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Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation ▶ Do not enter Social Security numbers on this form as it may be made public. OMB No 1545-0052

Open to Public Inspection ▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

Department of the Treasury Internal Revenue Service For calendar year 2013 or tax year beginning 2013, and ending Name of foundation A Employer identification number CAPITALSOURCE CHARITABLE FOUNDATION 26-4312410 Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number (see instructions) 202-457-5260 5404 WISCONSIN AVENUE, 2ND FLOOR City or town, state or province, country, and ZIP or foreign postal code If exemption application is pending, check here CHEVY CHASE, MD 20815 G Check all that apply Initial return Initial return of a former public charity 1 Foreign organizations, check here Final return Amended return 2 Foreign organizations meeting the 85% test, check here and attach Address change Name change computation . . . H Check type of organization | x | Section 501(c)(3) exempt private foundation E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here . Cash X Accrual Fair market value of all assets at J Accounting method F If the foundation is in a 60-month termination Other (specify) end of year (from Part II, col (c), line under section 507(b)(1)(B), check here 4,564,058.00 (Part I, column (d) must be on cash basis) *16)* ▶ \$ (d) Disbursements Part I Analysis of Revenue and Expenses (The (a) Revenue and (b) Net investment (c) Adjusted net for charitable total of amounts in columns (b), (c), and (d) expenses per income income purposes may not necessarily equal the amounts in books (cash basis only) column (a) (see instructions)) Contributions, gifts, grants, etc., received (attach schedule). 1 2 attach Sch B 3 Interest on savings and temporary cash investments 209,988.00 209,988.00 Dividends and interest from securities **5a** Gross rents b Net rental income or (loss) -9,179.00Net gain or (loss) from sale of assets not on line 10 Gross sales pnce for all assets on line 6a -9,179.00 Capital gain net income (from Part IV, line 2) . 7 Net short-term capital gain Income modifications -Gross sales less returns and allowances · · · 10 a Less Cost of goods sold . c Gross profit or (loss) (attach schedule) -29,017.00-29,017.0011 Other income (attach schedule) 171,792.00 171,792.00 Total. Add lines 1 through 11 . 13 Compensation of officers, directors, trustees, etc Other employee salaries and wages 14 Expenses 15 Pension plans, employee benefits 16 a Legal fees (attach schedule) Accounting fees (attach schedule) S Administrative c Other professional fees (attach schedule) . . . Ó 2 5 1,500.00 1,500.00 18 Taxes (attach schedule) (see instructions) Depreciation (attach schedule) and depletion. 20 21 Travel, conferences, and meetings 22 Printing and publications 20,565.00 2,075.00 18,490.00 23 Other expenses (attach schedule) Operat 24 Total operating and administrative expenses. 22,065.00 2,075.00 19,990.00 Add lines 13 through 23 205,000.00 205,000.00 Contributions, gifts, grants paid 25 227,065.00 2,075.00 224,990.00 Total expenses and disbursements Add lines 24 and 25 Subtract line 26 from line 12 -55,273.00 a Excess of revenue over expenses and disbursements 169,717.00 b Net investment income (if negative, enter -0-)

c Adjusted net income (if negative, enter -0-). JSA For Paperwork Reduction Act Notice, see instructions. 3E1410 1 000

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Page 2

Dowt II	Attached schedules and amounts in the description column should be for end-of-year Attached schedules and amounts in the description column should be for end-of-year (a) Book Volumn (b) Book Volumn (b) Book Volumn (c) Bo				
Part II	amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value	
1	Cash - non-interest-bearing	1,023,583.00	2,220,261.00	2,220,261.00	
2	Savings and temporary cash investments				
3	Accounts receivable				
	Less allowance for doubtful accounts ▶				
	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)				
1'	Less. allowance for doubtful accounts				
<u>ي</u> 8	Inventories for sale or use				
Assets	Prepaid expenses and deferred charges			 	
V 40					
I I U a	Investments - U S and state government obligations (attach schedule).	525,685.00	1,431,717.00	1,431,717.00	
1	Investments - corporate stock (attach schedule)	323,003.00	1,431,717.00	1,431,717.00	
11 0	Investments - corporate bonds (attach schedule)				
			1		
	and equipment basis Less accumulated depreciation (attach schedule)				
12	Investments - mortgage loans	016 707 00	010 000 00	012 000 00	
13 14	Investments - other (attach schedule) Land, buildings, and equipment basis	816,787.00	912,080.00	912,080.00	
' '	equipment basis				
	equipment basis Less accumulated depreciation (attach schedule)				
15	Other assets (describe				
16	Total assets (to be completed by all filers - see the	0.066.055.00		. 564 050 00	
	Instructions Also, see page 1, item I)	2,366,055.00	4,564,058.00	4,564,058.00	
17	Accounts payable and accrued expenses				
18	Grants payable				
<u>မွ</u> 19	Deferred revenue				
20	Loans from officers, directors, trustees, and other disqualified persons				
19 20 21	Mortgages and other notes payable (attach schedule)				
22	Other liabilities (describe				
İ					
23	Total liabilities (add lines 17 through 22)				
ľ	Foundations that follow SFAS 117, check here . ▶				
န	and complete lines 24 through 26 and lines 30 and 31.				
일 24	Unrestricted				
<u>ह</u> 25	Temporarily restricted				
[26	Permanently restricted				
Net Assets or Fund Balance	Foundations that do not follow SFAS 117, ▶ 🔲				
ב	check here and complete lines 27 through 31.				
<u>v</u> 27	Capital stock, trust principal, or current funds	2,366,055.00	4,564,058.00		
28	Paid-in or capital surplus, or land, bldg , and equipment fund				
% 29	Retained earnings, accumulated income, endowment, or other funds $\ \ . \ \ .$				
<u>할</u> 30	Total net assets or fund balances (see instructions)	2,366,055.00	4,564,058.00		
~ 31	Total liabilities and net assets/fund balances (see				
	ınstructions)				
	Analysis of Changes in Net Assets or Fund				
	al net assets or fund balances at beginning of year - Part				
	-of-year figure reported on prior year's return)		1	2,366,055.00	
2 Ent	er amount from Part I, line 27a		2	-55,273.00	
3 Oth	er amount from Part I, line 27a er increases not included in line 2 (itemize) ►SEE_STAT	EMENT 2	3	2,253,276.00	
	l lines 1, 2, and 3			4,564,058.00	
5 Dec			_		
6 Tot	creases not included in line 2 (itemize) >al net assets or fund balances at end of year (line 4 minus	s line 5) - Part II, column (b), line 30 6	4,564,058.00	
				Form 990-PF (2013)	

(a) List and	and Losses for Tax on Invel describe the kind(s) of property sold (e ick warehouse, or common stock, 200 s	g , real estate,	(b) How acquired P - Purchase	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a PASS THROUGH LONG			D - Donation	VARIOUS	VARIOUS
b	- TERM CAFITAL BOSS			VARIOUS	VARCEOUS
C					
d					
е					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) mini	ıs (g)
a 0.00	0.00	0.00			-9,179.00
b					
С					
d					
е					
Complete only for assets :	showing gain in column (h) and owned			Gains (Col (h) g	
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	COI	(k), but not less t Losses (from co	ol (h))
a					<u>-9,179.00</u>
b					 -
С					
d					
<u>e</u>			ļ	_	
2 Capital gain net income or		gain, also enter in Part I, line 7 (loss), enter -0- in Part I, line 7	2		-9,179.00
If gain, also enter in Par Part I, line 8	or (loss) as defined in sections 12 t I, line 8, column (c) (see instr Jnder Section 4940(e) for Rec	ructions) If (loss), enter -0- in	3 ncome		
	the section 4942 tax on the distrib		ase period	qs [Yes No
	ount in each column for each year,		any entri	ies	
(a) Base period years	(b)	(c)		(d) Distribution r	atio
Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of nonchantable-use assets		(col (b) divided by	y col (c))
2012	84,488.00	2,373,250.00			0.0356
2011	95,240.00	2,052,906.00			0.0464
2010	65,281.00	1,859,314.00			0.0351
2009	64,956.00	2,555,894.00			0.0254
2008	······································		 		
2. Tatal of line 1. column (d)			2		0 1425
2 Total of line 1, column (d) 2 Average distribution ratio	for the 5-year base period - divide	the total on line 2 by 5, or by the	-		0.1425
	dation has been in existence if less		3		0.0356
4 Enter the net value of non	charitable-use assets for 2013 fro	m Part X, line 5	4	3,4	52,005.00
			5	1	22,891.00
	nt income (1% of Part I, line 27b)		6		1,697.00
7 Add lines 5 and 6			7	1	24,588.00
8 Enter qualifying distribution If line 8 is equal to or gree Part VI instructions	ons from Part XII, line 4	n Part VI, line 1b, and complete	8 that part	using a 1% ta	24,990.00 x rate See the
JSA 3E1430 1 000	·			For	m 990-PF (2013

Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? If "Yes," complete

Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses.....

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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

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 2013? 4b X
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Χ

	990-PF (2013) t VII-B Statements Regarding Activities fo	or Which Form 4	720 May Re Regu	ired (continued)		Page 6
	During the year did the foundation pay or incur any amou		720 May De Negu	irea (continuea)		
5 _, a	(1) Carry on propaganda, or otherwise attempt to influer		4945(6)\?	Yes X No	,	
	(2) Influence the outcome of any specific public ele	•				
	directly or indirectly, any voter registration drive?	•	•			
	(3) Provide a grant to an individual for travel, study, or other			·		İ
	(4) Provide a grant to an organization other than a				´	
	section 509(a)(1), (2), or (3), or section 4940(d)(2)? (s	•			,	
	(5) Provide for any purpose other than religious, ch				'	
	purposes, or for the prevention of cruelty to children of		-			
	If any answer is "Yes" to 5a(1)-(5), did any of the				· i i	
U	Regulations section 53 4945 or in a current notice regard				' 5b	
	· ·	*	•		~~\ ~~	
_	Organizations relying on a current notice regarding disast if the answer is "Yes" to question 5a(4), does the				니니	
C	• • • • • • • • • • • • • • • • • • • •		•			
	because it maintained expenditure responsibility for the gi			. Yes No	'	
۰.	If "Yes," attach the statement required by Regulations section	• /	-41 4			
ъa	Did the foundation, during the year, receive any func	•				
	on a personal benefit contract?					V
. 0	Did the foundation, during the year, pay premiums, direct	city or indirectly, on a	personal benefit contrac	ж	6b	X
- -	If "Yes" to 6b, file Form 8870		-h-li	Yes X No		
	At any time during the tax year, was the foundation a pa	•	•	•		
	If "Yes," did the foundation receive any proceeds or have t VIII Information About Officers, Directors and Contractors				oyees,	
1	List all officers, directors, trustees, foundation n	nanagers and thei	r compensation (see	instructions).		
1		nanagers and thei (b) Title, and average hours per week devoted to position	r compensation (see (c) Compensation (If not paid, enter -0-)	instructions). (d) Contributions to employee benefit plans and deferred compensation	(e) Expense other allo	
1 ED N	List all officers, directors, trustees, foundation n	(b) Title, and average hours per week	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans		
	List all officers, directors, trustees, foundation n (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		
2 WI	List all officers, directors, trustees, foundation n (a) Name and address ORDBERG	(b) Title, and average hours per week devoted to position PRESIDENT/DIRECT	(c) Compensation (if not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation		wances
2 WI	List all officers, directors, trustees, foundation of (a) Name and address ORDBERG SCONSIN CIR, CHEVY CHASE, MD 20815	(b) Title, and average hours per week devoted to position PRESIDENT/DIREC	(c) Compensation (if not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation		wances
2 WI DAVI	List all officers, directors, trustees, foundation of (a) Name and address ORDBERG SCONSIN CIR, CHEVY CHASE, MD 20815 D MARTIN	(b) Title, and average hours per week devoted to position PRESIDENT/DIRECTORY . 5 HRS EXCECUTIVE VP/I	(c) Compensation (if not paid, enter -0-) TOR 0.00 DIRECTOR	(d) Contributions to employee benefit plans and deferred compensation		0.00
2 WI DAVI 1717 JOHN	List all officers, directors, trustees, foundation of (a) Name and address ORDBERG SCONSIN CIR, CHEVY CHASE, MD 20815 D MARTIN K ST NW, WASHINGTON, DC 20036	(b) Title, and average hours per week devoted to position PRESIDENT/DIRECTORY .5 HRS EXCECUTIVE VP/CTORY 1.5 HRS	(c) Compensation (if not paid, enter -0-) TOR 0.00 DIRECTOR	(d) Contributions to employee benefit plans and deferred compensation		0.00
2 WI DAVI 1717 JOHN 4445	List all officers, directors, trustees, foundation of (a) Name and address ORDBERG SCONSIN CIR, CHEVY CHASE, MD 20815 D MARTIN K ST NW, WASHINGTON, DC 20036 DELANEY	(b) Title, and average hours per week devoted to position PRESIDENT/DIRECTOR 5 HRS EXCECUTIVE VP/CTOR 1.5 HRS DIRECTOR	(c) Compensation (If not paid, enter -0-) TOR 0.00 DIRECTOR 18,000.00	(d) Contributions to employee benefit plans and deferred compensation 0.00		0.00 0.00
2 WI DAVI 1717 JOHN 4445 APR	List all officers, directors, trustees, foundation of (a) Name and address ORDBERG SCONSIN CIR, CHEVY CHASE, MD 20815 D MARTIN K ST NW, WASHINGTON, DC 20036 DELANEY WILLARD AVE 11TH FL CHEVY CHASE MD 20815	(b) Title, and average hours per week devoted to position PRESIDENT/DIRECTOR .5 HRS EXCECUTIVE VP/CTOR 1.5 HRS DIRECTOR .5	(c) Compensation (If not paid, enter -0-) TOR 0.00 DIRECTOR 18,000.00	(d) Contributions to employee benefit plans and deferred compensation 0.00		0.00 0.00
2 WI DAVI 1717 JOHN 4445 APR	List all officers, directors, trustees, foundation of (a) Name and address ORDBERG SCONSIN CIR, CHEVY CHASE, MD 20815 D MARTIN K ST NW, WASHINGTON, DC 20036 DELANEY WILLARD AVE 11TH FL CHEVY CHASE MD 20815 IL DELANEY	(b) Title, and average hours per week devoted to position PRESIDENT/DIRECTOR .5 HRS EXCECUTIVE VP/II 1.5 HRS DIRECTOR .5 DIRECTOR .5	(c) Compensation (if not paid, enter -0-) TOR 0.00 DIRECTOR 18,000.00 0.00	(d) Contributions to employee benefit plans and deferred compensation 0.00 0.00 0.00	other allo	0.00 0.00 0.00
2 WI DAVI 1717 JOHN 4445 APR 4445	Compensation of five highest-paid employees	(b) Title, and average hours per week devoted to position PRESIDENT/DIRECTOR .5 HRS EXCECUTIVE VP/II 1.5 HRS DIRECTOR .5 DIRECTOR .5	(c) Compensation (if not paid, enter -0-) TOR 0.00 DIRECTOR 18,000.00 0.00 0.00 se included on line	(d) Contributions to employee benefit plans and deferred compensation 0.00 0.00 0.00	other allo	0.00 0.00 0.00 0.00 ne, enter
2 WI DAVI 1717 JOHN 4445 APR 4445	Compensation of five highest-paid employees "NONE."	(b) Title, and average hours per week devoted to position PRESIDENT/DIRECT .5 HRS EXCECUTIVE VP/CT 1.5 HRS DIRECTOR .5 DIRECTOR .5 (other than those hours per week	(c) Compensation (If not paid, enter -0-) TOR 0.00 DIRECTOR 18,000.00 0.00 ce included on line	(d) Contributions to employee benefit plans and deferred compensation 0.00 0.00 0.00 1 - see instruction (d) Contributions to employee benefit plans and deferred	ons). If no	0.00 0.00 0.00 0.00 ne, enter
2 WI DAVI 1717 JOHN 4445 APR 4445 2	Compensation of five highest-paid employees "NONE."	(b) Title, and average hours per week devoted to position PRESIDENT/DIRECT .5 HRS EXCECUTIVE VP/CT 1.5 HRS DIRECTOR .5 DIRECTOR .5 (other than those hours per week	(c) Compensation (If not paid, enter -0-) TOR 0.00 DIRECTOR 18,000.00 0.00 ce included on line	(d) Contributions to employee benefit plans and deferred compensation 0.00 0.00 0.00 1 - see instruction (d) Contributions to employee benefit plans and deferred	ons). If no	0.00 0.00 0.00 0.00 ne, enter
2 WI DAVI 1717 JOHN 4445 APR 4445 2	Compensation of five highest-paid employees "NONE."	(b) Title, and average hours per week devoted to position PRESIDENT/DIRECT .5 HRS EXCECUTIVE VP/CT 1.5 HRS DIRECTOR .5 DIRECTOR .5 (other than those hours per week	(c) Compensation (If not paid, enter -0-) TOR 0.00 DIRECTOR 18,000.00 0.00 ce included on line	(d) Contributions to employee benefit plans and deferred compensation 0.00 0.00 0.00 1 - see instruction (d) Contributions to employee benefit plans and deferred	ons). If no	0.00 0.00 0.00 0.00 ne, enter
2 WI DAVI 1717 JOHN 4445 APR 4445 2	Compensation of five highest-paid employees "NONE."	(b) Title, and average hours per week devoted to position PRESIDENT/DIRECT .5 HRS EXCECUTIVE VP/CT 1.5 HRS DIRECTOR .5 DIRECTOR .5 (other than those hours per week	(c) Compensation (If not paid, enter -0-) TOR 0.00 DIRECTOR 18,000.00 0.00 ce included on line	(d) Contributions to employee benefit plans and deferred compensation 0.00 0.00 0.00 1 - see instruction (d) Contributions to employee benefit plans and deferred	ons). If no	0.00 0.00 0.00 0.00 ne, enter

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

(a) Name and address of each person pad more than \$50,000 (b) Type of senoce (c) Compensation NONE Cotal number of others receiving over \$50,000 for professional services Cotal number of others receiving over \$50,000 for professional services Eart 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 programinations and other beneficians served, conferences convened, research papers produced, etc. 1 NONE 2 2 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 fires 1 and 2 All other program-related investments See instructions 3 All other program-related investments See instructions 3 All other program-related investments See instructions	3 Five highest-paid independent contractors for professional services (see in	structions). If none, enter "NONE	."
Total number of others receiving over \$50,000 for professional services. Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year include relevant statistical information such as the number of organizations and other beneficianes served, conferences convened, research papers produced, etc. 1 NONE 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 Amount NONE 2 All other program-related investments See instructions 3 All other program-related investments See instructions			(c) Compensation
total number of others receiving over \$50,000 for professional services. 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 beneficianes served, conferences convened, research papers produced, etc 1 NONE 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 times 1 and 2 Amount NONE 2 All other program-related investments See instructions 3 All other program-related investments See instructions			
Expenses 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 beneficianes served, conferences convened, research papers produced, etc. 1 NONE 2			
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Expenses 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 beneficianes served, conferences convened, research papers produced, etc. 1 NONE			
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Expenses 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 beneficianes served, conferences convened, research papers produced, etc. 1 NONE			
Part IX-B Summary of Program-Related Investments (see instructions) Part IX-B Summary of Program-related investments made by the foundation during the tax year on lines 1 and 2 All other program-related investments See instructions			
Expenses 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 beneficianes served, conferences convened, research papers produced, etc. 1 NONE			
Expenses 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 beneficianes served, conferences convened, research papers produced, etc. 1 NONE			
Expenses 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 beneficianes served, conferences convened, research papers produced, etc. 1 NONE			
Part IX-B Summary of Program-Related Investments (see instructions) Part IX-B Summary of Program-related investments made by the foundation during the tax year on lines 1 and 2 All other program-related investments See instructions	otal number of others receiving over \$50,000 for professional services	_	4.*
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 beneficianes served, conferences convened, research papers produced, etc. 1 NONE 2			
organizations and other beneficianes served, conferences convened, research papers produced, etc 1 NONE 2	Part IX-A Summary of Direct Charitable Activities		
organizations and other beneficianes served, conferences convened, research papers produced, etc 1 NONE 2	List the foundation's four largest direct charitable activities during the tax year. Include relevant statistic	ical information such as the number of	Evanças
2	organizations and other beneficianes served, conferences convened, research papers produced, etc		Expenses
3	1 NONE		
3			
3			
3	2		
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 Amount All other program-related investments See instructions 3			
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 Amount All other program-related investments See instructions 3			
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 Amount 2 All other program-related investments See instructions 3	3		
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 Amount 2 All other program-related investments See instructions 3			
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 Amount 2 All other program-related investments See instructions 3			
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 1 NONE	4		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 1 NONE			
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 1 NONE			
1 NONE 2	Part IX-B Summary of Program-Related Investments (see instructions)		
2	Describe the two largest program-related investments made by the foundation during the tax year on lines	1 and 2	Amount
All other program-related investments See instructions 3	1 NONE		
All other program-related investments See instructions 3			l
All other program-related investments See instructions 3			
3	2		
3			
3			
	All other program-related investments See instructions		
	3		
Total. Add lines 1 through 3			

Part	Minimum Investment Return (All domestic foundations must complete this part see instructions.)	Foreign founda	tions,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable,	etc,	
	purposes		
а	Average monthly fair market value of securities	1a	978,701.00
b	o Average of monthly cash balances	1b	1,661,439.00
C		1c	864,434.00
d		1d	3,504,574.00
е			
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	3,504,574.00
4	Subtract line 2 from line 1d Cash deemed held for charitable activities Enter 1 1/2 % of line 3 (for greater amount, s	see	
	instructions)	4	52,569.00
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line		3,452,005.00
6	Minimum investment return. Enter 5% of line 5	6	172,600.00
Par	Tt XI Distributable Amount (see instructions) (Section 4942(J)(3) and (J)(5) private operation and certain foreign organizations check here ▶ ☐ and do not complete this part)	g foundations	
1	Minimum investment return from Part X, line 6	1	172,600.00
2 a	Tax on investment income for 2013 from Part VI, line 5 2a 1, 691	7.00	
b	Income tax for 2013 (This does not include the tax from Part VI) 2b		
С		2c	1,697.00
3	Distributable amount before adjustments Subtract line 2c from line 1	3	170,903.00
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4		170,903.00
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1	7	170,903.00
Par	rt XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а		1a	224,990.00
b	Program-related investments - total from Part IX-B	1b	
2	Program-related investments - total from Part IX-B Amounts paid to acquire assets used (or held for use) directly in carrying out charitable,	etc ,	
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а		3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	224,990.00
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment in	come	
	Enter 1% of Part I, line 27b (see instructions)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	224,990.00
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years w qualifies for the section 4940(e) reduction of tax in those years	hen calculating	whether the foundation

Ρá	rt XIII Undistributed Income (see instru	ıctions)			
1	Distributable amount for 2013 from Part XI,	(a) Corpus	(b) Years prior to 2012	(c) 2012	(d) 2013
•	line 7				170,903.00
2	Undistributed income. If any, as of the end of 2013				170,303.00
	Enter amount for 2012 only			82,899.00	
	Total for pnor years 20,20,20			02,033.00	····
о 3	Excess distributions carryover, if any, to 2013				
	; · · · · · · · · · · · · · · · · · · ·				
	From 2008				
	From 2009				
	From 2010				
	From 2011				
	From 2012				
	Total of lines 3a through e				
4	Qualifying distributions for 2013 from Part XII,				
	line 4 ▶ \$ 224,990.00			00 000 00	
	Applied to 2012, but not more than line 2a			82,899.00	
b	Applied to undistributed income of prior years (Election required - see instructions)				
С	Treated as distributions out of corpus (Election required - see instructions)				
d	Applied to 2013 distributable amount				142,091.00
	Remaining amount distributed out of corpus				
5					
6	(If an amount appears in column (d), the same amount must be shown in column (a)) Enter the net total of each column as indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5				·
b	Prior years' undistributed income Subtract				
	line 4b from line 2b				
С	Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
d	Subtract line 6c from line 6b Taxable				
_	amount - see instructions Undistributed income for 2012 Subtract line				
·	4a from line 2a. Taxable amount - see				
f	Undistributed income for 2013 Subtract lines				
	4d and 5 from line 1. This amount must be distributed in 2014				28,812.00
7	Amounts treated as distributions out of corpus to satisfy requirements imposed by section	. 			
	170(b)(1)(F) or 4942(g)(3) (see instructions)		7.37 17.		
8	Excess distributions carryover from 2008 not applied on line 5 or line 7 (see instructions)	11-72			
9	Excess distributions carryover to 2014.				
	Subtract lines 7 and 8 from line 6a				
	Analysis of line 9				
	Excess from 2009				
	Excess from 2010				
	Excess from 2011				
	Excess from 2012				
е	Excess from 2013		,		

1 a	If the foundation has				ating	
	foundation, and the ruling	•			•	
b	Check box to indicate wh		private operating found		4942(j)	(3) or 4942(J)(5)
2 a	Enter the lesser of the ad-	Tax year		Prior 3 years		(e) Total
	justed net income from Part	(a) 2013	(b) 2012	(c) 2011	(d) 2010	
	I or the minimum investment return from Part X for each					
	year listed					
b	85% of line 2a	· · · · · · · · · · · · · · · · ·				
C	Qualifying distributions from Part					
	XII, line 4 for each year listed					
a	Amounts included in line 2c not used directly for active conduct					
	of exempt activities					
е	Qualifying distributions made directly for active conduct of					
	exempt activities Subtract line					
3	2d from line 2c Complete 3a, b, or c for the					
•	alternative test relied upon					
а	"Assets" alternative test - enter					
	(1) Value of all assets (2) Value of assets qualifying					
	under section					
b	4942(j)(3)(B)(i) "Endowment" alternative test-					
_	enter 2/3 of minimum invest-					
	ment return shown in Part X,					
С	"Support" alternative test - enter					
	(1) Total support other than					
	gross investment income (interest, dividends, rents,					
	payments on secunties					
	loans (section 512(a)(5)), or royalties)					
	(2) Support from general public and 5 or more					
	exempt organizations as					
	provided in section 4942 (j)(3)(B)(iii)				· · · · · · · · · · · · · · · · · ·	
	(3) Largest amount of sup- port from an exempt					
	organization					
-	(4) Gross investment income	<u> </u>	0 1-4 - 41-1	1 le 15 4b - 5	1-4:	
Рa		ntary information (e during the year - s		t only if the found	dation had \$5,000	or more in assets
1	Information Regardin		 	•		
	List any managers of			re than 2% of the tota	al contributions receiv	ed by the foundation
	before the close of any	tax year (but only if th	ney have contributed	more than \$5,000) (S	ee section 507(d)(2))	•
NO	NE					
b	List any managers of					large portion of the
	ownership of a partner	rship or other entity) of	f which the foundation	n has a 10% or greater	rınterest	
NO						
2	Information Regardin	-	•	• • •		
	Check here ► X if t	he foundation only	makes contributions	to preselected char	itable organizations a	nd does not accept
				ants, etc (see instruc	tions) to individuals of	r organizations under
	other conditions, comp			4b		
а	The name, address, a	na telephone number	or e-mail address or	the person to whom ap	oplications should be add	ressea
	The form in which app	lications should be sui	bmitted and informati	on and materials they	should include	
-	ar armon app			and materials arey		
c	Any submission deadle	ines				
	A				hi- 7-12- 7	
d	Any restrictions or li factors	mitations on awards	, sucn as by geogr	apnicai areas, charita	idle fleids, kinds of i	nstitutions, or other

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

Form 990-PF (2013) Page 11 Supplementary Information (continued) Part XV Grants and Contributions Paid During the Year or Approved for Future Payment if recipient is an individual show any relationship to any foundation manager or substantial contributor Foundation Purpose of grant or contribution Amount status of Name and address (home or business) recipient a Paid during the year UNRESTRICTED GEN OPR 50,000.00 PUB CHAR TEACH FOR AMERICA 50,000.00 PUB CHAR UNRESTRICTED GEN OPR CATHOLIC CHARITIES UNRESTRICTED GEN OPR 25,000.00 JF KENNEDY CENTER FOR PERORMING ARTS PUB CHAR 25,000.00 PUB CHAR UNRESTRICTED GEN OPR COMMON SENSE MEDIA 10,000.00 EL HAYNES PUBLIC CHARTER SCHOOL UNRESTRICTED GEN OPR PUB CHAR PUB CHAR UNRESTRICTED GEN OPR 10,000.00 AFTER DARK @ THE ARC PUB CHAR UNRESTRICTED GEN OPR 10,000.00 MIRIAMS KITCHEN NATIONAL MARITIME HERITAGE FOUNDATION PUB CHAR UNRESTRICTED GEN OPR 10,000.00 PUB CHAR UNRESTRICTED GEN OPR 5,000.00 LIFE WITH CANCER PUB CHAR UNRESTRICTED GEN OPR 5,000.00 **MEDSTAR** UNRESTRICTED GEN OPR 5,000.00 DOORWAYS FOR WOMEN AND FAMILIES PUB CHAR

Total	 	 3a 205,000.00
b Approved for future payment		

▶ 3b

Total

ter gross amounts unless otherwise indicated (b) (b) (c) (d) (d) (d) (d) (d) (d) (d) (d) (d) (d	Part XVÍ-	A Analysis of Income-Produ	icing Activ	vities			
Program service revenue Amount Exclusion code Amount See instructions	•		Unrela	ated business income	Excluded b	y section 512, 513, or 514	
a b c c d d d d d d d d d d d d d d d d d	-			1			function income
b c d d e fee and contracts from government agencies Membership dues and assessments	_						(000 11011 001101)
g Fees and contracts from government agencies Membership dues and assessments Interest on sawings and temporary cash investments Dividends and interest from securities Net rental income or (loss) from real estate a Debt-financed property b Not debt-financed property Chter investment income Gain or (loss) from sales of assets other than inventory 18 -9,179.00 Net rental income or (loss) from securities 14 209,988.00 Net rental income or (loss) from real estate a Debt-financed property bt rental income or (loss) from personal property Chter investment income Gain or (loss) from sales of assets other than inventory 18 -9,179.00 Net income or (loss) from sales of inventory Chter revenue a P/THROUGH LOSS b c d e Subtotal Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to accomplishment of the foundation's exempt purposes (See instructions							
d e f f g Fees and contracts from government agencies Membership dues and assessments Interest on savings and temporary cash investments Dividends and interest from securities 14 209, 988.00 Net rental income or (loss) from real estate a Debt-financed property b Not debt-financed property b Not debt-financed property b Not rental income or (loss) from personal property 18 -9,179.00 Net income or (loss) from sales of assets other than inventory 18 -9,179.00 Net income or (loss) from sales of inventory 14 -29,017.00 Net income or (loss) from sales of inventory 14 -29,017.00 Net income or (loss) from sales of inventory 15 -29,017.00 Net income or (loss) from sales of inventory 15 -29,017.00 Net income or (loss) from sales of inventory 15 -29,017.00 Net income or (loss) from sales of inventory 15 -29,017.00 Net income or (loss) from sales of inventory 15 -29,017.00 Net income or (loss) from sales of inventory 18 -29,017.00 Net income and inventory 19 -29,017.00 Net income and inventory .							
g Fees and contracts from government agencies Membership dues and assessments Interest on savings and temporary cash investments Dividends and interest from securities Net rental income or (loss) from real estate a Debt-financed property b Not debt-financed property Chter investment income Gain or (loss) from sales of assets other than inventory Net income or (loss) from special events Gross profit or (loss) from sales of inventory Other revenue a P/THROUGH LOSS b c d e Subtotal Add columns (b), (d), and (e) Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See instructions							
g Fees and contracts from government agencies Membership dues and assessments Interest on savings and temporary cash investments Dividends and interest from securities Net rental income or (loss) from real estate a Debt-financed property b Not debt-financed property Cither investment income Gain or (loss) from seles of assets other than inventory Net income or (loss) from special events Gross profit or (loss) from special events Gross profit or (loss) from sales of inventory. Other revenue a P/THROUGH LOSS b c d d e Subtotal Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) Total Add line 13 instructions to verify calculations) Relationship of Activities to the Accomplishment of Exempt Purposes ine No. Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See instructions	е						
Membership dues and assessments Interest on savings and temporary cash investments Dividends and interest from securities Net rental income or (loss) from real estate a Debt-financed property b Not debt-financed property Cother investment income Gain or (loss) from sales of assets other than inventory Net income or (loss) from sales of inventory Other investment income Garos profit or (loss) from sales of inventory Other revenue a P/THROUGH LOSS Description of (loss) from sales of inventory Other revenue a P/THROUGH LOSS Description of (loss) from sales of inventory Other revenue a P/THROUGH LOSS Description of (loss) from sales of inventory Other revenue a P/THROUGH LOSS Description of (loss) from sales of inventory Other revenue a P/THROUGH LOSS Description of (loss) from sales of inventory Other revenue a P/THROUGH LOSS Description of (loss) from sales of inventory Other revenue a P/THROUGH LOSS Description of (loss) from sales of inventory Other revenue a P/THROUGH LOSS Description of (loss) from sales of inventory Other revenue a P/THROUGH LOSS Description of (loss) from sales of inventory Other revenue a P/THROUGH LOSS Description of (loss) from sales of inventory Other revenue a P/THROUGH LOSS Description of (loss) from sales of inventory Other revenue a P/THROUGH LOSS Description of (loss) from sales of inventory Other revenue a P/THROUGH LOSS Description of (loss) from sales of inventory Other revenue a P/THROUGH LOSS Description of (loss) from sales of inventory Other revenue a P/THROUGH LOSS Description of (loss) from sales of inventory Other revenue a P/THROUGH LOSS Description of (loss) from sales of inventory Other revenue a P/THROUGH LOSS Description of (loss) from sales of inventory Other revenue a P/THROUGH LOSS Description of loss of sales of sa	f						- ···
Interest on savings and temporary cash investments Dividends and interest from securities	•	•			<u> </u>		
Dividends and interest from securities							
Net rental income or (loss) from real estate a Debt-financed property b Not debt-financed property Cother investment income Gain or (loss) from sales of assets other than inventory Net income or (loss) from sales of assets other than inventory Net income or (loss) from sales of assets other than inventory Net income or (loss) from sales of assets other than inventory Net income or (loss) from sales of assets other than inventory Net income or (loss) from sales of assets other than inventory Net income or (loss) from sales of assets other than inventory Net income or (loss) from sales of assets other than inventory Net income or (loss) from sales of assets other than inventory 18					1.4	200 000 00	
a Debt-financed property					14	209,988.00	
b Not debt-financed property							1
Net rental income or (loss) from personal property . Other investment income							
Other investment income Gain or (loss) from sales of assets other than inventory Net income or (loss) from special events Gross profit or (loss) from sales of inventory Other revenue a P/THROUGH LOSS b c d e Subtotal Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) the worksheet in line 13 instructions to verify calculations) art XVI-3 Relationship of Activities to the Accomplishment of Exempt Purposes ine No. Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See instructions			1				
Gain or (loss) from sales of assets other than inventory Net income or (loss) from special events Gross profit or (loss) from sales of inventory. Other revenue a P/THROUGH LOSS b C Subtotal Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) Every worksheet in line 13 instructions to verify calculations) art XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See instructions			i .		- 		
Net income or (loss) from special events		•	1		18	-9,179.00	
Gross profit or (loss) from sales of inventory. Other revenue a P/THROUGH LOSS b c d e Subtotal Add columns (b), (d), and (e)	•	·				,	
Other revenue a P/THROUGH LOSS b c d e Subtotal Add columns (b), (d), and (e)							-
b c d d line 12, columns (b), (d), and (e)					14	-29,017.00	
c d							
Subtotal Add columns (b), (d), and (e)							
Subtotal Add columns (b), (d), and (e)	d						
Total. Add line 12, columns (b), (d), and (e)	e						
re worksheet in line 13 instructions to verify calculations) art XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes ine No. Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See instructions				l			
accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See instructions						·-	utad importantly to
N/A		1	-				
		N/A					
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Part >	(VII	Information Re Exempt Organ		nsfers To and Tran	sactions and	Relationships	With None	chari	table	9
ın	section	organization direct	y or indirectly	engage in any of the fol section 501(c)(3) organi					Yes	No
	_		g foundation to	a noncharitable exempt	organization of					
								1a(1)		X
					• • • • • • • • •			1a(2)		X
		ansactions	nobaritable aver	nnt organization				1b(1)		X
				npt organization ble exempt organization .				1b(1)		X
				assets				1b(3)		Х
								1b(4)		Х
(5	i) Loai	ns or loan guarantee	es					1b(5)		X
(6) Perf	ormance of service	s or membersh	ıp or fundraising solicitati	ons			1b(6)		X
				ts, other assets, or paid e				<u>1c</u>	<u></u>	X
				s," complete the follow ces given by the reporti						
				es given by the reporti ement, show in column						
(a) Line	 -T	(b) Amount involved		oncharitable exempt organization		ription of transfers, tran				
(4) 2			(5)		(.,	<u> </u>	·			
								_		
		· · · ·								
	-									
-								-		
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						Jan 1997				
		=1				_				
										
d	escrib	-	of the Code (o	filiated with, or related ther than section 501(c)(527?			es [>	√ No
		(a) Name of organizatio	n	(b) Type of organiz	ation	(c) Des	cription of relation	ship		
										
								-		
-								_		
	Under	penalties of penury, I decl	are that I have exami	ned this return including accompa	anying schedules and	statements, and to the b	est of my knowled	ge and	belief, i	t is true
Sign	Coneci	, and complete, 1997	t preparer (other man)				May the IR			
Here				ا) در ارر		CTOR	with the p			
11010	Sign	ature of officer or trustee		Date	Title		(see instruction	ns)?	Yes	No.
		Print/Type preparer's na		Preparer's signature		Date		PTIN		
Paid		ramo rype preparers na	an C	riepatei s signature		Date	Check if self-employed			
Prepa	arer	Firm's name				Firm's				
Use C		Firm's address				1				

Phone no

FORM 990-PF - DETAIL, TAX YEAR 01/01/2013 - 12/31/2013

Part I, Analysis of Revenue and Expenses	
LINE 11 - Other Income Income/(loss) from passthrough activities	(29,017)
TOTAL Other Income	(29,017)
LINE 23 - Other Expenses	
Deductions from passthrough activities	2,075
Legal Fees	18,490
TOTAL Other Expenses	20,565

FORM 990-PF - DETAIL, TAX YEAR 01/01/2013 - 12/31/2013

PART II BALANCE SHEETS			
LINE 10 b - INVESTMENTS - CORPORATE STOCK	BEGINNING OF YEAR (A) BOOK VALUE	END OF YEAR (B) BOOK VALUE (B)	(B) FAIR MARKET VALUE (B)
100% of the Common Stock of CS Equity V, Inc*	525,685	1,431,717	1,431,717
TOTAL	525,685	1,431,717	1,431,717
*The assets have decreased in value since contribution			
LINE 13 - INVESTMENTS - OTHER	BEGINNING OF YEAR (A) BOOK VALUE	END OF YEAR (B) BOOK VALUE (B)	(B) FAIR MARKET VALUE (B)
University Opportunity Fund	816,787	912,080	912,080
TOTAL	816,787	912,080	912,080

PART III ANALYSIS OF CHANGES IN NET ASSETS OR FUND BALANCES

LINE 3 - OTHER INCREASES NOT INCLUDED IN LINE 2

Unrealized Gain on Investments
TOTAL

2,253,277 2,253,277

FORM 990-PF - DETAIL, TAX YEAR 01/01/2013 - 12/31/2013

PART VII-A, STATEMENT REGARDING ACTIVITIES

Line 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)?

100% in CS Equity V, Inc

Form 8868

(Rev January 2014)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return.
► Information about Form 8868 and its instructions is at www.irs.gov/form8868.

OMB No 1545-1709

 If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box Х • If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form) Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868 Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions) For more details on the electronic filing of this form, visit www irs gov/efile and click on e-file for Chanties & 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 All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns Enter filer's identifying number, see instructions Name of exempt organization or other filer, see instructions Employer identification number (EIN) or Type or print CAPITALSOURCE CHARITABLE FOUNDATION 26-4312410 File by the Number, street, and room or suite no. If a P.O. box, see instructions Social security number (SSN) due date for 5404 WISCONSIN AVENUE, 2ND FLOOR filing your City, town or post office, state, and ZIP code. For a foreign address, see instructions instructions CHEVY CHASE, MD 20815 **Application** Return **Application** Return Is For Code Is For Code 01 Form 990 or Form 990-EZ Form 990-T (corporation) 07 Form 990-BL 02 Form 1041-A 08 Form 4720 (individual) Form 4720 (other than individual) 09 03 Form 990-PF Form 5227 10 04 Form 990-T (sec 401(a) or 408(a) trust) 05 Form 6069 11 Form 990-T (trust other than above) Form 8870 • The books are in the care of ▶ CAPITALSOURCE CHARITABLE FOUNDATION FAX No ▶ 202-457-6315 Telephone No ▶ 202-457-5260 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 a list with the names and EINs of all members the extension is for I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until AUGUST 15 _____, 20 14 _, to file the exempt organization return for the organization named above. The extension is for the organization's return for ► X calendar year 20 13 or tax year beginning ______, 20 ____, and ending ______, 20 _____, 20 _____ If the tax year entered in line 1 is for less than 12 months, check reason. I Initial return Final return Change in accounting period 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 2,500.00 If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit 3b|\$ Balance due. Subtract line 3b from line 3a Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions Caution. If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment

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

Form 8868 (R	ev 1-2014)				Page 2				
	e filing for an Additional (Not Automatic) 3-M	onth Exten	sion, complete only Part	II and check this box	▶ 📗				
	complete Part II if you have already been gra								
•	e filing for an Automatic 3-Month Extension,			, ,					
Part II	Additional (Not Automatic) 3-Month Ex			iginal (no copies needed)					
aren	riadicoliar (rioti riadoniado) o montro			Enter filer's identifying number, se	o instructions				
	Name of exempt organization or other filer, see in	structions		Employer identification number (
.	Traine of exempt organization of other mor, occur	101, 401,0110			, -				
Type or				06 4210410					
print	Number, street, and room or suite no. If a P.O. box, see instructions			26 - 4312410 Social security number (SSN)					
File by the				Social security humber (SSN)					
due date for	5404 WISCONSIN AVENUE, 2ND F								
iling your return See	City, town or post office, state, and ZIP code For	a foreign ad	dress, see instructions						
nstructions	CHEVY CHASE, MD 20815								
Enter the R	Return code for the return that this application	is for (file a	a separate application for	each return)					
Applicatio		Return	Application		Return				
ls For		Code	is For		Code				
	or Form 990-EZ	01							
Form 990-		02	Form 1041-A		08				
			· · ·	induiduol)	09				
	0 (individual)	03	Form 4720 (other than	individual)					
Form 990-		04	Form 5227		10				
	-T (sec 401(a) or 408(a) trust)	05	Form 6069		11				
	-T (trust other than above)	06	Form 8870		12				
STOP! Do	not complete Part II if you were not already	granted ar	n automatic 3-month exte	ension on a previously filed For	rm 8868.				
The boo	ks are in the care of ▶								
Telepho	ne No. ▶		Fax No ▶						
 If the org 	ganization does not have an office or place of	business ir	the United States, check	this box	▶│				
• If this is	for a Group Return, enter the organization's fo	ur digit Gro	oup Exemption Number (G	EN) If t	this is				
	ole group, check this box ▶ ☐				ttach a				
	names and EINs of all members the extension		g. 1 ap, 5						
				20					
	est an additional 3-month extension of time until, 20, 20, 20, 20, 20								
				l i	, 20				
	tax year entered in line 5 is for less than 12 m	ionins, che	ck leason initial i	rinarietum rinarietum					
	Change in accounting period								
7 State	in detail why you need the extension								
			<u>.</u>						
8a If this	s application is for Forms 990-BL, 990-PF, 9	90-T, 472	0, or 6069, enter the te	entative tax, less any					
nonre	fundable credits. See instructions			8a \$					
b If the	s application is for Forms 990-PF, 990-T	, 4720, o	r 6069, enter any refu	undable credits and					
estim	nated tax payments made Include any prior year overpayment allowed as a credit and any								
	punt paid previously with Form 8868								
	ince Due. Subtract line 8b from line 8a Include your payment with this form, if required, by using EFTPS								
	tronic Federal Tax Payment System) See instru		,	8c \$					
LIEC	Signature and Verific		et be completed for						
			•	•					
	illies of perjury, I declare that I have examined to			edules and statements, and to the	e best of my				
kilowieage a	and belief, it is true, correct, and complete, and that I	am aumoriz	ed to brehate this tolin						
_									
Signature 🕨		·	Title •	Date >					
				Form 886 8	8 (Rev 1-2014)				

Form 8868

(Rev January 2014)

Department of the Treasury

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No 1545-1709

Internal Revenue				<u> </u>		
	filing for an Automatic 3-Month Extension, o					
-	filing for an Additional (Not Automatic) 3-Molete Part II unless you have already been grain					
Electronic fill a corporation 8868 to req Return for 1	ling (e-file). You can electronically file Form to required to file Form 990-T), or an addition uest an extension of time to file any of the fransfers Associated With Certain Persona For more details on the electronic filing of the	8868 if yoi ial (not aut forms liste I Benefit (u need a 3-month auto comatic) 3-month exten d in Part I or Part II w Contracts, which must	imatic extension of time to ision of time. You can elect ith the exception of Form to be sent to the IRS in p	file (6 months for tronically file Form 8870, Information paper format (see	
Part I Au	tomatic 3-Month Extension of Time. On	ly submit	original (no copies ne	eeded).		
A corporation	n required to file Form 990-T and requesting	an automa	atic 6-month extension	- check this box and comple	te	
Part I only .					▶ 🔲	
All other corp	porations (including 1120-C filers), partnersh	ıps, REMIC	s, and trusts must use I	Form 7004 to request an exte	ension of time	
to file income		 -		Enter filer's identifying nu		
Type or	Name of exempt organization or other filer, see in	structions.		Employer identification number (EIN) or		
print	CAPITALSOURCE CHARITABLE FOUNDATION			26-4312410		
File by the	Number, street, and room or suite no if a P O box		ctions	Social security number (SSN)		
due date for filing your	5404 WISCONSIN AVENUE, 2ND FI			Coolar Scourity Harrison (CON)		
return See	City, town or post office, state, and ZIP code For		dress, see instructions			
instructions	CHEVY CHASE, MD 20815					
Enter the Re	sturn code for the return that this application	is for (file a	separate application for	or each return)	0 4	
Application		Return	Application		Return	
ls For		Code	Is For		Code	
Form 990 or	Form 990-EZ	01	Form 990-T (corporat	tion)	07	
Form 990-Bl	-	02	Form 1041-A		08	
Form 4720 ((individual)	03	Form 4720 (other tha	in individual)	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	70		
Telephone If the orga If this is for the whole a list with the I reque until for the Z If the to C 3a If this nonrefit b If this	anization does not have an office or place of or a Group Return, enter the organization's for a group, check this box	business in ur digit Grof it is for paragraph or poration reexempt or poration, check and the control of the co	equired to file Form 990 ganization return for the, and ending lnitial return for the, or 6069, enter the recognition for the recognition of the following for the recognition of the recogniti	this box	If this is and attach e The extension is	
estimated tax payments made Include any prior year overpayment allowed as a credit Balance due. Subtract line 3b from line 3a Include your payment with this form, if required, by using EFTPS						
(Electronic Federal Tax Payment System) See instructions 3c \$						
Caution. If you	u are going to make an electronic funds withdrawa	l (direct deb	it) with this Form 8868, s	ee Form 8453-EO and Form 88	79-EO for payment	
instructions			· · · · · · · · · · · · · · · · · · ·			
For Privacy Act and Paperwork Reduction Act Notice, see instructions. Form 8868 (Rev. 1-2014)						

orm 8868 (Rev 1-2014)				Page 2			
If you a	re filing for an Additional (Not Automatic) 3-Mo	onth Exten	sion, complete only Part I	I and check this box	▶ X			
Note. Only	y complete Part II if you have already been gran	nted an aut	omatic 3-month extension	on a previously filed Form 8868	3.			
• If you a	re filing for an Automatic 3-Month Extension, o	omplete o	nly Part I (on page 1)					
Part II	Additional (Not Automatic) 3-Month Ex	tension o	f Time. Only file the orig	inal (no copies needed).				
			Ε	nter filer's identifying number, see	instructions			
	Name of exempt organization or other filer, see in	structions		Employer identification number (EIN) or				
Type or								
print		CAPITALSOURCE CHARITABLE FOUNDATION			26-4312410			
	Number, street, and room or suite no. If a P.O. box, see instructions.		Social security number (SSN)					
File by the due date for	5404 WISCONSIN AVENUE, 2ND F	5404 WISCONSIN AVENUE, 2ND FLOOR						
iling your retum, See	City, town or post office, state, and ZIP code. For a foreign address, see instructions.							
nstructions	CHEVY CHASE, MD 20815	CHEVY CHASE, MD 20815						
Enter the	Return code for the return that this application	is for (file a	separate application for e	ach return)	. 0 4			
Applicati	ion	Return	Application		Return			
is For		Code	Is For		Code			
Form 990	0 or Form 990-EZ	01						
Form 990		02	Form 1041-A		08			
	20 (ındıvıdual)	03	Form 4720 (other than individual)		09			
Form 990		04	Form 5227		10			
	0-T (sec 401(a) or 408(a) trust)	05	Form 6069		11			
Form 990-T (trust other than above)		06	Form 8870		12			
	not complete Part II if you were not already	granted ar	automatic 3-month exte	nsion on a previously filed For	m 8868.			
	oks are in the care of CAPITALSOURCE							
	one No ▶ 202-457-5260		Fax No. ▶ 202-457-	6315				
•	organization does not have an office or place of	 business ir	the United States, check t	his box	▶□			
	s for a Group Return, enter the organization's fo				his is			
	hole group, check this box	-			tach a			
	ne names and EINs of all members the extension		• • • •					
	quest an additional 3-month extension of time u		MBER 15	, 20 14				
	calendar year 2013 , or other tax year beginning , 20 , and ending , 20							
	e tax year entered in line 5 is for less than 12 m							
	Change in accounting period	·						
7 Stat	te in detail why you need the extension ADDI	TIONAL	TIME IS REQUIRED	TO GATHER THE INFORM	1ATION			
	CESSARY TO FILE A COMPLETE AND							
8a If th	nis application is for Forms 990-BL, 990-PF, 9	90-T, 472	0, or 6069, enter the ter	ntative tax, less any				
noni	refundable credits. See instructions			8a \$ 2	2,500.00			
b If th	is application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and							
estır	mated tax payments made Include any prior year overpayment allowed as a credit and any							
amo	ount paid previously with Form 8868				2,500.00			
c Bala	ance Due. Subtract line 8b from line 8a. Include	your paym	ent with this form, if requi	red, by using EFTPS				
(Electronic Federal Tax Payment System). See instructions.								
	Signature and Verific	ation mu	st be completed for I	Part II only.				
	nalties of perjury, I declare that I have examined to and belief, it is true, correct, and complete, and that I	his form, in	icluding accompanying sche	•	e best of my			
			b .		•			
Signature >	<u> </u>		Title >	Date ▶				
				Form 886 8	Rev 1-2014)			