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990-PF

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

Department of the Treasury

Information about Form 990-PF and its separate instructions is at www.irs.gov/form990of.

Fo	or ca	lendar year 2013 or tax year beginning		•	, 2013,	, and endi	ng		, 20		
_		of foundation NORMAN & FLORENCE	BRODY				1	Employer identific	ation number		
	FAM	ILY FOUNDATION, INC.						52-1665263	3		
_	Numb	er and street (or P O box number if mail is not deliv	ered to street address)			Room/suite) E	B Telephone number (see instructions)			
								(30)	1) 656-9292		
	561	0 WISCONSIN AVENUE				1507					
	City o	r town, state or province, country, and ZIP or foreign	postal code			· · · · · · · · · · · · · · · · · · ·					
							C	If exemption applicat pending, check here	ion is		
	CHE	VY CHASE, MD 20815-4440						portaing, cheek field			
G	Che	ck all that apply. Initial return	Initial re	turn	of a former p	ublic char	ity c	1. Foreign organization	ons, check here . ►		
		Final return	Amende	d re	turn		İ	2. Foreign organizati	ons meeting the		
		Address change	Name c	nang	е			85% test, check he computation			
Н	Che	ck type of organization X Section 50	1(c)(3) exempt priv	ate f	oundation			If private foundation	etatus was terminated		
	s	ection 4947(a)(1) nonexempt charitable trust			ıvate foundat	tion		under section 507(b)	.		
ı	Fair	market value of all assets at JAC	counting method.	X C	ashAcc	rual	F	If the foundation is i	n a 60-month termination		
	end	of year (from Part II, col. (c), line	Other (specify)			-		under section 507(b)(1)(B), check here .		
_	16)	▶ \$ 669,354. (Par	l, column (d) must b	e on	cash basis)						
ŀ	art	Analysis of Revenue and Expenses (7)	he (a) Revenue and	d	(b) Net inve	estment	/n\	Adjusted net	(d) Disbursements for charitable		
		total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in	expenses per		incom	•	(0)	income	purposes		
_		column (a) (see instructions))	books						(cash basis only)		
	1	Contributions, gifts, grants, etc., received (attach schedule)	-						· · · · · · · · · · · · · · · · · · ·		
	2	Check Lattach Sch B					_				
	3	Interest on savings and temporary cash investment		22.		222.	_	222.	ATCH 1		
	4	Dividends and interest from securities \dots	. 14,9	81.	1	4,981.		14,981.	ATCH 2		
	5 a	Gross rents	•						·		
	b	Net rental income or (loss)		F 4					<u> </u>		
e e	6a	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all 193.03	41,5	51.			-				
Revenue	0	Gross sales price for all assets on line 6a 193, 03	·			7 551			····		
36	7	Capital gain net income (from Part IV, line 2)			4	1,551.					
_	8	Net short-term capital gain									
	9	Income modifications · · · · · · · · · · · · · · · · · · ·	•			-					
		and allowances · · · ·									
		Less Cost of goods sold .									
		Gross profit or (loss) (attach schedule)		41.		-941.		-941.			
	11	Other income (attach schedule) ATCH. 3.	·		5	5,813.		14,262.			
_	12	Total. Add lines 1 through 11		0		3,013.		11/2021	·		
	13	WENT -	•								
Ses	14	Ponsion plans completes benefits	•								
ë	15	Pension plans, employee benefits. Legal (etalah schedule) 2014	•								
X	14 15 16a b c 17 18 19	Accounting fees (attach schedule) ATOH	1,2	30.		1,230.		1,230.			
9	_	Other professment face (attach charing)	•		<u></u>			-,			
ativ	17	Other professional fees (attach schedule).	1	04.		104.		104.			
str	12	Taxes (attach schedule) (see instructions) ATCH 6	•	55.		15.		15.			
Ē	10	Depreciation (attach schedule) and depletion	•								
þ	20	Occupancy	·								
ρ	21	Travel, conferences, and meetings									
an	21 22 23 24	Printing and publications	— · — — — — — — — — — — — — — — — — —								
lng	23	Other expenses (attach schedule) ATCH . 7.	1	21.		21.		21.			
rat	24	Total operating and administrative expense									
þ	- '	Add lines 13 through 23	1,5			1,370.		1,370.			
O	25	Contributions, gifts, grants paid	1	55.					33,955		
	26	Total expenses and disbursements. Add lines 24 and 2	25.4	65.		1,370.		1,370.	33,955		
_	27	Subtract line 26 from line 12									
	1	Excess of revenue over expenses and disbursements	20,3	48.							
		Net investment income (if negative, enter -0)		5	4,443.					
_	С	Adjusted net income (if negative, enter -0-).	.1					12,892.			

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Б	art li	Polones Chesto	Attached schedules and amounts in the	Beginning of year	End	of year 💃 🍎 🎉
۲	aitii		description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bear	ng			
	2	Savings and temporary	cash investments	14,486.	40,587	. 40,587
	3	Accounts receivable				
			btful accounts ►			
	4	Pledges receivable ▶_				
			btful accounts ▶			
	5	Grants receivable				
	6	Receivables due from	officers, directors, trustees, and other			
		disqualified persons (at	tach schedule) (see instructions)			<u> </u>
	7	Other notes and loans r	eceivable (attach schedule)			
		Less allowance for dou	btful accounts ▶			
ts			e			
ssets	9	Prepaid expenses and d	eferred charges ATCH 8	409.	269	. 269
Ä			e government obligations (attach schedule)			
			stock (attach schedule) ATCH 9	370,803.	372,352	562,112
			bonds (attach schedule)			
	11	Investments - land, building and equipment basis Less accumulated deprecia (attach schedule)	s, -			
ĺ		· ·	loans			
		Investments - other (atta	ach schedule) ATCH 10	67,618.	59,653	. 65,411
		Land, buildings, and equipment, basis	>			
		Less accumulated deprecia (attach schedule)	tion >			
	15	Other assets (describe	ATCH 11)	172.	975	975
			completed by all filers - see the			
		instructions Also, see p	age 1, item I)	453,488.	473,836	669,354
	17	Accounts payable and a	ccrued expenses			
S						
Liabilities			ors, trustees, and other disqualified persons	" — <u>"</u>		1
abi			ites payable (attach schedule)			
			• -)			
		•				,
	23	Total liabilities (add line	s 17 through 22)	O	(þ
s			low SFAS 117, check here . >		 	1
0	24	Unrestricted				
lar	25					
ä	26					1
Net Assets or Fund Balance		•	not follow SFAS 117, ▶ X			7
Ē			plete lines 27 through 31.			
ō	27		cipal, or current funds	438,421.	432,005	<u>,</u>
ets	28		land, bidg , and equipment fund			1
155	29		ulated income, endowment, or other funds	15,067.	41,831	
et/	30	•	I balances (see instructions)	453,488.	473,836	
ž	31		net assets/fund balances (see			
		instructions)	· · · · · · · · · · · · · · · · · · ·	453,488.	473,836	
P			inges in Net Assets or Fund			
_			palances at beginning of year - Part		ust agree with	
•			ed on prior year's return)		- 1	453,488
2	Ente	er amount from Part I	line 27a		2	20,348
3	Othe	er increases not include	ded in line 2 (itemize) ▶			
Δ	hhA	lines 1, 2, and 3	,		4	473,836
5	Dec	reases not included in	line 2 (rtemize) ▶	• • • • • • • • • • • • • • • • • • • •	5	
			alances at end of year (line 4 minus	line 5) - Part II. column (b)		473,836

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List an 2-story b	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)		
1a SEE PART IV SCHE	DULE				
b					
с		- · · · <u> · · · · · · · · · · · ·</u>			
d		·			
_e			<u> </u>		
(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	
a					
b					
_c					
d					
е					
Complete only for assets	showing gain in column (h) and owner	d by the foundation on 12/31/69] (1)	Gains (Col. (h) ga	ain minus
(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		(k), but not less t Losses (from co	han -0-) or
a					
b					
c	_				
d					
e					
2 Capital gain net income or	'I DOT CADITAL IOSE)	gain, also enter in Part I, line 7 (loss), enter -0- in Part I, line 7	2		41,551.
3 Net short-term capital gair	n or (loss) as defined in sections 12				
	rt I, line 8, column (c) (see insti	,			
5		i i i i i i i i i i i i i i i i i i i	3		0
	Under Section 4940(e) for Rec		ncome	-	
	leave this part blank the section 4942 tax on the distrib not qualify under section 4940(e)		ase period	<u> </u>	Yes X No
	ount in each column for each year		any onte	05	
(a)			any entri	es. (d)	
Base penod years	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets		Distribution ra	
Calendar year (or tax year beginning in) 2012	49,356.	654,942.		(col (b) divided by	0.075359
2012	29,880.	654,678.			0.045641
2010	111,926.	671,419.			0.166701
2009	21,428.	578,913.			0.037014
2008	28,235.	706,511.			0.039964
2000		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	T T		
2 Total of line 1, column (d)	1		2		0.364679
3 Average distribution ratio)	the total on line 2 by 5, or by the		- -	
_	dation has been in existence if less		3		0.072936
4 Enter the net value of nor	ncharitable-use assets for 2013 fro	m Part X, line 5	4		671,841.
5 Multiply line 4 by line 3			5		49,001.
6 Enter 1% of net investme	ent income (1% of Part I, line 27b)		6		544.
7 Add lines 5 and 6			7		49,545.
8 Enter qualifying distribution	one from Part VII. line 4		8 hat part	using a 1% tax	33,955.

Par	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	instru	ctions	s) *
1 a	Exempt operating foundations described in section 4940(d)(2), check here		•	
	Date of ruling or determination letter (attach copy of letter if necessary - see instructions)		-	
þ	Domestic foundations that meet the section 4940(e) requirements in Part V, check		1,0	89.
	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			
	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	·	1,0	00
3	Add lines 1 and 2		1,0	09.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 4		1,0	
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 269.			
a b	Exempt foreign organizations - tax withheld at source 6b			
C	Tax paid with application for extension of time to file (Form 8868) 6c			
ď	Backup withholding erroneously withheld			
7	Total credits and payments Add lines 6a through 6d		2	69.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		8	20.
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			
1a	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		X
þ	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the		ĺ	
	definition)?	1b		X
	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		ĺ	v
	Did the foundation file Form 1120-POL for this year?	1c		<u>X</u>
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year		ļ	
	(1) On the foundation \$ (2) On foundation managers \$		ĺ	
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers > \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		Х
2	If "Yes," attach a detailed description of the activities			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation,			
	or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		Х
4 a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
	If "Yes," attach the statement required by General Instruction T		1	
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either		Ì	
	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	X	
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		
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			
	If the engineer is "Very" to line 7, has the foundation from the description of Form 200 DF to the August County (
D	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)	0.	x	
Ω	of each state as required by General Instruction G ² If "No," attach explanation	8b		
9	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		Х
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and			
	addresses	10		X

charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2013?

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

Form 990-PF (2013) Page 7 Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, Part VIII and Contractors (continued) Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE." 3 (a) Name and address of each person paid more than \$50,000 (b) Type of service (c) Compensation N/A 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 Expenses organizations and other beneficianes served, conferences convened, research papers produced, etc 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 NONE

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Total. Add lines 1 through 3

Form 990-PF (2013) Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes 673,602. Average monthly fair market value of securities 1a b Average of monthly cash balances 8,470. c Fair market value of all other assets (see instructions) 1c Total (add lines 1a, b, and c) 1d 682,072. Reduction claimed for blockage or other factors reported on lines 1a and Acquisition indebtedness applicable to line 1 assets 2 Subtract line 2 from line 1d 682,072. Cash deemed held for charitable activities. Enter 1 1/2 % of line 3 (for greater amount, see 10,231. 4 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4. 671,841. 5 33,592. Minimum investment return. Enter 5% of line 5 Part XI Distributable Amount (see instructions) (Section 4942(1)(3) and (1)(5) private operating foundations and certain foreign organizations check here \(\bigcup \) and do not complete this part.) 33,592. Minimum investment return from Part X, line 6 Tax on investment income for 2013 from Part VI, line 5 1,089. b Income tax for 2013. (This does not include the tax from Part VI.) Add lines 2a and 2b 1,089. 32,503. Distributable amount before adjustments Subtract line 2c from line 1 Recoveries of amounts treated as qualifying distributions 4 32,503. Add lines 3 and 4 5 Deduction from distributable amount (see instructions) 6 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, 32,503. Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes Expenses, contributions, gifts, etc - total from Part I, column (d), line 26 33,955. 1a Program-related investments - total from Part IX-B 1b Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., Amounts set aside for specific charitable projects that satisfy the Suitability test (prior IRS approval required) Cash distribution test (attach the required schedule) Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 33,955. Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions)

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

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6

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

Adjusted qualifying distributions. Subtract line 5 from line 4

Form 990-PF (2013) Page 9 Part XIII Undistributed Income (see instructions) (a) (b) (c) (d) Corpus Years prior to 2012 2012 2013 Distributable amount for 2013 from Part XI, 32,503. Undistributed income, if any, as of the end of 2013 a Enter amount for 2012 only . . . b Total for prior years 20_11_,20_10_,20_09 Excess distributions carryover, if any, to 2013 From 2008 From 2009 78,497. c From 2010 d From 2011 16,889. e From 2012 Total of lines 3a through e 95,386. Qualifying distributions for 2013 from Part XII, line 4 ▶ \$ 33,955. a Applied to 2012, but not more than line 2a . . . b Applied to undistributed income of prior years (Election required - see instructions)..... Treated as distributions out of corpus (Election required - see instructions) 32,503. d Applied to 2013 distributable amount 1,452. e Remaining amount distributed out of corpus . . Excess distributions carryover applied to 2013 ٠ -(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: 96,838. Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income Subtract line 4b from line 2b 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 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 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. 96,838. Subtract lines 7 and 8 from line 6a Analysis of line 9 a Excess from 2009 . . . 78,497. b Excess from 2010 . . .

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Excess from 2011 . . .

d Excess from 2012 . . . e Excess from 2013 . . .

16,889.

1,452.

1	Information	Regarding	Foundation I	Managers.

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

ATTACHMENT 13

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

NONE

Part XV

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2 a Enter the lesser of the ad-

justed net income from Part

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 . d Amounts included in line 2c not used directly for active conduct of exempt activities e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c Complete 3a, b, or c for the alternative test relied upon "Assets" alternative test - enter (1) Value of all assets . (2) Value of assets qualifying under section 4942(j)(3)(B)(i). b "Endowment" alternative testenter 2/3 of minimum investment return shown in Part X. line 6 for each year listed . . . C "Support" alternative test - enter (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) (2) Support from general public and 5 or more exempt organizations provided in section 4942 (J)(3)(B)(m) (3) Largest amount of support from an exempt organization. (4) Gross investment income

Part XIV

2	Information Regarding	Contribution,	Grant, Gift, l	Loan, Schol	arship, etc.,	Programs
---	-----------------------	---------------	----------------	-------------	---------------	----------

unsolicited requests for funds .If the foundation makes gifts, grants, etc (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

a The name, address, and telephone number or e-mail 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

N/A

c Any submission deadlines

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

N/A

JSA 3E1490 1 000

3 Grants and Contributions Paid Duri	ng the Year or Appr	oved for F	uture Payment	
3 Grants and Contributions Paid Durin Recipient Name and address (home or business)	show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Contribution	
a Paid during the year SCHEDULE ATTACHED 14-15	NONE	PC	CHARITABLE	33,955
	-			
Tatal				23 055
Total	<u> </u>		▶ 3a	33,955.

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Part XVI-A Analysis of Income-Produ	ucing Activ	/ities			•
Enter gross amounts unless otherwise indicated	Unrel	ated business income	Excluded by	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)
•			·		(Occ madodons)
ab					
С					
d					
е					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments			14	222.	
4 Dividends and interest from securities			14	14,981.	
5 Net rental income or (loss) from real estate					<u> </u>
a Debt-financed property					
b Not debt-financed property	<u> </u>				
6 Net rental income or (loss) from personal property	- · · · · · · · · · · · · · · · · · · ·		18	-941.	
7 Other investment income			10	-941.	41,551.
8 Gain or (loss) from sales of assets other than inventory					11,331.
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory	ļ				
11 Other revenue a					
ь					
d					
e					
12 Subtotal Add columns (b), (d), and (e)				14,262.	41,551.
13 Total. Add line 12, columns (b), (d), and (e).				13	55,813.
Part XVI-B Relationship of Activities Line No. Explain below how each activit accomplishment of the foundation	y for which	n income is reported	ın column (e	e) of Part XVI-A contribu	
				<u> </u>	
		··			
					· · · · · · · · · · · · · · · · · · ·
		_		 	
		<u> </u>			
		 	···		
					
					
			<u>-</u> -		
					
	·	· ····································			
		· · · · · · · · · · · · · · · · · · ·			
		 ·· 			
		····	·· · · · · · · · · · · · · · · · · · ·	 	

Part	XVII,	Exempt Orga	egarding II nizations	ransfers to and	Transacti	ions a	ind Relation	ships With No	nchari	itable	•
1 [old the			engage in any of	the following	a with	any other orga	anization described		Yes	No
				section 501(c)(3)						165	NO
		ations?		, , , , , , , , , , , , , , , , , , , ,	organization.	, 0	50000011 027,	relating to politica	'		
	-		ng foundation t	o a noncharitable e	xempt organ	nzation	of·				
									1a(1)		Х
ì	2) Oth	er assets					• • • • • • •		1a(2)		Х
		ransactions:							14(2)		
			ncharitable ev	empt organization .					4 5 (4)		х
,	1) Duk 2) Dur	chases of assets fr	om a nonchari	table exempt organiz					1b(1)		X
,	2) Par	atal of facilities equ	enment or othe	r accote	allon				ł		-
1	A) Dau	mburcoment arrang	ipment, or othe	r assets			• • • • • • •		1b(3)		$\frac{x}{x}$
	5) i ca	ne or loan quarante					• • • • • • •		1b(4)		<u>x</u>
1	s) Lua s) Dori	formance of service	co	bip or fundrousing o	· · · · · · · ·	• • • •	• • • • • • •		1b(5)		- <u>x</u>
, ,	barina	of facilities aguer	es of members	hip or fundraising se	olicitations .		• • • • • • • •		1		- <u>x</u>
ا ا	haring	ror racilities, equipi	nent, maiing ii	sts, other assets, or	paid employ	rees	0-1		1c	<u> </u>	
Q II	ه عانا	f the goods other	accets or son	es," complete the concess given by the	ronowing sc	nequie	Column (b)	snould always sno	w the	tair m	arket
				ngement, show in c							
(a) Line		(b) Amount involved									
(a) Line	:110	N/A	(c) Name of	noncharitable exempt on	ganization	N/A		fers, transactions, and sh	anng ama	ngemer	nts
	-	N/A				N/A	·				
											
	-		<u> </u>								
									-		
	-			· · · · · ·							
			 								
		-		· · · · · · · · · · · · · · · · · · ·							
			ļ					 			
				······································							
_											
_											
2a is	the f	oundation directly	or indirectly a	ffiliated with, or re	lated to, one	e or me	ore tax-exemp	t organizations			
d	escrib	ed in section 501(c)	of the Code (d	other than section 5	01(c)(3)) or	ın secti	on 527?		Ye	es X	No
b If	"Yes,	complete the follo	wing schedule				_				
		(a) Name of organization	n	(b) Type of	organization			(c) Description of relation	iship		
		· ·-									
					· · ·				-		
	Under	penalties of penjury, I decia	are that I have exam	nned this return, including	accompanying sci	hedules ar	nd statements, and	to the best of my knowled	ige and b	elief, it	ıs true,
Sign	correct,	and complete Declaration of	r preparer (omer man	taxpayer) is based on all info	rmation of which p	oreparer ha	s any knowledge				
-		////m/	1/2	66	/14	W2	W PRE		S discussoreparer s		
lere	Signa	dure of officer or trustee		Date		Title		(see instruction	7.7		No
								(355 3.55 666		J ~ C	
	<u> </u>	Print/Type preparer's na	me	Preparer's signatur) 	_	Date ,	Check If	PTIN	 -	
Paid	:	PHILIP R BAKE	R	frus 11	al-		5/30/0	1 self-employed	P000	1069	2
^o repa				ROOKS & LEWIS	, CHTD		111	Firm's EIN ▶ 52-1			
Jse C	_ L		01 WISCONS		,		· · · · · · · · · · · · · · · · · · ·	THINSEIN PULL			
-		•		4D		2	0814-4805	Phone no 301-6	54-90	იიი	
								LEUDUR UD DOT			

Form **990-PF** (2013)

NORMAN & FLORENCE BRODY

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

CA	APITAL GAI	NS AND LO	SSES FOR	R TAX ON	INVEST	M	ENT INCOM	IE
Kind of P			Descr	ription		or D	Date acquired	Date sold
Gross sale price less expenses of sale	Depreciation allowed/ allowable	Cost or other basis	FMV as of 12/31/69	Adj basis as of 12/31/69	Excess of FMV over adj basis		Gain or (loss)	
		TOTAL SHORT PARTNERSHIP ESTATES OR	, S CORPORA	TION, AND C			4.	
		TOTAL LONG- PARTNERSHIP ESTATES OR	, S CORPORA	TION, AND C			990.	
		TOTAL CAPIT	AL GAIN DIS	TRIBUTIONS			3,445.	
		800 BOSTON PROPERTY TY				P	06/17/1997	06/04/2013
21,413.		4,749.					16,664.	
		SPDR GOLD TI		IES		P	09/25/2007	06/04/2013
19,859.		10,981.					8,878.	
		380 CONOCOPI PROPERTY TY		TES		D	12/19/2007	06/04/2013
22,909.		24,331.	. Bleckii	185			-1,422.	
		320 NEXTERA PROPERTY TY		TEC		D	12/19/2007	06/04/2013
23,855.		22,459.	FE. SECORII	163			1,396.	
		300 SPDR GOI PROPERTY TY		IES		P	09/25/2007	08/02/2013
37,298.		21,961.					15,337.	
		1300 KAYNE A				₽	08/02/2010	10/30/2013
36,623.		31,100.					5,523.	
:	,	1000 BLACKRO				Ρ	05/22/2008	10/30/2013
26,370.		35,548.					-9,178.	
		10 BLACKROCI PROPERTY TY				Ρ	07/15/2008	10/30/2013
264.		350.					-86.	
TOTAL GAIN(I	oss)		• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •	• • • • • • • • •		41,551.	
				•				
		L				Ш		

TEMPORARY CASH INVESTMENTS	
CASH	
TEMPORARY	
NO	
INTEREST	
1	
H	
PART	

FORM 990PF,

ADJUSTED NET INCOME	222.	222.
NET INVESTMENT INCOME	222.	222.
REVENUE AND EXPENSES PER BOOKS	222.	222.
		TOTAL
DESCRIPTION	INTEREST INCOME	

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

ADJUSTED NET INCOME	14,981.	14,981.
NET INVESTMENT INCOME	14,981.	14,981.
REVENUE AND EXPENSES PER BOOKS	14,981.	14,981.
		TOTAL
	1E	
DESCRIPTION	DIVIDEND INCOME	

> - OTHER INCOME PART I FORM 990PF,

EXPENSES PER BOOKS REVENUE

NET INVESTMENT INCOME

ADJUSTED NET INCOME

-941.

-941.

-941.

-941.

DESCRIPTION PARTNERSHIP INCOME

TOTALS

ATTACHMENT 3

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ATTACHMENT
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FEES	
ACCOUNTING	
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PART	
990PF,	
ORM	

CHARITABLE PURPOSES		
ADJUSTED NET INCOME	1,230.	1,230.
NET INVESTMENT INCOME	1,230.	1,230.
REVENUE AND EXPENSES PER BOOKS	1,230.	1,230.
·		TOTALS
DESCRIPTION	ACCOUNTING FEES	

ATTACHMENT 5

- INTEREST EXPENSE FORM 990PF, PART I

ADJUSTED NET INCOME	104.	104.
NET INVESTMENT INCOME	104.	104.
REVENUE AND EXPENSES PER BOOKS	104.	104.
		TOTALS
DESCRIPTION	INVESTMENT INTEREST	

FORM 990PF, PART I - TAXES

ADJUSTED NET INCOME	15.	15.
NET INVESTMENT INCOME	15.	15.
REVENUE AND EXPENSES PER BOOKS	140.	155.
		TOTALS
DESCRIPTION	EXCISE TAX FOREIGN TAX	

FORM 990PF, PART I - OTHER EXPENSES

ADJUSTED NET INCOME 6.	21.
NET INVESTMENT INCOME 6.	21.
REVENUE AND EXPENSES PER BOOKS 6.	21.
	TOTALS
DESCRIPTION BANK CHARGES MISCELLANEOUS	

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ACHMENT
ATTA(

CHARGES	
S AND DEFERRED CHARGES	
AND	
D EXPENSES	
PREPAID	
- I	
PART II	
990PF,	
FORM	

ENDING	269.
ENDING BOOK VALUE	269.
DESCRIPTION	PREPAID TAXES

269.

269.

TOTALS

52-1665263

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ATTACHMENT

- CORPORATE STOCK FORM 990PF, PART II

ENDING <u>FMV</u>	40,148. 41,406. 27,980. 56,271. 20,764. 2,744. 30,970. 28,496. 70,256. 54,683. 27,140. 23,139. 18,870. 10,835. 26,999.	562,112.
ENDING BOOK VALUE	9,498. 30,882. 21,040. 11,597. 33,298. 15,562. 43,280. 18,456. 29,280. 34,563. 14,961. 14,961.	372, 352.
		TOTALS
DESCRIPTION	BOSTON PROPERTIES DUKE ENERGY HEWLETT PACKARD IBM INTEL CORP MARRIOTT CORP MARRIOTT VACATIONS WORLDWIDE PFEIZER INC QUALCOMM CORP SPECTRA ENERGY TEXAS INSTRUMENTS WALLGREEN CHESAPEAKE ENERGY PHILLIPS 66 FREEPORT MACMORAN GOLDCORP INC ONEOK INC	IOI

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INVESTMENTS	
- OTHER	
- II	
PART	
FORM 990PF, PART	

Z	BLACKSTONE GROUP	CARLYLE GROUP	ENERGY TRANSFER PARTNERS

JG ALUE		
ENDIN BOOK VA	DIN	

ENDING	7, 24, 32,
VALUE	14,296. 20,388. 24,969.

65,411.

59,653.

TOTALS

ATTACHMENT 10

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FORM 990PF, PART II - OTHER ASSETS

DESCRIPTION

OTHER ASSETS

ENDING BOOK VALUE

ENDING

975.

975.

975.

975.

TOTALS

.9F 02501

0700DH F854 5/28/2014 6:14:54 AM V 13-4.9F

TRUSTEES	
AND	
DIRECTORS,	
IST OF OFFICERS,	
OF	
LIST	
	I
VII	
PART VIII	
990PF,	
FORM	

•			
EXPENSE ACCT AND OTHER ALLOWANCES	O	0	0
CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	0	0	0
COMPENSATION	0	0	0
TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	PRESIDENT .25	VICE PRESIDENT / TREASURER .25	VICE PRESIDENT.25
NAME AND ADDRESS	FLORENCE BRODY 5610 WISCONSIN AVENUE 1507 CHEVY CHASE, MD 20815-4440	WILLIAM BRODY 3803 TIMBER VIEW WAY REISTERSTOWN, MD 21136	DEIDRE LIPSICAS 3803 TIMBER VIEW WAY REISTERSTOWN, MD 21136

GRAND TOTALS

FORM 990PF, PART XV - INFORMATION REGARDING FOUNDATION MANAGERS

FLORENCE BRODY WILLIAM BRODY

SCHEDULE P (Form 1041)

Department of the Treasury Internal Revenue Service

Capital Gains and Losses

► Attach to Form 1041, Form 5227, or Form 990-T.

▶ Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9 and 10.

Information about Schedule D and its separate instructions is at www.irs.gov/form1041.

OMB No 1545-0092

Name of estate or trust

NORMAN & FLORENCE BRODY

Employer identification number

FAMILY FOUNDATION, INC.

52-1665263

				1 32 10032	. 0 5	
	: Form 5227 filers need to complete only Parts I and II.					
Pai	· · · · · · · · · · · · · · · · · · ·	ets Held One Yea	r or Less	, 		·
the I This	instructions for how to figure the amounts to enter on ines below. form may be easier to complete if you round off cents	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustment to gain or loss Form(s) 8949, F line 2, column	from Part I,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
-	hole dollars			1116 2, Column	(9)	column (g)
1a	Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions) However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b				,	
1b	Totals for all transactions reported on Form(s) 8949 with Box A checked					
_	Totals for all transactions reported on Form(s) 8949 with Box B checked					
3	Totals for all transactions reported on Form(s) 8949 with Box C checked					
4	Short-term capital gain or (loss) from Forms 4684, 62	252, 6781, and 8824			4	
5	Net short-term gain or (loss) from partnerships, S cor	porations, and other	estates or trusts		5	4.
6	Short-term capital loss carryover Enter the amount Carryover Worksheet	nt, if any, from line	e 9 of the 2012	Capital Loss	6	()
7	Net short-term capital gain or (loss). Combine line 17, column (3) on the back	s 1a through 6 in	column (h) Enter I	here and on	7	4.
Par	Long-Term Capital Gains and Losses - Ass	ets Held More Tha	an One Year			
the I This	instructions for how to figure the amounts to enter on ines below form may be easier to complete if you round off cents hole dollars	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss f Form(s) 8949, P line 2, column	rom art II,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
8a	Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions) However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b				-	
	Totals for all transactions reported on Form(s) 8949 with Box D checked					
	Totals for all transactions reported on Form(s) 8949 with Box E checked	188,591.	151,479.			37,112.
	Totals for all transactions reported on Form(s) 8949 with Box F checked				_	
11	Long-term capital gain or (loss) from Forms 2439, 46	84, 6252, 6781, and	i 8824		11	
12	Net long-term gain or (loss) from partnerships, S corp	orations, and other e	states or trusts		12	990.
13	Capital gain distributions				13	3,445.
14	Gain from Form 4797, Part I				14	
15	Long-term capital loss carryover Enter the amount Carryover Worksheet	i, if any, from line	14 of the 2012	Capital Loss	15	()
16	Net long-term capital gain or (loss). Combine lines line 18a, column (3) on the back	8a through 15 in	column (h). Enter I	nere and on	16	41,547.
E or E	anapwork Reduction Act Notice, see the Instructions for For				— <u> </u>	

Schedule D (Form 1041) 2013

	D (Form 1041) 2013						Page
Part I			(1) Benefic		(2) Es		(3) Total
47 N	Caution: Read the instructions before completing this pa		(see inst	r.)	or tru	JST S	4.
	et short-term gain or (loss) , ,	17					4.
		10-		- 1			41,547.
a it	otal for year	18a 18b					31/34/.
	3% rate gain	18c					
	otal net gain or (loss). Combine lines 17 and 18a	19					41,551.
	If line 19, column (3), is a net gain, enter the gain on Form 1041, line 4		rm 990-T. Part	I. line 4	a) If lines	18a and 1	
gaıns, g	o to Part V, and do not complete Part IV If line 19, column (3), is a n	et loss	, complete Pa	rt IV and	the Capit	tal Loss Ca	arryover Worksheet, a
necessar Part I							
	nter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, F	Part I Ju	ne Ac if a trust'	the em	allor of	 	
a Ti	the loss on line 19, column (3) or b \$3,000		ne 40, ii a ii dat,	, the s ii		20 ()
Note: /	If the loss on line 19, column (3), is more than \$3,000, or if Form 1041,	page	1, line 22 (or l	orm 990	-T, line 34		, complete the Capita
	Tyover Worksheet in the instructions to figure your capital loss carryover						
Part V			2) 000 0000				Port Los Port II on
	041 filers. Complete this part only if both lines 18a and 19 in cole an entry on Form 1041, line 2b(2), and Form 1041, line 22, is more			or an ar	nount is e	enterea in	Part For Part II and
	n: Skip this part and complete the Schedule D Tax Workshee t in the i						
	er line 18b, col. (2) or line 18c, col. (2) is more than zero, or						
	Form 1041, line 2b(1), and Form 4952, line 4g are more than zero.						
Form 9	90-T trusts. Complete this part only if both lines 18a and 19 a	re ga	ns, or qualifi	ed divid	ends are	ıncluded	in income in Part
	1 990-T, and Form 990-T, line 34, is more than zero. Skip this part	and c	omplete the	Schedul	e D Tax V	Vorkshe	at in the instructions
if either	r line 18b, col (2) or line 18c, col. (2) is more than zero						
21 E	nter taxable income from Form 1041, line 22 (or Form 990-T, line 3	34)	21				
22 Ei	nter the smaller of line 18a or 19 in column (2)]	
þι	ut not less than zero	_					
	nter the estate's or trust's qualified dividends						
fre	om Form 1041, line 2b(2) (or enter the qualified]]	
dr	vidends included in income in Part I of Form 990-T) 23						
24 A	dd lines 22 and 23						
25 If	the estate or trust is filing Form 4952, enter the						
ar	mount from line 4g, otherwise, enter -0 25						
26 Si	ubtract line 25 from line 24 If zero or less, enter -0		26				
27 Si	ubtract line 26 from line 21. If zero or less, enter -0		27				
	nter the smaller of the amount on line 21 or \$2,450		28				
29 Eı	nter the smaller of the amount on line 27 or line 28		29]	
	ubtract line 29 from line 28. If zero or less, enter -0- This amount is				▶	30	
	nter the smaller of line 21 or line 26					} }	
32 Si	ubtract line 30 from line 26		32				
	nter the smaller of line 21 or \$11,950						
	dd lines 27 and 30						
	ubtract line 34 from line 33 ff zero or less, enter -0						
	nter the smaller of line 32 or line 35						
37 M	ultiply line 36 by 15%		, ,		🕨	37	·
	nter the amount from line 31						
39 A	dd lines 30 and 36		39			[
	ubtract line 39 from line 38. If zero or less, enter -0]	
	ultiply line 40 by 20%		l i		🗲	41	
42 Fi	gure the tax on the amount on line 27 Use the 2013 Tax Rate Schedule for I	Estates					
	nd Trusts (see the Schedule G instructions in the instructions for Form 1041)						
43 A	dd lines 37, 41, and 42		43				

Figure the tax on the amount on line 21 Use the 2013 Tax Rate Schedule for Estates and Trusts (see the Schedule G instructions in the instructions for Form 1041)....

G, line 1a (or Form 990-T, line 36)

Tax on all taxable income. Enter the smaller of line 43 or line 44 here and on Form 1041, Schedule

Social security number or taxpayer Identification number

52-1665263

NORMAN & FLORENCE BRODY

Most brokers issue their own substitute statement instead of using Form 1099-B. They also may provide basis information (usually your cost) to you on the statement even if it is not reported to the IRS. Before you check Box D, E, or F below, determine whether you received any statement(s) and, if so, the transactions for which basis was reported to the IRS. Brokers are required to report basis to the IRS for most stock you bought in 2011 or later

Part II

Long-Term. Transactions involving capital assets you held more than one year are long term. For short-term transactions, see page 1.

Note. You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the total directly on Schedule D, line 8a; you are not required to report these transactions on Form 8949 (see instructions).

You must check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

- (D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)
- (E) Long-term transactions reported on Form(s) 1099-B showing basis was not reported to the IRS

(F) Long-term transactions not reported to you on Form 1099-B

(a) Description of property	(b) Date acquired	(c) Date sold or disposed	(d) Proceeds (sales price)	(e) Cost or other basis See the	Adjustment, if any, to gain or loss. If you enter an amount in column (g), enter a code in column (f) See the separate instructions.		(h) Gain or (loss). Subtract column (e) from column (d) and
(Example 100 sh XYZ Co)	(Mo , day, yr)	(Mo , day, yr)	(see instructions)	Note below and see Column (e) in the separate instructions	(f) Code(s) from instructions	(g) Amount of adjustment	combine the result with column (g)
800 BOSTON PROPERTIES	06/17/1997	06/04/2013	21,413.	4,749.			16,664.
SPDR GOLD TRUST	09/25/2007	06/04/2013	19,859.	10,981.			8,878.
380 CONOCOPHILLIPS	12/19/2007	06/04/2013	22,909.	24,331.			-1,422.
320 NEXTERA ENERGY	12/19/2007	06/04/2013	23,855.	22,459.			1,396.
300 SPDR GOLD TRUST	09/25/2007	08/02/2013	37,298.	21,961.			15,337.
1300 KAYNE ANDERSON ENERGY	08/02/2010	10/30/2013	36,623.	31,100.			5,523.
1000 BLACKROCK GLOBAL ENERGY	05/22/2008	10/30/2013	26,370.	35,548.			-9,178.
10 BLACKROCK GLOBAL ENERGY	07/15/2008	10/30/2013	264.	350.			-86.
			-				
			-				
2 Totals. Add the amounts in colu (subtract negative amounts) E include on your Schedule D, lin checked), line 9 (if Box E above (if Box F above is checked) ▶	nter each tota e 8b (if Box D	Il here and Dabove is	188,591.	151,479.			37,112

Note. If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment

Norman and Florence Brody Family Foundation, Inc Contributions Paid during 2013

Name and Address ALZHEIMERS DISEASE RESEARCH	Total Amount 500 00
CLARKSBURG, MD	
AMERICAN INSTITUTE FOR CANCER RESEARCH WASHINGTON, DC	500 00
AMERICAN PARKINSON DISEASE ASSOCIATION	500 00
STATEN ISLAND, NY ANTI DEFAMATION LEAGUE	1,000 00
WASHINGTON, DC ALZHEIMERS ASSOCIATION FAIRFAX, VA	500 00
ARTHRITIS FOUNDATION ATLANTA, GA	500 00
BETH ISRAEL CONGREGATION OWINGS MILLS, MD	1,000.00
BETHESDA CHEVY CHASE RESCUE SQUAD BETHESDA, MD	500 00
CHABAD OF OWINGS MILLS OWINGS MILLS, MD	500.00
CHESAPEAKE BAY FOUNDATION ANNAPOLIS, MD	1,500.00
CHESAPEAKE BAY MARITIME MUSEUM ST MICHAELS, MD	1,000 00
CHILDREN'S HOSPITAL WASHINGTON, DC	1,000.00
CHRON'S & COLITIS FOUNDATION NEW YORK, NY	500 00
COAST GUARD FOUNDATION STONINGTON, CT	500 00
FRIENDS OF THE SMITHSONIAN WASHINGTON, DC	90 00
FUEL FUND OF CENTRAL MD BALTIMORE, MD	500 00
GENERAL BREED FUND COLCHESTER, VT	1,500.00
HEBREW HOME OF GREATER WASHINGTON ROCKVILLE, MD	2,000.00
HOUSE OF RUTH WASHINGTON, DC	500 00
JACKSONVILLE UNIVERSITY JACKSONVILLE, FL	5,000 00
JEWISH HISTORICAL SOCIETY WASHINGTON, DC	2,500 00
JEWISH SOCIAL SERVICE AGENCY ROCKVILLE, MD	500 00
KIDS SUPPORT NETWORK GLEN BURNIE, MD	500.00
MAKE A WHISH FOUNDATION PHOENIX, AZ	500.00
METROPOLITAN POLICE BOYS & GIRLS CLUB WASHINGTON, DC	100 00
NATIONAL PARKINSON'S FOUNDATION MIAMI, FL	500 00
PARKINSON'S FOUNDATION MIAMI, FL	500 00
PENN STATE UNIVERSITY STATE COLLEGE, PA	100 00

Norman and Florence Brody Family Foundation, Inc Contributions Paid during 2013

Name and Address PLANNED PARENTHOOD NEW YORK, NY	Total Amount 500 00
SO OTHERS MIGHT EAT	500.00
ROCKVILLE, MD TEMPLE EMANUEL REISTERSTOWN, MD	1,000 00
UNIVERSITY OF MD FUND FOR MEDICINE	1,500 00
BALTIMORE, MD WASHINGTON HEBREW CONGREGATION WASHINGTON, DC	3,565.00
WETA	1,000 00
ARLINGTON, VA WORLD JEWISH CONGRESS NEW YORK, NY	500.00
WOUNDED WARRIOR PROJECT	500 00
JACKSONVILLE, FL YALE SCHOOL OF MEDICINE NEW HAVEN, CT	100 00
Total Contributions	33,955.00

Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

	tment of th al Revenue	e Treasury Service	► Information about Form 88		nstructions is at www.irs.	gov/form8868.		
• If :	you are f	filing for an	Automatic 3-Month Extension, c	omplete o	nly Part I and check th	is box	▶ X	J
If y	you are f	filing for an	Additional (Not Automatic) 3-Mo	onth Exten	sion, complete only Pa	art II (on page 2 of this f	orm)	
Do n	ot compl	lete Part II u	inless you have already been grai	nted an au	tomatic 3-month extens	sion on a previously filed	l Form 8868	
a cor 8868 Retui	poration to requirn for Tuctions)	required to uest an externion of ransfers A For more of	You can electronically file Form to file Form 990-T), or an addition ension of time to file any of the ssociated With Certain Persona details on the electronic filing of the	ial (not aut forms liste I Benefit (ils form, vis	tomatic) 3-month extended in Part I or Part II w Contracts, which must sit www.irs.gov/efile.an	sion of time You can earth the exception of Fo t be sent to the IRS d click on e-file for Chan	electronically file Fon irm 8870, Information in paper format (se	m on
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Part <i>All of</i>	l only ther corp		o file Form 990-T and requesting				▶ □] ns
Name of exempt organization or other filer, see ins			structions		Employer identification number (EIN) or			
	pe or NORMAN & FLORENCE BRODY							
print	t	FAMILY FOUNDATION, INC. 52-1669		52-166526	3			
File by due da	, I manipor, and room or care no man or box, occurrence		Social security number (S	SN)				
filing y		5610 W	ISCONSIN AVENUE					_
retum instruc		• .	or post office, state, and ZIP code For	a foreign ad	dress, see instructions			
		CHEVY (CHASE, MD 20815-4440					-
Ente	r the Ret	turn code f	or the return that this application i	s for (file a	separate application fo	or each return)		<u></u>
Appli	ication			Return	Application		Return	
ls Fo	r			Code	Is For		Code	_
Form 990 or Form 990-EZ		01	Form 990-T (corporat	ion)	07	_		
Form 990-BL		02	Form 1041-A		08			
Form 4720 (individual)		03	Form 4720 (other tha	n individual)	10	_		
Form 990-PF		04	Form 5227					
Form 990-T (sec 401(a) or 408(a) trust)		05	Form 6069			_		
Form 990-T (trust other than above)		06	Form 8870		12	_		
Te If t	elephone the orga this is fo	No ▶ nization do r a Group F	care of FLORENCE BRODY 301 656-9292 es not have an office or place of the section, enter the organization's for	 ousiness in ur digit Gro	FAX No ▶ the United States, checup Exemption Number ((GEN)	If this is]
			eck this box		irt of the group, check t	inis box ▶ [and attach	
			d EINs of all members the extensinatic 3-month (6 months for a cor		aurad ta fila Farm 000	T) outonoion of time		_
1	until_ for the o	 organizatio calendar ye	08/15, 20_14, to file the only seturn for ear 20_13 or ginning	exempt org	ganization return for the	e organization named al		3
•								
2	Change in accounting period							
3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions 3a \$ 269.)
nonrefundable credits See instructions 1 a \$ 26 1 b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and							209	÷
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						3b \$ 269) .	
							÷	
•			Tax Payment System) See instru			, , , ,	3c \$	0
Cauti			make an electronic funds withdrawa		it) with this Form 8868, se	ee Form 8453-EO and Form		_

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

Form 8868 (Rev 1-2014)

instructions