . . . .                                                                                                                               |               |                            |             |             |
| 3 Excess distributions carryover, if any, to 2012:                                                                                                                                   |               |                            |             |             |
| a From 2007 . . . . .                                                                                                                                                                | 587,323.      |                            |             |             |
| b From 2008 . . . . .                                                                                                                                                                | 469,213.      |                            |             |             |
| c From 2009 . . . . .                                                                                                                                                                | 288,328.      |                            |             |             |
| d From 2010 . . . . .                                                                                                                                                                | 506,257.      |                            |             |             |
| e From 2011 . . . . .                                                                                                                                                                | 350,414.      |                            |             |             |
| f Total of lines 3a through e . . . . .                                                                                                                                              | 2,201,535.    |                            |             |             |
| 4 Qualifying distributions for 2012 from Part XII, line 4: ▶ \$ 286,433.                                                                                                             |               |                            |             |             |
| a Applied to 2011, but not more than line 2a . . . . .                                                                                                                               |               |                            |             |             |
| b Applied to undistributed income of prior years (Election required - see instructions) . . . . .                                                                                    |               |                            |             |             |
| c Treated as distributions out of corpus (Election required - see instructions) . . . . .                                                                                            |               |                            |             |             |
| d Applied to 2012 distributable amount . . . . .                                                                                                                                     |               |                            |             | 22,342.     |
| e Remaining amount distributed out of corpus . . . . .                                                                                                                               | 264,091.      |                            |             |             |
| 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:                                                                                                                             |               |                            |             |             |
| a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 . . . . .                                                                                                                        | 2,465,626.    |                            |             |             |
| b Prior years' undistributed income. Subtract line 4b from line 2b . . . . .                                                                                                         |               |                            |             |             |
| 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 . . . . . |               |                            |             |             |
| d Subtract line 6c from line 6b. Taxable amount - see instructions . . . . .                                                                                                         |               |                            |             |             |
| e Undistributed income for 2011. Subtract line 4a from line 2a. Taxable amount - see instructions . . . . .                                                                          |               |                            |             |             |
| f Undistributed income for 2012. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2013 . . . . .                                                              |               |                            |             |             |
| 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) . . . . .                                                                              | 587,323.      |                            |             |             |
| 9 Excess distributions carryover to 2013. Subtract lines 7 and 8 from line 6a . . . . .                                                                                              | 1,878,303.    |                            |             |             |
| 10 Analysis of line 9:                                                                                                                                                               |               |                            |             |             |
| a Excess from 2008 . . . . .                                                                                                                                                         | 469,213.      |                            |             |             |
| b Excess from 2009 . . . . .                                                                                                                                                         | 288,328.      |                            |             |             |
| c Excess from 2010 . . . . .                                                                                                                                                         | 506,257.      |                            |             |             |
| d Excess from 2011 . . . . .                                                                                                                                                         | 350,414.      |                            |             |             |
| e Excess from 2012 . . . . .                                                                                                                                                         | 264,091.      |                            |             |             |

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)

NOT APPLICABLE

1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2012, enter the date of the ruling

b Check box to indicate whether the foundation is a private operating foundation described in section

4942(j)(3) or 4942(j)(5)

Table with 5 columns: (a) 2012, (b) 2011, (c) 2010, (d) 2009, (e) Total. Rows include 2a-e (Qualifying distributions) and 3a-c (Alternative tests).

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

1 Information Regarding Foundation Managers:

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

NONE

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

NONE

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

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

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

ATCH 10

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

WRITTEN DETAIL OF PROGRAMS FOR WHICH FUNDS WILL BE USED.

c Any submission deadlines:

NONE

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

NONE

**Part XV** Supplementary information (continued)

**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

| Recipient<br>Name and address (home or business)    | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution | Amount   |
|-----------------------------------------------------|-----------------------------------------------------------------------------------------------------------|--------------------------------|----------------------------------|----------|
| <p><b>a Paid during the year</b></p> <p>ATCH 11</p> |                                                                                                           |                                |                                  |          |
| <b>Total</b> . . . . . ▶ <b>3a</b>                  |                                                                                                           |                                |                                  | 514,417. |
| <p><b>b Approved for future payment</b></p>         |                                                                                                           |                                |                                  |          |
| <b>Total</b> . . . . . ▶ <b>3b</b>                  |                                                                                                           |                                |                                  |          |

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.

Table with 5 main columns: (a) Business code, (b) Amount, (c) Exclusion code, (d) Amount, (e) Related or exempt function income. Rows include: 1 Program service revenue; 2 Membership dues and assessments; 3 Interest on savings and temporary cash investments; 4 Dividends and interest from securities; 5 Net rental income or (loss) from real estate; 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 MISCELLANEOUS; 12 Subtotal; 13 Total.

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Table with 2 columns: Line No., Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes). (See instructions.)

Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

- 1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code... a Transfers from the reporting foundation to a noncharitable exempt organization of: (1) Cash (2) Other assets b Other transactions: (1) Sales of assets to a noncharitable exempt organization (2) Purchases of assets from a noncharitable exempt organization (3) Rental of facilities, equipment, or other assets (4) Reimbursement arrangements (5) Loans or loan guarantees (6) Performance of services or membership or fundraising solicitations c Sharing of facilities, equipment, mailing lists, other assets, or paid employees d If the answer to any of the above is "Yes," complete the following schedule.

Table with columns Yes and No for items 1a(1) through 1c. All 'No' boxes are checked.

Table with 4 columns: (a) Line no, (b) Amount involved, (c) Name of noncharitable exempt organization, (d) Description of transfers, transactions, and sharing arrangements. All entries are N/A.

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code... [ ] Yes [X] No

Table with 3 columns: (a) Name of organization, (b) Type of organization, (c) Description of relationship. All cells are empty.

Sign Here Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. Signature of officer or trustee: [Signature] Date: 9.16.13 Title: PRESIDENT

May the IRS discuss this return with the preparer shown below (see instructions)? [X] Yes [ ] No

Paid Preparer Use Only section containing fields for Preparer's name (CHAVON WILCOX, CPA), Signature (C Wilcox, CPA - MD), Date (8/29/13), Firm's name (ARONSON LLC), Firm's address (805 KING FARM BLVD., 3RD FLOOR, ROCKVILLE, MD), Firm's EIN (37-1611326), and Phone no. (301-231-6200).

# Schedule of Contributors

2012

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

Name of the organization

TRULAND FOUNDATION

Employer identification number

54-6037172

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

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 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 **TRULAND FOUNDATION**

Employer identification number  
54-6037172

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

| (a)<br>No. | (b)<br>Name, address, and ZIP + 4                                                                   | (c)<br>Total contributions | (d)<br>Type of contribution                                                                                                                                                  |
|------------|-----------------------------------------------------------------------------------------------------|----------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1          | TRULAND SYSTEMS CORPORATION<br>-----<br>1900 ORACLE WAY, #700<br>-----<br>RESTON, VA 20190<br>----- | \$ ----- 546,186.          | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II if there is a noncash contribution.) |
| -----      | -----                                                                                               | \$ -----                   | Person <input type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II if there is a noncash contribution.)            |
| -----      | -----                                                                                               | \$ -----                   | Person <input type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II if there is a noncash contribution.)            |
| -----      | -----                                                                                               | \$ -----                   | Person <input type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II if there is a noncash contribution.)            |
| -----      | -----                                                                                               | \$ -----                   | Person <input type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II if there is a noncash contribution.)            |
| -----      | -----                                                                                               | \$ -----                   | Person <input type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II if there is a noncash contribution.)            |

Name of organization **TRULAND FOUNDATION**

Employer identification number

54-6037172

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

| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
|---------------------|-------------------------------------------|------------------------------------------|-------------------|
| -----               | -----<br>-----<br>-----<br>-----          | \$ -----                                 | -----             |
| -----               | -----<br>-----<br>-----<br>-----          | \$ -----                                 | -----             |
| -----               | -----<br>-----<br>-----<br>-----          | \$ -----                                 | -----             |
| -----               | -----<br>-----<br>-----<br>-----          | \$ -----                                 | -----             |
| -----               | -----<br>-----<br>-----<br>-----          | \$ -----                                 | -----             |
| -----               | -----<br>-----<br>-----<br>-----          | \$ -----                                 | -----             |
| -----               | -----<br>-----<br>-----<br>-----          | \$ -----                                 | -----             |
| -----               | -----<br>-----<br>-----<br>-----          | \$ -----                                 | -----             |
| -----               | -----<br>-----<br>-----<br>-----          | \$ -----                                 | -----             |
| -----               | -----<br>-----<br>-----<br>-----          | \$ -----                                 | -----             |
| -----               | -----<br>-----<br>-----<br>-----          | \$ -----                                 | -----             |

Name of organization TRULAND FOUNDATION

Employer identification number  
54-6037172

**Part III 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. See instructions.) ▶ \$ \_\_\_\_\_  
Use duplicate copies of Part III if additional space is needed.

| (a) No. from Part I | (b) Purpose of gift     | (c) Use of gift         | (d) Description of how gift is held |
|---------------------|-------------------------|-------------------------|-------------------------------------|
| ---                 | -----<br>-----<br>----- | -----<br>-----<br>----- | -----<br>-----<br>-----             |

(e) Transfer of gift

Transferee's name, address, and ZIP + 4

Relationship of transferor to transferee

|                         |                         |
|-------------------------|-------------------------|
| -----<br>-----<br>----- | -----<br>-----<br>----- |
|-------------------------|-------------------------|

| (a) No. from Part I | (b) Purpose of gift     | (c) Use of gift         | (d) Description of how gift is held |
|---------------------|-------------------------|-------------------------|-------------------------------------|
| ---                 | -----<br>-----<br>----- | -----<br>-----<br>----- | -----<br>-----<br>-----             |

(e) Transfer of gift

Transferee's name, address, and ZIP + 4

Relationship of transferor to transferee

|                         |                         |
|-------------------------|-------------------------|
| -----<br>-----<br>----- | -----<br>-----<br>----- |
|-------------------------|-------------------------|

| (a) No. from Part I | (b) Purpose of gift     | (c) Use of gift         | (d) Description of how gift is held |
|---------------------|-------------------------|-------------------------|-------------------------------------|
| ---                 | -----<br>-----<br>----- | -----<br>-----<br>----- | -----<br>-----<br>-----             |

(e) Transfer of gift

Transferee's name, address, and ZIP + 4

Relationship of transferor to transferee

|                         |                         |
|-------------------------|-------------------------|
| -----<br>-----<br>----- | -----<br>-----<br>----- |
|-------------------------|-------------------------|

| (a) No. from Part I | (b) Purpose of gift     | (c) Use of gift         | (d) Description of how gift is held |
|---------------------|-------------------------|-------------------------|-------------------------------------|
| ---                 | -----<br>-----<br>----- | -----<br>-----<br>----- | -----<br>-----<br>-----             |

(e) Transfer of gift

Transferee's name, address, and ZIP + 4

Relationship of transferor to transferee

|                         |                         |
|-------------------------|-------------------------|
| -----<br>-----<br>----- | -----<br>-----<br>----- |
|-------------------------|-------------------------|

**SCHEDULE D  
(Form 1041)**

Department of the Treasury  
Internal Revenue Service

**Capital Gains and Losses**

▶ Attach to Form 1041, Form 5227, or Form 990-T.  
▶ Information about Schedule D (Form 1041) and its separate instructions is at  
[www.irs.gov/form1041](http://www.irs.gov/form1041).

OMB No 1545-0092

**2012**

|                                                      |                                                     |
|------------------------------------------------------|-----------------------------------------------------|
| Name of estate or trust<br><b>TRULAND FOUNDATION</b> | Employer identification number<br><b>54-6037172</b> |
|------------------------------------------------------|-----------------------------------------------------|

Note: Form 5227 filers need to complete only Parts I and II.

**Part I Short-Term Capital Gains and Losses - Assets Held One Year or Less**

| (a) Description of property<br>(Example 100 shares 7% preferred of "Z" Co) | (b) Date acquired<br>(mo., day, yr.) | (c) Date sold<br>(mo., day, yr.) | (d) Sales price | (e) Cost or other basis<br>(see instructions) | (f) Gain or (loss) for<br>the entire year<br>Subtract (e) from (d) |
|----------------------------------------------------------------------------|--------------------------------------|----------------------------------|-----------------|-----------------------------------------------|--------------------------------------------------------------------|
| <b>1a</b>                                                                  |                                      |                                  |                 |                                               |                                                                    |
|                                                                            |                                      |                                  |                 |                                               |                                                                    |
|                                                                            |                                      |                                  |                 |                                               |                                                                    |
|                                                                            |                                      |                                  |                 |                                               |                                                                    |
|                                                                            |                                      |                                  |                 |                                               |                                                                    |

|                                                                                                                                     |           |     |
|-------------------------------------------------------------------------------------------------------------------------------------|-----------|-----|
| <b>b</b> Enter the short-term gain or (loss), if any, from Schedule D-1, line 1b                                                    | <b>1b</b> |     |
| <b>2</b> Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824                                                    | <b>2</b>  |     |
| <b>3</b> Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts                               | <b>3</b>  |     |
| <b>4</b> Short-term capital loss carryover Enter the amount, if any, from line 9 of the 2011 Capital Loss Carryover Worksheet       | <b>4</b>  | ( ) |
| <b>5</b> Net short-term gain or (loss). Combine lines 1a through 4 in column (f). Enter here and on line 13, column (3) on the back | <b>5</b>  |     |

**Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year**

| (a) Description of property<br>(Example 100 shares 7% preferred of "Z" Co) | (b) Date acquired<br>(mo., day, yr.) | (c) Date sold<br>(mo., day, yr.) | (d) Sales price | (e) Cost or other basis<br>(see instructions) | (f) Gain or (loss) for<br>the entire year<br>Subtract (e) from (d) |
|----------------------------------------------------------------------------|--------------------------------------|----------------------------------|-----------------|-----------------------------------------------|--------------------------------------------------------------------|
| <b>6a</b>                                                                  |                                      |                                  |                 |                                               |                                                                    |
|                                                                            |                                      |                                  |                 |                                               |                                                                    |
|                                                                            |                                      |                                  |                 |                                               |                                                                    |
|                                                                            |                                      |                                  |                 |                                               |                                                                    |
|                                                                            |                                      |                                  |                 |                                               |                                                                    |

|                                                                                                                                      |           |        |
|--------------------------------------------------------------------------------------------------------------------------------------|-----------|--------|
| <b>b</b> Enter the long-term gain or (loss), if any, from Schedule D-1, line 6b                                                      | <b>6b</b> | 8,490. |
| <b>7</b> Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824                                                | <b>7</b>  |        |
| <b>8</b> Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts                                 | <b>8</b>  |        |
| <b>9</b> Capital gain distributions                                                                                                  | <b>9</b>  |        |
| <b>10</b> Gain from Form 4797, Part I                                                                                                | <b>10</b> |        |
| <b>11</b> Long-term capital loss carryover Enter the amount, if any, from line 14 of the 2011 Capital Loss Carryover Worksheet       | <b>11</b> | ( )    |
| <b>12</b> Net long-term gain or (loss). Combine lines 6a through 11 in column (f) Enter here and on line 14a, column (3) on the back | <b>12</b> | 8,490. |

For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

Schedule D (Form 1041) 2012

| <b>Part III Summary of Parts I and II</b><br><i>Caution: Read the instructions before completing this part.</i> |                                                             | (1) Beneficiaries' (see instr.) | (2) Estate's or trust's | (3) Total |
|-----------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------|---------------------------------|-------------------------|-----------|
| <b>13</b>                                                                                                       | Net short-term gain or (loss)                               | <b>13</b>                       |                         |           |
| <b>14</b>                                                                                                       | Net long-term gain or (loss):                               |                                 |                         |           |
| a                                                                                                               | Total for year                                              | <b>14a</b>                      |                         | 8,490.    |
| b                                                                                                               | Unrecaptured section 1250 gain (see line 18 of the wrksht.) | <b>14b</b>                      |                         |           |
| c                                                                                                               | 28% rate gain                                               | <b>14c</b>                      |                         |           |
| <b>15</b>                                                                                                       | Total net gain or (loss). Combine lines 13 and 14           | <b>15</b>                       |                         | 8,490.    |

**Note:** If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4 (or Form 990-T, Part I, line 4a). If lines 14a and 15, column (2), are net gains, go to Part V, and do not complete Part IV. If line 15, column (3), is a net loss, complete Part IV and the Capital Loss Carryover Worksheet, as necessary.

| <b>Part IV Capital Loss Limitation</b> |                                                                                                                                                                       | <b>16</b> |
|----------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|
| <b>16</b>                              | Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, Part I, line 4c, if a trust), the smaller of:<br>a The loss on line 15, column (3) or b \$3,000 | ( )       |

**Note:** If the loss on line 15, column (3), is more than \$3,000, or if Form 1041, page 1, line 22 (or Form 990-T, line 34), is a loss, complete the Capital Loss Carryover Worksheet in the instructions to figure your capital loss carryover.

**Part V Tax Computation Using Maximum Capital Gains Rates**  
**Form 1041 filers.** Complete this part only if both lines 14a and 15 in column (2) are gains, or an amount is entered in Part I or Part II and there is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is more than zero.  
**Caution:** Skip this part and complete the Schedule D Tax Worksheet in the instructions if:  
 • Either line 14b, col. (2) or line 14c, col. (2) is more than zero, or  
 • Both Form 1041, line 2b(1), and Form 4952, line 4g are more than zero.

**Form 990-T trusts.** Complete this part only if both lines 14a and 15 are gains, or qualified dividends are included in income in Part I of Form 990-T, and Form 990-T, line 34, is more than zero. Skip this part and complete the Schedule D Tax Worksheet in the instructions if either line 14b, col. (2) or line 14c, col. (2) is more than zero.

|           |                                                                                                                                                                                                                                 |           |  |
|-----------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|--|
| <b>17</b> | Enter taxable income from Form 1041, line 22 (or Form 990-T, line 34)                                                                                                                                                           | <b>17</b> |  |
| <b>18</b> | Enter the smaller of line 14a or 15 in column (2) but not less than zero                                                                                                                                                        | <b>18</b> |  |
| <b>19</b> | Enter the estate's or trust's qualified dividends from Form 1041, line 2b(2) (or enter the qualified dividends included in income in Part I of Form 990-T)                                                                      | <b>19</b> |  |
| <b>20</b> | Add lines 18 and 19                                                                                                                                                                                                             | <b>20</b> |  |
| <b>21</b> | If the estate or trust is filing Form 4952, enter the amount from line 4g; otherwise, enter -0-                                                                                                                                 | <b>21</b> |  |
| <b>22</b> | Subtract line 21 from line 20. If zero or less, enter -0-                                                                                                                                                                       | <b>22</b> |  |
| <b>23</b> | Subtract line 22 from line 17. If zero or less, enter -0-                                                                                                                                                                       | <b>23</b> |  |
| <b>24</b> | Enter the smaller of the amount on line 17 or \$2,400                                                                                                                                                                           | <b>24</b> |  |
| <b>25</b> | Is the amount on line 23 equal to or more than the amount on line 24?<br><input type="checkbox"/> Yes. Skip lines 25 and 26; go to line 27 and check the "No" box<br><input type="checkbox"/> No. Enter the amount from line 23 | <b>25</b> |  |
| <b>26</b> | Subtract line 25 from line 24                                                                                                                                                                                                   | <b>26</b> |  |
| <b>27</b> | Are the amounts on lines 22 and 26 the same?<br><input type="checkbox"/> Yes. Skip lines 27 thru 30, go to line 31 <input type="checkbox"/> No. Enter the smaller of line 17 or line 22                                         | <b>27</b> |  |
| <b>28</b> | Enter the amount from line 26 (If line 26 is blank, enter -0-)                                                                                                                                                                  | <b>28</b> |  |
| <b>29</b> | Subtract line 28 from line 27                                                                                                                                                                                                   | <b>29</b> |  |
| <b>30</b> | Multiply line 29 by 15% (.15)                                                                                                                                                                                                   | <b>30</b> |  |
| <b>31</b> | Figure the tax on the amount on line 23. Use the 2012 Tax Rate Schedule for Estates and Trusts (see the Schedule G instructions in the instructions for Form 1041)                                                              | <b>31</b> |  |
| <b>32</b> | Add lines 30 and 31                                                                                                                                                                                                             | <b>32</b> |  |
| <b>33</b> | Figure the tax on the amount on line 17. Use the 2012 Tax Rate Schedule for Estates and Trusts (see the Schedule G instructions in the instructions for Form 1041)                                                              | <b>33</b> |  |
| <b>34</b> | Tax on all taxable income. Enter the smaller of line 32 or line 33 here and on Form 1041, Schedule G, line 1a (or Form 990-T, line 36)                                                                                          | <b>34</b> |  |



FORM 990PF, PART I - CONTRIBUTIONS, GIFTS AND GRANTS RECEIVED

ATTACHMENT 1

DIRECT  
PUBLIC  
SUPPORT

NAME AND ADDRESS

DATE

TRULAND SYSTEMS CORPORATION  
1900 ORACLE WAY, #700  
RESTON, VA 20190

546,186.

TOTAL CONTRIBUTION AMOUNTS

546,186.

ATTACHMENT 2

FORM 990PF, PART I - DIVIDENDS AND INTEREST FROM SECURITIES

| <u>DESCRIPTION</u>                     | <u>REVENUE<br/>AND<br/>EXPENSES<br/>PER BOOKS</u> | <u>NET<br/>INVESTMENT<br/>INCOME</u> |
|----------------------------------------|---------------------------------------------------|--------------------------------------|
| TAX EXEMPT INTEREST<br>DIVIDEND INCOME | 1,281.<br>658.                                    | 658.                                 |
| TOTAL                                  | <u>1,939.</u>                                     | <u>658.</u>                          |

ATTACHMENT 3

FORM 990PF, PART I - OTHER INCOME

| <u>DESCRIPTION</u> | <u>REVENUE<br/>AND<br/>EXPENSES<br/>PER BOOKS</u> |
|--------------------|---------------------------------------------------|
| GRANT REFUND       | 15,000.                                           |
| TOTALS             | <u>15,000.</u>                                    |

ATTACHMENT 4

FORM 990PF, PART I - ACCOUNTING FEES

| <u>DESCRIPTION</u> | <u>REVENUE AND EXPENSES PER BOOKS</u> | <u>NET INVESTMENT INCOME</u> | <u>ADJUSTED NET INCOME</u> | <u>CHARITABLE PURPOSES</u> |
|--------------------|---------------------------------------|------------------------------|----------------------------|----------------------------|
| ACCOUNTING FEES    | 2,500.                                | 500.                         |                            | 2,000.                     |
| TOTALS             | <u>2,500.</u>                         | <u>500.</u>                  |                            | <u>2,000.</u>              |

FORM 990PF, PART I - TAXES

| <u>DESCRIPTION</u>         | <u>REVENUE<br/>AND<br/>EXPENSES<br/>PER BOOKS</u> |
|----------------------------|---------------------------------------------------|
| FEDERAL EXCISE TAX/PENALTY | 441.                                              |
| TOTALS                     | <u>441.</u>                                       |

ATTACHMENT 6

FORM 990PF, PART I - OTHER EXPENSES

| DESCRIPTION                 | REVENUE<br>AND<br>EXPENSES<br>PER BOOKS | NET<br>INVESTMENT<br>INCOME | CHARITABLE<br>PURPOSES |
|-----------------------------|-----------------------------------------|-----------------------------|------------------------|
| BANK FEES                   | 11,112.                                 | 11,112.                     |                        |
| POSTAGE AND MAILING SERVICE | 16.                                     |                             | 16.                    |
| TOTALS                      | <u>11,128.</u>                          | <u>11,112.</u>              | <u>16.</u>             |

ATTACHMENT 7

FORM 990PF, PART II - CORPORATE STOCK

| <u>DESCRIPTION</u>       | <u>BEGINNING<br/>BOOK VALUE</u> | <u>ENDING<br/>BOOK VALUE</u> | <u>ENDING<br/>FMV</u> |
|--------------------------|---------------------------------|------------------------------|-----------------------|
| COLUMBIA LARGE CAP FUND  | 34,234.                         | 21,007.                      | 37,497.               |
| COLUMBIA MUNIC BOND FUND | 41,723.                         | 28,440.                      | 32,029.               |
| TOTALS                   | <u>75,957.</u>                  | <u>49,447.</u>               | <u>69,526.</u>        |

ATTACHMENT 8FORM 990PF, PART VII-B, LINE 5C-EXPENDITURE RESPONSIBILITY STATEMENT

GRANTEE'S NAME: THE LOST & FOUND HORSE RESCUE FOUNDATION  
GRANTEE'S ADDRESS: 1900 ORACLE WAY  
CITY, STATE & ZIP: RESTON, VA 20190  
GRANT DATE: VAR  
GRANT AMOUNT:  
GRANT PURPOSE: PREVENTION OF CRUELTY TO ANIMALS  
AMOUNT EXPENDED:  
ANY DIVERSION? NO  
DATES OF REPORTS: VARIOUS  
VERIFICATION DATE: 04/28/2013  
RESULTS OF VERIFICATION:  
SEE ATTACHED LETTER.

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

ATTACHMENT 9

| <u>NAME AND ADDRESS</u>                                             | <u>TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION</u> | <u>COMPENSATION</u> | <u>CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS</u> | <u>EXPENSE ACCT AND OTHER ALLOWANCES</u> |
|---------------------------------------------------------------------|-------------------------------------------------------------|---------------------|------------------------------------------------|------------------------------------------|
| ROBERT W. TRULAND<br>1900 ORACLE WAY, SUITE 700<br>RESTON, VA 20190 | PRESIDENT/DIRECTOR<br>1.00                                  | 0                   | 0                                              | 0                                        |
| MARY W. TRULAND<br>1900 ORACLE WAY, #700<br>RESTON, VA 20190        | DIRECTOR<br>2.00                                            | 0                   | 0                                              | 0                                        |
| INGRID MOINI<br>1900 ORACLE WAY, #700<br>RESTON, VA 20190           | SECRETARY<br>1.00                                           | 0                   | 0                                              | 0                                        |
| <u>GRAND TOTALS</u>                                                 |                                                             | <u>0</u>            | <u>0</u>                                       | <u>0</u>                                 |

FORM 990PF, PART XV - NAME, ADDRESS AND PHONE FOR APPLICATIONS

ROBERT W. TRULAND  
1900 ORACLE WAY, #700  
RESTON, VA 20190  
703-464-3000

FORM 990FE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

ATTACHMENT 11

| <u>RECIPIENT NAME AND ADDRESS</u>                  | <u>RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR<br/>AND<br/>FOUNDATION STATUS OF RECIPIENT</u> | <u>PURPOSE OF GRANT OR CONTRIBUTION</u> | <u>AMOUNT</u>   |
|----------------------------------------------------|-------------------------------------------------------------------------------------------|-----------------------------------------|-----------------|
| GRANTS - SCHEDULE ATTACHED                         | NONE<br>PUBLIC CHARITIES                                                                  | GENERAL OPERATING SUPPORT               | 284,417.        |
| LOST & FOUND HORSE RESCUE FOUNDATION<br>RESTON, VA | COMMON DIRECTORS<br>PRIVATE FOUNDATION                                                    | GENERAL OPERATING SUPPORT               | 230,000.        |
| <u>TOTAL CONTRIBUTIONS PAID</u>                    |                                                                                           |                                         | <u>514,417.</u> |

**Truland Foundation**  
**EIN 54-6037172**  
**FYE 3/31/13**  
**CONTRIBUTIONS**

| Name                                             | Address                                            | Amount                   |
|--------------------------------------------------|----------------------------------------------------|--------------------------|
| American Heart Association                       | 7272 Greenville Ave Dallas TX 75231                | 4,500.00                 |
| American Friends of Masterworks                  | P O Box 1929 Hamilton, HM HX Bermuda               | 5,000.00                 |
| The American Cancer Society                      | 124 Park St. SE Vienna, Va 22190                   | 6,000.00                 |
| Friends of the National WWII Memorial            | 700 13 St NW Suite 800 Washington DC 20005         | 25,000.00                |
| Center for Scholarship                           | P.O. Box 1465 Taylors SC 20687-0031                | 2,200.00                 |
| Inova Health System Foundation                   | 4094 Majestic Ln. Suite 250 Fairfax, Va 22033      | 45,000.00                |
| Soltura Foundation                               | P O Box 445 Gig Harbor WA 98335                    | 10,000.00                |
| Bermuda Maritime Museum                          | P.O BOX MA 133 Sandy's Pansh MABX Bermuda          | 20,000.00                |
| Friends of Cancer Research                       | 1800 M St NW Suite 1050 South Washington DC 20036  | 5,000.00                 |
| American Legion Post 206                         | P O Box 428 Chesapeake Beach, MD 20732             | 1,500.00                 |
| Cal Ripkin Sr Foundation                         | 1427 Clarkview Rd Suite 100 Baltimore MD 21209     | 5,000.00                 |
| Cystic Fibrosis Foundation                       | 6931 Arlington Rd Suite 200 Bethesda MD 20814      | 10,000.00                |
| Toys for Tots                                    | 18251 Quantico Gateway Dr Triangle, Va. 22172-1778 | 500.00                   |
| St Anselms Abbey School                          | 4501 South Dakota Ave NE Washington, DC 20017      | 110,000.00               |
| Calbert Babe Ruth                                | P O. Box 781 Huntingtown, MD 20639                 | 2,500.00                 |
| Gilbane Building Company Charity Golf Tournament | 7901 Sandy Spring Rd Suite 500 Laurel, MD 20707    | 7,000.00                 |
| Bridge 544                                       | 2096 Buford Dam Rd Buford, GA 30518                | 6,000.00                 |
| DC Action                                        | 1432 K St NW Suite 1050 Washington, DC 20005       | 2,500.00                 |
| Jubilee Gala                                     | 1640 Columbia Rd. NW Washington, DC 20009          | 7,500.00                 |
| Trust for National Mall                          | P.O Box 96475 Washington, DC 20090-6475            | 5,000.00                 |
| Jim Calhoun Challenge                            | P O Box 1177 Avon, CT 06001                        | 2,000.00                 |
| St Judes Childrens Hospital                      | 3262 Worthington St NW Washington, DC 20015        | 250.00                   |
| Kennedy's Disease Association                    | P O. Box 1105 Coarsegold, CA 93614-1105            | 500.00                   |
| Crossway Community                               | 3015 Upton Dr Kensington, MD 20895                 | 1,000.00                 |
| Chelonia Research                                | 402 South Central Avenue, Oviedo, FL 32765         | 466.69                   |
| <b>Total 6920 - Contributions - Other</b>        |                                                    | <u>284,416.69</u>        |
| <b>Lost and Found Horse Rescue</b>               | <b>1900 Oracle Way Suite 700 Reston, Va. 20190</b> | <u>230,000.00</u>        |
| <b>Total Contributions</b>                       |                                                    | <u><u>514,416.69</u></u> |

The Lost and Found Horse Rescue Foundation, Inc.  
1900 Oracle Way, Suite 700  
Reston, VA 20190

April 28, 2013

Robert W. Truland  
Truland Foundation, Inc.  
1900 Oracle Way, Suite 700  
Reston, Virginia 20190

Dear Mr. Truland:

We are grateful to the Truland Foundation for its grant to The Lost & Found Horse Rescue Foundation during the past year. As you know, the grant from the Truland Foundation was made to provide general operating support as we carry out our work in rescuing and caring for horses and placing them in adoptive homes. We would like to take this opportunity to report to you how your grant was used by us.

During the past year, your grant has been used solely in connection with our ongoing program, with the following results.

We have been able to either accept from horse donors or acquire from other sources many unwanted horses that, but for our intervention, would have met a cruel and inhumane end. With your support this past year, we have been able to place almost as many horses in adoptive homes. We have also been able to provide a caring home environment for all of the horses that, due to various disabilities, are not good candidates for adoption.

This level of assistance on behalf of unwanted horses, which represent an 2.17% increase over the prior year, is directly attributable to your support.

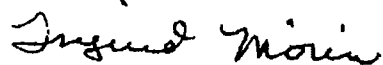
Your grant has enabled us to continue operations, to complete the fence and barn repairs, to hire a professional trainer, to build a riding rink and to clear a new field.

Attached are several letters that we received this past year from horse donors, to give you an indication of their appreciation of our efforts on behalf of unwanted horses.

As your schedule permits, we would be glad to discuss with you any aspect of our activities this past year and our expectations for the coming year.

We are honored to have your support in this endeavor, and we look forward to your continuing support.

Very truly yours,



Ingrid Moini  
Secretary

**FORM 990-PF - PART IV  
CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME**

| Kind of Property                       |                                 | Description                                                 |                    |                           |                              | P or D | Date acquired     | Date sold |
|----------------------------------------|---------------------------------|-------------------------------------------------------------|--------------------|---------------------------|------------------------------|--------|-------------------|-----------|
| Gross sale price less expenses of sale | Depreciation allowed/ allowable | Cost or other basis                                         | FMV as of 12/31/69 | Adj. basis as of 12/31/69 | Excess of FMV over adj basis |        | Gain or (loss)    |           |
| 35,000.                                |                                 | MERRILL LYNCH #4481<br>PROPERTY TYPE: SECURITIES<br>26,510. |                    |                           |                              | P      | VAR<br><br>8,490. | VAR       |
| TOTAL GAIN (LOSS) .....                |                                 |                                                             |                    |                           |                              |        | <u>8,490.</u>     |           |

Form **8868**

# Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

(Rev. January 2013)

Department of the Treasury  
Internal Revenue Service

▶ **File a separate application for each return.**

- If you are filing for an **Automatic 3-Month Extension**, complete only Part I and check this box  **X**
  - If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only Part II (on page 2 of this form).
- Do not complete Part II unless** you have already been granted an automatic 3-month extension on a previously filed Form 8868.

**Electronic filing (e-file).** You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit [www.irs.gov/efile](http://www.irs.gov/efile) and click on *e-file for Charities & Nonprofits*

### Part I 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

|                                                                                                       |                                                                                                                     |                                                              |
|-------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------|
| <b>Type or print</b><br><small>File by the due date for filing your return. See instructions.</small> | Name of exempt organization or other filer, see instructions<br><b>TRULAND FOUNDATION</b>                           | Employer identification number (EIN) or<br><b>54-6037172</b> |
|                                                                                                       | Number, street, and room or suite no. If a P.O. box, see instructions.<br><b>1900 ORACLE WAY, SUITE 700</b>         | Social security number (SSN)                                 |
|                                                                                                       | City, town or post office, state, and ZIP code. For a foreign address, see instructions.<br><b>RESTON, VA 20190</b> |                                                              |

Enter the Return code for the return that this application is for (file a separate application for each return) 0 4

| Application Is For                       | Return Code | Application Is For       | Return 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)      | 06          | Form 8870                | 12          |

- The books are in the care of ▶ THE FOUNDATION

Telephone No. ▶ 703 464-3000 FAX No ▶ \_\_\_\_\_

- 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.

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until 11/15, 2013, to file the exempt organization return for the organization named above. The extension is for the organization's return for:  
 ▶  calendar year 20\_\_\_\_ or  
 ▶  tax year beginning 04/01, 2012, and ending 03/31, 2013.

2 If the tax year entered in line 1 is for less than 12 months, check reason.  Initial return  Final return  
 Change in accounting period

|                                                                                                                                                                                      |           |    |   |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|----|---|
| 3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.                                  | <b>3a</b> | \$ | 0 |
| b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit | <b>3b</b> | \$ | 0 |
| c <b>Balance due.</b> Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.     | <b>3c</b> | \$ | 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.

For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

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