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Department of the Treasury Internal Revenue Service

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

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

Open to Public Inspection

F	or ca	llendar year 2013 or tax year beginning	01/24,	2013, and ending		12/31, 2013
		of foundation			A Employer identi	
	WIS	NOSKY FAMILY FOUNDATION, INC	•		46-190597	17
_	Numb	er and street (or P O box number if mail is not delivered	to street address)	Room/suite	B Telephone numb	per (see instructions)
					(3)	01) 983-1768
	105	20 OAKLYN DRIVE				
_	City o	r town, state or province, country, and ZIP or foreign po	stal code			· · · · · · · · · · · · · · · · · · ·
					C If exemption applic pending, check her	ation is
	POT	OMAC, MD 20854			pending, check her	e
ō	3 Che	eck all that apply X Initial return	Initial return of a fo	mer public charity	,	
		Final return	Amended return	mer paama andmy	D 1 Foreign organiza 2 Foreign organiza	
		Address change	Name change		85% test, check	here and attach
Ē	1 Che	eck type of organization: X Section 501(ion	computation .	
	i i	Section 4947(a)(1) nonexempt charitable trust	Other taxable private for		E If private foundation	_ 1 1
ī			unting method X Cash			b)(1)(A), check here .
·			ther (specify)			s in a 60-month termination
		▶\$ 23,167. (Part I.	column (d) must be on cash i	oasis)	2.120. 300.00. 307(SKINDS CHECK HEIG .
1		Analysis of Revenue and Expenses (The		10.0)		(d) Disbursements
-		total of amounts in columns (b), (c), and (d)	(a) Revenue and expenses per (b) N		(c) Adjusted net	for charitable
		may not necessarily equal the amounts in column (a) (see instructions))	books	income	income	purposes (cash basis only)
-	1	Contributions, gifts, grants, etc., received (attach schedule) .	50,000.			(Gash basis Only)
	'2	if the foundation is not required to	, , , , , , , , , , , , , , , , , , , ,			
	3	Check ► attach Sch B				
	4	Dividends and interest from securities			· · · · · · · · · · · · · · · · · · ·	
	1	Gross rents			 	
	i					
	i .	Net rental income or (loss)			· · · · · · · · · · · · · · · · · · ·	
Povenie	b					
9	-	assets on line 6a Capital gain net income (from Part IV, line 2).				
ď						
	8	Net short-term capital gain				
!	9 10 a	Gross sales less returns				
,	1.	and allowances · · · ·				
	1	Less Cost of goods sold .				
ξ	11	Gross profit or (loss) (attach schedule) Other income (attach schedule)				
ก	12	Total. Add lines 1 through 11	50,000.			
-			· · ·			
	14	Compensation of officers, directors, trustees, etc. Other employee salaries and wages Pension plans, employee benefits				
99	15	Pansian plans, amplayed banefuts	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\			
Š	160	Pension plans, employee benefits Legal fees (attach schedule) Accounting fees (attach schedule)	2014 /B/			
\$	104	Accounting fees (attach schedule)			 	
٥		Other professional fees (attach adhedule)	1117			
ŧ	4,7	Other professional fees (attack schedule)				
Administrative Expenses	17	Interest	NUT			
2	18	\				
Ę	19	Depreciation (attach schedule) and depletion.		· · ·		
		Occupancy				
Operating and	21	Travel, conferences, and meetings				
5	22	Printing and publications	475.			475.
aţ.	23	Other expenses (attach schedule) ATCH .1 .	373.			4/5.
ā	24	Total operating and administrative expenses.	475.			ATE
Ċ		Add lines 13 through 23	26,358.			475.
	25	Contributions, gifts, grants paid	26,833.			26,358.
-	26	Total expenses and disbursements Add lines 24 and 25	20,033.			26,833.
	27	Subtract line 26 from line 12.	22 167			
	1	Excess of revenue over expenses and disbursements	23,167.			
	1	Net investment income (if negative, enter -0-)		0		
	1 0	Adjusted net income (if negative, enter -0-)	1	1		1

JSA For Paperwork Reduction Act Notice, see instructions. 3E1410 1 000 6443HC 3947 8/29/2014 11:20:13 AM V 13-6.3F

A P 990-PF (2013)

36852

1 Cash - non-interest-bearing. (a) Book Value (b) Book Value (c) Fair Market Value 23, 167.		art II	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End o	f year
2 Savings and temporary cash mestments 3 Accounts receivable b Less: allowance for doubtful accounts b Less: allowance for doubtful accounts b 5 Grants receivable 6 Receivable due from officers, directors, fusities, and other disqualified persons (attach schedule) (see instructions) 7 Other notes and loans receivable (leach schedule) b Less: allowance for doubtful accounts b 10 a Investments - corporate stock (attach schedule) b Less, allowance for sole or use 10 a Investments - U.S and state gramment delipations (attach schedule) b Less, allowance for sole or use 10 a Investments - U.S and state gramment delipations (attach schedule) b Less, allowance for sole or use 10 a Investments - Corporate stock (attach schedule) 10 a Investments - Corporate stock (attach schedule) 11 a Investments - Corporate stock (attach schedule) 12 Investments - Corporate stock (attach schedule) 13 Investments - Corporate stock (attach schedule) 14 Investments - corporate stock (attach schedule) 15 Investments - corporate stock (attach schedule) 16 Investments - corporate stock (attach schedule) 17 Investments - corporate stock (attach schedule) 18 Investments - corporate stock (attach schedule) 19 Investments - corporate stock (attach schedule) 10 Investments - corporate stock (attach schedule) 10 Investments - corporate stock (attach schedule) 11 Investments - corporate stock (attach schedule) 12 Investments - corporate stock (attach schedule) 13 Investments - corporate stock (attach schedule) 14 Investments - corporate stock (attach schedule) 15 Other assets (sescribe b 16 Total assets (to be completed by all fifers see the instructions Also, see page 1, 4mn I)		art II	amounts only (See instructions)	(a) Book Value		
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y Prepaid expenses and deferred charges		'				
10 a Investments - U.S and state government obligations (attach schedule)		_				
10 a Investments - U.S and state government obligations (attach schedule)	ěŧ	8			···	
b Investments - corporate bonds (attach schedule) . c Investments - corporate bonds (attach schedule) . land semants - and, buildings, b. Less accumulated deprecation (attach schedule) . 12 Investments - mortgage loans . 13 Investments - other (attach schedule) . 14 Land, buildings, and . Less accumulated deprecation (attach schedule) . 15 Total assets (describe	Ş	9				
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and equipment basis less acconditions desprecation		11 C				
Cattach schedule		''	and equipment basis			
Investments - other (attach schedule)			(attach schedule)			
1 1 1 1 1 1 1 1 1 1		12	Investments - mortgage loans			
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16 Total assets (to be completed by all filers - see the instructions Also, see page 1, item i)			Less accumulated depreciation (attach schedule)			
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5 Decreases not included in line 2 (itemize) ▶ 5					3	
5 Decreases not included in line 2 (itemize) ▶ 5	4				4	23,167.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 6 23, 167.	_					
	6	Tota	al net assets or fund balances at end of year (line 4 minus	line 5) - Part II, column (I	b), line 30 6	23,167.

Page 3

Ľ		and Losses for Tax on Inv d describe the kind(s) of property sold		(b) How acquired	(c) Date	(d) Date sold
	2-story b	rick warehouse; or common stock, 200	0 shs MLC Co)	P - Purchase D - Donation		(mo, day, yr)
12	<u> </u>			B Bonano		
t)					
	;	•••				
	1					
_6)					
	(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) minu	
_ 2						
_k)					
	,				·—··	
	I					15
_6						
	Complete only for assets	showing gain in column (h) and own	ed by the foundation on 12/31/69		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 (ı) over col. (ı), ıf any	col	(k), but not less t Losses (from co	
_ <u>t</u>)					
_0	;					
_(1			:		
_6						
2	Capital gain net income or		If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7	2		
3	Net short-term capital gain	n or (loss) as defined in sections 1				
	If gain, also enter in Par	t I, line 8, column (c) (see ins	structions) If (loss), enter -0- in $igrlack{1}{igrli}$			
	Part I, line 8		, , . , J	3		
P			educed Tax on Net Investment I	ncome	, , , , , , , , , , , , , , , , , , ,	
(F	or optional use by domestic	c private foundations subject to t	he section 4940(a) tax on net invest	ment inco	me)	
lf	section 4940(d)(2) applies,	leave this part blank NO	T AVAILABLE FOR INITIAL	YEAR :	RETURNS	
		the section 4942 tax on the distri- not qualify under section 4940(e)	ibutable amount of any year in the b	ase perio	q, [_	」Yes ∐_ No
_			ar, see the instructions before making	a any ont	noe .	
÷	(a)			g arry erm	(d)	·
,	Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of nonchantable-use assets		Distribution ra (col (b) divided by	atio
_	2012	, , , , ,			(cor (b) divided by	coi (c))
_	2011				•	·
_	2010			·········	-	
_	2009				·	_
_	2008					
_				1 1	-	
2	Total of line 1, column (d)	•		2		
3	Average distribution ratio	for the 5-year base period - divid	de the total on line 2 by 5, or by the	- -		<u> </u>
Ī		· · · · · · · · · · · · · · · · · · ·	ss than 5 years	3		
	The state of the s			•		
4	Enter the net value of nor	ncharitable-use assets for 2013 fr	rom Part X, line 5	4		
5	Multiply line 4 by line 3			5		
c						
6						· · · · ·
7	Add lines 5 and 6			7		<u> </u>
8	Enter qualifying distribution	ons from Part XII, line 4	in Part VI, line 1b, and complete	8		
	If line 8 is equal to or gree Part VI instructions	eater than line 7, check the box	in Part VI, line 1b, and complete t	that part	using a 1% tax	rate See the

Form 990-PF (2013)

Par	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	nstru	ction	s)
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1)			
	Date of ruling or determination letter (attach copy of letter if necessary - see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			0
	here and enter 1% of Part I, line 27b			
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of \mathcal{I}			
	Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 2			
3	Add lines 1 and 2			0
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 4			0
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0			
6	Credits/Payments.			
_	2013 estimated tax payments and 2012 overpayment credited to 2013 6a			
b	Exempt foreign organizations - tax withheld at source			
C	Tax paid with application for extension of time to file (Form 8868) 6c			
d -	Backup withholding erroneously withheld			0
7 8	Total credits and payments Add lines 6a through 6d			<u>_</u>
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			0
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
11	Enter the amount of line 10 to be: Credited to 2014 estimated tax ▶ Refunded ▶ 11			
Par	t VII-A Statements Regarding Activities			
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate		Yes	No
	or intervene in any political campaign?	1a		Х
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the			
	definition)?	1b		Х
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or			
	distributed by the foundation in connection with the activities			
С	Did the foundation file Form 1120-POL for this year?	1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation ►\$(2) On foundation managers ►\$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on			
	foundation managers > \$			Ų
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
_	If "Yes," attach a detailed description of the activities			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation,	_		x
4	or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3 4a		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4b	7	
5	If "Yes," has it filed a tax return on Form 990-T for this year? Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
•	If "Yes," attach the statement required by General Instruction T			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict			
	with the state law remain in the governing instrument?	6_	Х	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	X	_
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			
	MD,			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)			
	of each state as required by General Instruction G ² If "No," attach explanation	8ь	X	
9	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			
	Part XIV	9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and		· ·	
	addresses	10	Х	1

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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b If "Yes," did it have excess business holdings in 2013 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

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

	t VII-B Statements Regarding Activities for	or Which Form 4	720 May Bo Bogu	ired (continued)		1 age C
		=	120 May De Requ	ireu (conunueu)	1	
5a	During the year did the foundation pay or incur any amou					
	(1) Carry on propaganda, or otherwise attempt to influe	• •			٥	
	(2) Influence the outcome of any specific public ele	•	•			
	directly or indirectly, any voter registration drive?				0	
	(3) Provide a grant to an individual for travel, study, or ot	her similar purposes?		. Yes X N	D	
	(4) Provide a grant to an organization other than a	charitable, etc., org	anization described i	n		
	section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see instructions)		Yes X N	o	
	(5) Provide for any purpose other than religious, ch	naritable, scientific, l	iterary, or education	al		}
	purposes, or for the prevention of cruelty to children				,	
b	If any answer is "Yes" to 5a(1)-(5), did any of the				n	
-	Regulations section 53 4945 or in a current notice regard			•	I .	
	Organizations relying on a current notice regarding disas	_	•		<u>. </u>	
_	If the answer is "Yes" to question 5a(4), does the				<u> </u>	
C	• • • • • • • • • • • • • • • • • • • •		•		_	
	because it maintained expenditure responsibility for the g			. Yes X N	°	
_	If "Yes," attach the statement required by Regulations sec	, ,				
6a	Did the foundation, during the year, receive any fun-	•				· I
	on a personal benefit contract?				0	
Þ	Did the foundation, during the year, pay premiums, dire	ctly or indirectly, on a p	personal benefit contrac	^{ქ?}	. <u>6b</u>	X
	If "Yes" to 6b, file Form 8870					
7 a	At any time during the tax year, was the foundation a pa	irty to a prohibited tax	shelter transaction?	. Yes XN	0	
b	If "Yes," did the foundation receive any proceeds or have	e any net income attrit	outable to the transaction	n?	. 7b	NA
Pai	t VIII Information About Officers, Directors	s, Trustees, Foun	dation Managers,	Highly Paid Empl	oyees,	
1	and Contractors List all officers, directors, trustees, foundation i	managore and thoi	r componention (see	instructions\		
<u> </u>		(b) Title, and average	(c) Compensation	(d) Contributions to	(a) Eypon	se account,
	(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation		lowances
			,		· · · · · · · · · · · · · · · · · · ·	
ATC	 CH 2		C	C		0
						
		j				
_	Commence of the bishest and small and	/		- 4		
2	Compensation of five highest-paid employees "NONE."	(other than thos	se included on lin	e 1 - see instruct	ions). it n	one, enter
	HONE.	(b) Title, and average		(d) Contributions to	T	
(a) Name and address of each employee paid more than \$50,000	hours per week	(c) Compensation	employee benefit plans and deferred		se account, lowances
		devoted to position		compensation		
					ļ	
	NONE					
	· · · · · · · · · · · · · · · · · · ·					
		1		I	1	
					1	
[Ctr	al number of other employees paid over \$50,000 .	<u> </u>				 -

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Page	7

Part VIII	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employ and Contractors (continued)	/ees,
3 Five I	nighest-paid independent contractors for professional services (see instructions). If none, enter "NONE	91
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE		
-		
-		· · · · · · · · · · · · · · · · · · ·
Total numb	er of others receiving over \$50,000 for professional services	
Part IX-A	Summary of Direct Charitable Activities	
List the four organizations	dation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of and other beneficianes served, conferences convened, research papers produced, etc.	Expenses
1 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	Amount
1 NONE		
2		
All other pro	gram-related investments. See instructions	
3 NONE		
Total. Add	lines 1 through 3	
		Form 990-PF (20

Par	Minimum' Investment Return (All domestic foundations must complete this part. Forei see instructions.)	gn foundat	ons,
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	
b	Average of monthly cash balances	1b	42,044.
С	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c) Reduction claimed for blockage or other factors reported on lines 1a and	1d	42,044.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)]	
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d Cash deemed held for charitable activities Enter 1 1/2 % of line 3 (for greater amount, see	3	42,044.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see		·· ·-
	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	4	631.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	41,413.
6	Minimum investment return. Enter 5% of line 5	6	1,940.
Par	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating found and certain foreign organizations check here ▶ ☐ and do not complete this part)	idations	
1	Minimum investment return from Part X, line 6	1	1,940.
2 a	Tax on investment income for 2013 from Part VI, line 5 2a		
b	Income tax for 2013 (This does not include the tax from Part VI) 2b	1	
С	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments Subtract line 2c from line 1	3	1,940.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	1,940.
6	Deduction from distributable amount (see instructions) Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1	7	1,940.
Par	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	26,833.
b	Program-related investments - total from Part IX-B Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	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		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	26,833.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income	1 1	
	Enter 1% of Part I, line 27b (see instructions)	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	26,833.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when c qualifies for the section 4940(e) reduction of tax in those years	alculating w	hether the foundation

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Form 990-PF (2013) ' Page 9 Part XIII Undistributed Income (see instructions) (b) (d) (a) (c) 2012 2013 Corpus Years prior to 2012 Distributable amount for 2013 from Part XI, 1,940. Undistributed income, if any, as of the end of 2013 a Enter amount for 2012 only . . . Excess distributions carryover, if any, to 2013: a From 2008 From 2009 c From 2010 d From 2011 e From 2012 Qualifying distributions for 2013 from Part XII, 26,833. line 4 ▶ \$ a Applied to 2012, 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) 1,940. d Applied to 2013 distributable amount 24,893. Remaining amount distributed out of corpus . . . Excess distributions carryover applied to 2013 (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: 24,893. a Corpus Add lines 3f, 4c, and 4e Subtract line 5 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
Undistributed income for 2012 Subtract line 4a from line 2a Taxable amount - see Undistributed income for 2013 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2014 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions) Excess distributions carryover from 2008 not applied on line 5 or line 7 (see instructions) . . . Excess distributions carryover to 2014. 24,893 Subtract lines 7 and 8 from line 6a 10 Analysis of line 9 a Excess from 2009 . . .

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b Excess from 2010 . . .c Excess from 2011 . . .d Excess from 2012 . . .

e Excess from 2013 . . .

24,893.

	morniation regarding roundation managers.
а	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))
	KERRY WISNOSKY
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
	N/A
?	Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:
	Check here \blacktriangleright X 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
а	The name, address, and telephone number or e-mail address of the person to whom applications should be addressed
b	The form in which applications should be submitted and information and materials they should include.
C	Any submission deadlines.
d	Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other
	factors

JSA 3E1490 1 000

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Part XV Supplementary Information (continued)			
3 Grants and Contributions Paid During Recipient Name and address (home or business)	ng the Year or Appr	oved for F	uture Payment	
Recipient	show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	CONTIDUION	
a Paid during the year				
ATCH 3		1		
Alon 3				
	•			
			•	
Total			▶ 3a	26,358.
b Approved for future payment				
NONE				
140145				
		İ		
Total	<u></u>	1		0
	<u> </u>	· · · · · ·		<u> </u>

Page **12**

Part XVI-	A Analysis of Income-Produ	cing Acti	vities			
Enter gross	amounts unless otherwise indicated	Unrel	ated business income	Excluded b	y section 512, 513, or 514	(e)
1 Program	service revenue:	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions.)
_	SCIVICE TOVORIGE.			<u> </u>		(See man denoma.)
. —				 		
						
f						
g Fees	and contracts from government agencies					
2 Members	ship dues and assessments					
	n savings and temporary cash investments					
	ls and interest from securities					
	al income or (loss) from real estate					
	-financed property					
	lebt-financed property			 		
	I income or (loss) from personal property .			 		
	vestment income			 		
· ·	oss) from sales of assets other than inventory			-		
	me or (loss) from special events					
	rofit or (loss) from sales of inventory					
	venue a			 		
		~				
е						
12 Subtotal	Add columns (b), (d), and (e)					
13 Total. Ad	dd line 12, columns (b), (d), and (e)				13	
	neet in line 13 instructions to verify calcu					·····
Part XVI-	Relationship of Activities	to the Ac	complishment of Ex	empt Purp	oses	
Line No.	Explain below how each activity	y for which	h income is reported ii	n column (e) of Part XVI-A contrib	uted importantly to the
▼	accomplishment of the foundation	n's exemp	t purposes (other than I	by providing	g funds for such purpose	s). (See instructions)
-						
					- 	
		•	······································			
					••	
					10	<u> </u>
						
						
						
						
						
-						
			-			
					· -	

Form 99	0-PF (201	3)	MISNOSKI	FAMILI FOUND	AIION, I	INC.		46-190	3911	Pa	ge 13
Part 2	XVII	Information R Exempt Organ	•	ansfers To and 1	ransactio	ons an	d Relationship	s With Non	chari	table	•
1 D	id the c	organization direct	ly or indirectly	engage in any of th	e following	with ar	ny other organizat	tion described		Yes	No
	i sectioi rganizat		ode (other than	section 501(c)(3) o	rganızatıons) or in s	ection 527, relati	ng to political			
	-		ng foundation to	a noncharitable exe	empt organi	zation of					
('	I) Cash								1a(1)		X
									1a(2)		X
		nsactions									
('	1) Sales	of assets to a no	ncharitable exe	mpt organization					1b(1)		X
				able exempt organıza					1b(2)		X
(;	3) Renta	al of facilities, equi	ipment, or other	r assets					1b(3)		X
									1b(4)		X
				hip or fundraising sol					1b(5)		X
				sts, other assets, or p							X
				es," complete the fo						faır m	arke
		•		ices given by the re	•		· · ·	•			
				gement, show in co							
(a) Line		b) Amount involved	(c) Name of	noncharitable exempt orga	inization		cription of transfers, tr	ansactions, and sha	ппд агта	ngeme	nts
		N/A				N/A					
											
		······································	 								
					•						
			 	, - , , , 			, 				
											
											
				·							
				<u> </u>							
				 							
d	escribe) of the Code (c	ffiliated with, or rela other than section 50					Y	es X] No
		(a) Name of organizatio	n	(b) Type of o	rganization		(c) De	scription of relations	ship		
								 		-	
											
	Under p	enatties of perjury, I decla	are that I have exam	I nined this return, including a	ccompanying sch	edules and	statements, and to the	best of my knowledg	ge and t	elief, it	ıs true
Sian	correct, a	ind complete. Declaration o	of preparer (other than	taxpayer) is based on all inform	nation of which pi	reparer has	any knowledge				
Sign		her	Ver	1 9/8	<u>//</u> /)	rewurer	May the IRS	S discus reparer		retum below
Here	Signat	ure of officer or trustee		Date	,	Title		(see instruction	ns)? X	Yes	No
Do:4	F	rint/Type preparer's na	ame	Preparer's signature	/ 1		Date	Check	PTIN		
Paid		ARK T GOSSAR		Mach 1 X	Jossent,	CAA	8.29.14		P008		38
Prepa			RONSON LLC		- -		Firm	's EIN ▶ 37-1	6113	26	
Use (Only ₽	Firm's address 🕨 80)5 KING FA	RM BLWD., 3RD	FLOOR						

Form 990-PF (2013)

301-231-6200

ROCKVILLE, MD

Phone no

20850

Schedule B

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF. ▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990. OMB No 1545-0047

Name of the organization WISNOSKY FAMILY FO	UNDATION INC	Employer identification number
WISNOSKI PARILI PO	UNDATION, INC.	46-1905977
Organization type (check o	ne)	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated	as a private foundation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as	a private foundation
	501(c)(3) taxable private foundation	
Note. Only a section 501(c) instructions General Rule	(7), (8), or (10) organization can check boxes for both the Ger	neral Rule and a Special Rule See
X For an organization	on filing Form 990, 990-EZ, or 990-PF that received, during the yone contributor. Complete Parts I and II	ne year, \$5,000 or more (in money or
Special Rules		
under sections 50	(c)(3) organization filing Form 990 or 990-EZ that met the 33 (9(a)(1) and 170(b)(1)(A)(vi) and received from any one contract \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, linual II	ributor, during the year, a contribution of
during the year, to	(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that otal contributions of more than \$1,000 for use exclusively for inposes, or the prevention of cruelty to children or animals. Co	religious, charitable, scientific, literary,
during the year, of not total to more year for an exclus applies to this org	(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that contributions for use exclusively for religious, charitable, etc., pethan \$1,000. If this box is checked, enter here the total contributely religious, charitable, etc., purpose. Do not complete any ganization because it received nonexclusively religious, charital rear.	burposes, but these contributions did butions that were received during the of the parts unless the General Rule ble, etc, contributions of \$5,000 or
990-EZ, or 990-PF), but it m	at is not covered by the General Rule and/or the Special Rule aust answer "No" on Part IV, line 2, of its Form 990, or check, to certify that it does not meet the filing requirements of School.	the box on line H of its Form 990-EZ or on its

For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990, 990-EZ, or 990-PF) (2013)

Name of organization WISNOSKY FAMILY FOUNDATION, INC.

Employer identification number 46-1905977

Part I	Contributors (see instructions). Use duplicate copies of Pa	rt I if additional space is nee	ded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1-	KERRY WISNOSKY 10520 OAKLYN DRIVE POTOMAC, MD 20854	\$50,000.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)

Name of organization WISNOSKY FAMILY FOUNDATION, INC.

Employer identification number

			46-1905977
Part II	Noncash Property (see instructions). Use duplicate copies of Pa	art II if additional space is ne	eded.
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received

Name of organization WISNOSKY FAMILY FOUNDATION, INC.

Employer identification number 46-1905977

art 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.,

a) No. from	(b) Purpose of gift	(a) 11a	(a) D
art i	(b) Purpose or gm	(c) Use of gift	(d) Description of how gift is h
	~		
		(e) Transfer of gift	
		.,	
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
No. om	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is h
art I	(b) i di pose di giit	(c) use or gift	(d) Description of now gift is n
		(e) Transfer of gift	
	Topo of courts were added 1710 at		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
) No			
) No. rom art I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is h
arti			
		(e) Transfer of gift	
		(e) Transier or girt	
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
No.	(h) Burness of sife	43344 5 25	
om art I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is h
			·
		(e) Transfer of gift	
		-	
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
-			
) ·	

WISNOSKY FAMILY FOUNDATION, INC.

ATTACHMENT

DESCRIPTION BANK FEES

- OTHER EXPENSES

PART I

FORM 990PE,

REVENUE AND EXPENSES PER BOOKS 475.

TOTALS

PURPOSES 475. CHARITABLE

475.

ATTACHMENT 1 PAGE 18

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ATTACHMENT 2

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

. •			
EXPENSE ACCT AND OTHER ALLOWANCES	0	0	0
CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	0	0	0
COMPENSATION	0	0	0
TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	PRESIDENT 1.00	SECRETARY AND TREASURER 1.00	GRAND TOTALS
NAME AND ADDRESS	ROBIN WISNOSKY 10520 OAKLYN DRIVE POTOMAC, MD 20854	KERRY W. WISNOSKY 10520 OAKLYN DRIVE POTOMAC, MD 20854	

ATTACHMENT 3

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	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		
	AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
THE BULLIS SCHOOL	NONE	EDUCATIONAL	10,500.
10601 FALLS ROAD	P.C.		
POTOMAC, MD 20854			
UNIVERSITY OF MARYLAND ALUMNI ASSOCIATION	NONE	EDUCATIONAL	108.
COLLEGE PARK, MD 20742	PC		
THE BARDEN FAMILY FUND	NONE	GENERAL OPERATING SUPPORT	250.
NEWTOWN, CT 06470	PC		
AMERICAN RED CROSS	NONE	GENERAL OPERATING SUPPORT	2,500.
2025 E STREET NW	PC		
WASHINGTON, DC 20006			
ALEX'S LEMONADE STAND FOUNDATION	NONE	GENERAL OPERATING SUPPORT	5,000.
333 E. LANCASTER AVENUE #414	PC		
WYNNEWOOD, PA 19096			
HOMES FOR OUR TROOPS, INC.	NONE	GENERAL OPERATING SUPPORT	5,000.
6 MAIN STREET	PC		
TAUTON, MA 02780			

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IISNOSKY FAMILY FOUNDATION, INC	FORM 990PE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

			ATTACHMENT 3 (CONT'D)
	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
	NONE PC	GENERAL OPERALING SUPPORT	250.
CATHERINE VIOLET HUBBARD FOUNDATION, INC. P O BOX 3571 NEWTOWN, CT 06470	NONE PC	GENERAL OPERATING SUPPORT	250.
	NONE PC	GENERAL OPERATING SUPPORT	250.
CAROLINE PREVIDI FOUNDATION P O BOX 3482 NEWTOWN, CT 06470-3482	NONE PC	GENERAL OPERATING SUPPORT	250.
	NONE PC	GENERAL OPERATING SUPPORT	1,000.
THE VICKI SOTO MEMORIAL FUND 411 BARNUM AVENUE STRATFORD, CT 06614	NONE PC	GENERAL OPERATING SUPPORT	250.

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

RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR

PURPOSE OF GRANT OR CONTRIBUTION

FOUNDATION STATUS OF RECIPIENT

RECIPIENT NAME AND ADDRESS

250.

GENERAL OPERATING SUPPORT

AMOUNT

ATTACHMENT 3 (CONT'D)

250.

NONE KLINGBERG FAMILY CENTERS NEW BRITAIN, CT 06052 370 LINWOOD STREET

GENERAL OPERATING SUPPORT NONE SANDY HOOK PROMISE FOUNDATION

250. GENERAL OPERATING SUPPORT NONE

ALLISON WYATT MEMORIAL FUND

HAMDEN, CT

NEWTOWN, CT 06470 P O BOX 3489

26,358.

TOTAL CONTRIBUTIONS PAID

ATTACHMENT 3

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Form 8868

(Rev January 2014)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

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

• If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box • If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form) Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868 Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions) For more details on the electronic filing of this form, visit www irs gov/efile and click on e-file for Charities & Nonprofits Part | 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 Enter filer's identifying number, see instructions to file income tax returns. Name of exempt organization or other filer, see instructions Employer identification number (EIN) or Type or print 46-1905977 WISNOSKY FAMILY FOUNDATION, INC. File by the Number, street, and room or suite no. If a P.O. box, see instructions. Social security number (SSN) due date for 10520 OAKLYN DRIVE filing your return See City, town or post office, state, and ZIP code For a foreign address, see instructions instructions POTOMAC, MD 20854 0 4 Enter the Return code for the return that this application is for (file a separate application for each return) **Application** Return **Application** Return Code Is For Code Is For 01 Form 990-T (corporation) 07 Form 990 or Form 990-EZ Form 990-BL 02 Form 1041-A 80 Form 4720 (other than individual) 09 Form 4720 (individual) 03 Form 990-PF Form 5227 10 04 Form 6069 Form 990-T (sec 401(a) or 408(a) trust) 05 11 Form 990-T (trust other than above) Form 8870 12 The books are in the care of ► KERRY W. WISNOSKY FAX No ▶ Telephone 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 and attach a list with the names and EINs of all members the extension is for. I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until 08/15, 2014, to file the exempt organization return for the organization named above. The extension is for the organization's return for calendar year 20 or ► X tax year beginning _______01/24_, 20 13_, and ending ______12/31_, 20 13_ If the tax year entered in line 1 is for less than 12 months, check reason | X | Initial return Change in accounting period 3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any 0 nonrefundable credits See instructions If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit 0 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 0 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 instructions Form 8868 (Rev 1-2014) For Privacy Act and Paperwork Reduction Act Notice, see instructions.