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Form **990-PF**

Department of the Treasury
Internal Revenue Service

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

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

OMB No 1545-0052

2007

For calendar year 2007, or tax year beginning 9/01 **, 2007, and ending** 8/31 **, 2008**

G Check all that apply | Initial return | Final return | Amended return | Address change | Name change

Use the IRS label. Otherwise, print or type. See Specific Instructions.

LISA BETH GERSTMAN FOUNDATION
439 OAK ST
GARDEN CITY, NY 11530-6419

A Employer identification number: 20-0704257

B Telephone number (see the instructions): 516-594-4400

C If exemption application is pending, check here ►

D 1 Foreign organizations, check here ►
2 Foreign organizations meeting the 85% test, check here and attach computation ►

E If private foundation status was terminated under section 507(b)(1)(A), check here ►

F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ►

H Check type of organization [X] Section 501(c)(3) exempt private foundation
[ ] Section 4947(a)(1) nonexempt charitable trust [ ] Other taxable private foundation

I Fair market value of all assets at end of year (from Part II, column (c), line 16) ► $ 242,016.

J Accounting method [X] Cash [ ] Accrual [ ] Other (specify) _____
(Part I, column (d) must be on cash basis)

Part I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see the instructions))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
REVENUE	1 Contributions, gifts, grants, etc, received (att sch)	187,673.			
	2 Ck ► [ ] if the foundn is not req to att Sch B				
	3 Interest on savings and temporary cash investments	7,441.	7,441.	N/A	
	4 Dividends and interest from securities				
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain/(loss) from sale of assets not on line 10				
	b Gross sales price for all assets on line 6a				
	7 Capital gain net income (from Part IV, line 2)				
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
	b Less: Cost of goods sold				
	c Gross profit/(loss) (att sch)				
	11 Other income (attach schedule) SEE STATEMENT 1	39,830.			
	12 **Total.** Add lines 1 through 11	234,944.	7,441.		
OPERATING AND ADMINISTRATIVE EXPENSES	13 Compensation of officers, directors, trustees, etc	0.			
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)				
	b Accounting fees (attach sch) SEE ST 2	1,710.	110.		1,600.
	c Other prof fees (attach sch) SEE ST 3	288.			288.
	17 Interest				
	18 Taxes (attach schedule) SEE STMT 4	69.			
	19 Depreciation (attach sch) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings	1,305.			1,305.
	22 Printing and publications	1,933.			1,933.
	23 Other expenses (attach schedule) SEE STATEMENT 5	50,482.	1,230.		2,028.
	24 **Total operating and administrative expenses.** Add lines 13 through 23	55,787.	1,340.		7,154.
	25 Contributions, gifts, grants paid PART XV	171,064.			171,064.
	26 **Total expenses and disbursements.** Add lines 24 and 25.	226,851.	1,340.		178,218.
	27 Subtract line 26 from line 12:				
	a **Excess of revenue over expenses and disbursements**	8,093.			
	b **Net investment income** (if negative, enter -0-)		6,101.		
	C **Adjusted net income** (if negative, enter -0-)				

SCANNED MAR 18 2009

Part II Balance Sheets (Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions))		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
ASSETS	1 Cash — non-interest-bearing	83,542.	88,931.	88,931.
	2 Savings and temporary cash investments	150,381.	153,085.	153,085.
	3 Accounts receivable ►			
	Less: allowance for doubtful accounts ►			
	4 Pledges receivable ►			
	Less: allowance for doubtful accounts ►			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see the instructions)			
	7 Other notes and loans receivable (attach sch) ►			
	Less: allowance for doubtful accounts ►			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments — U S and state government obligations (attach schedule)			
	b Investments — corporate stock (attach schedule)			
	c Investments — corporate bonds (attach schedule)			
	11 Investments — land, buildings, and equipment: basis ►			
	Less: accumulated depreciation (attach schedule) ►			
	12 Investments — mortgage loans			
	13 Investments — other (attach schedule)			
	14 Land, buildings, and equipment: basis ►			
	Less: accumulated depreciation (attach schedule) ►			
	15 Other assets (describe ►)			
	16 **Total assets** (to be completed by all filers — see instructions. Also, see page 1, item I)	233,923.	242,016.	242,016.
LIABILITIES	17 Accounts payable and accrued expenses			
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, & other disqualified persons			
	21 Mortgages and other notes payable (attach schedule)			
	22 Other liabilities (describe ►)			
	23 **Total liabilities** (add lines 17 through 22)	0.	0.	
NET ASSETS OR FUND BALANCES	**Foundations that follow SFAS 117, check here ► ☐ and complete lines 24 through 26 and lines 30 and 31.**			
	24 Unrestricted			
	25 Temporarily restricted			
	26 Permanently restricted			
	Foundations that do not follow SFAS 117, check here ► ☒ and complete lines 27 through 31.			
	27 Capital stock, trust principal, or current funds			
	28 Paid-in or capital surplus, or land, building, and equipment fund			
	29 Retained earnings, accumulated income, endowment, or other funds	233,923.	242,016.	
	30 **Total net assets or fund balances** (see the instructions)	233,923.	242,016.	
	31 **Total liabilities and net assets/fund balances** (see the instructions)	233,923.	242,016.	

Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year — Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	233,923.
2	Enter amount from Part I, line 27a	2	8,093.
3	Other increases not included in line 2 (itemize) ►	3	
4	Add lines 1, 2, and 3	4	242,016.
5	Decreases not included in line 2 (itemize) ►	5	
6	Total net assets or fund balances at end of year (line 4 minus line 5) — Part II, column (b), line 30	6	242,016.

LISA BETH GERSTMAN FOUNDATION 20-0704257

STATEMENT 1
FORM 990-PF, PART I, LINE 11
OTHER INCOME

	(A) REVENUE PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME
INCOME FROM SPECIAL EVENTS	$ 63,300.		
TOTAL	$ 63,300.	$ 0.	$ 0.

STATEMENT 2
FORM 990-PF, PART I, LINE 16B
ACCOUNTING FEES

	(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING	$ 1,935.	$ 135.		$ 1,800.
TOTAL	$ 1,935.	$ 135.		$ 1,800.

STATEMENT 3
FORM 990-PF, PART I, LINE 16C
OTHER PROFESSIONAL FEES

	(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
OTHER PROFESSIONAL FEES	$ 125.			$ 125.
SPECIAL CHILDREN CONSULT	190.			190.
TOTAL	$ 315.	$ 0.		$ 315.

STATEMENT 4
FORM 990-PF, PART I, LINE 18
TAXES

	(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
FEDERAL EXCISE TAX	$ 122.			
TOTAL	$ 122.	$ 0.		$ 0.

ATTACHMENT 1
FORM 3115, PART II, LINE 13
DESCRIPTION OF TRADE OR BUSINESS

THE LISA BETH GERSTMAN FOUNDATION ENABLES CHILDREN WITH PHYSICAL DISABILITIES IN THE NEW YORK CITY METROPOLITAN AREA AND THE NORTHEAST UNITED STATES TO EXPERIENCE SUMMER CAMP. BY PARTNERING WITH EXISTING ACCREDITED CAMPS, THE FOUNDATION AFFORDS FAMILIES THE ABILITY TO SEND CHILDREN INTO INTEGRATED CAMP SETTINGS.

STATEMENT 1
FORM 990-PF, PART I, LINE 11
OTHER INCOME

INCOME FROM SPECIAL EVENTS	$ 39,830.
TOTAL	$ 39,830.

STATEMENT 2
FORM 990-PF, PART I, LINE 16B
ACCOUNTING FEES

	(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING	$ 1,710.	$ 110.		$ 1,600.
TOTAL	$ 1,710.	$ 110.		$ 1,600.

STATEMENT 3
FORM 990-PF, PART I, LINE 16C
OTHER PROFESSIONAL FEES

	(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
SPECIAL CHILDREN CONSULT	$ 288.			$ 288.
TOTAL	$ 288.	$ 0.		$ 288.

STATEMENT 4
FORM 990-PF, PART I, LINE 18
TAXES

	(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
FEDERAL EXCISE TAX	$ 69.			
TOTAL	$ 69.	$ 0.		$ 0.

STATEMENT 5
FORM 990-PF, PART I, LINE 23
OTHER EXPENSES

	(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
BANK CHARGES	$ 2,520.	$ 1,230.		$ 1,290.
INSURANCE	738.			738.
SPECIAL EVENT EXPENSES	47,224.			
TOTAL	$ 50,482.	$ 1,230.		$ 2,028.

STATEMENT 5
FORM 990-PF, PART I, LINE 23
OTHER EXPENSES

	(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
BANK CHARGES	$ 2,629.	$ 1,139.		$ 1,490.
INSURANCE	833.			833.
MISCELLANEOUS	150.			150.
SPECIAL EVENT EXPENSES	49,295.			
TOTAL	$ 52,907.	$ 1,139.		$ 2,473.

STATEMENT 6
FORM 990-PF, PART VIII, LINE 1
LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED	COMPENSATION	CONTRIBUTION TO EBP & DC	EXPENSE ACCOUNT/ OTHER
BRADLEY GERSTMAN 15 MELBY LANE EAST HILLS, NY 11576	DIRECTOR 0	$ 0.	$ 0.	$ 0.
CHERYL GERSTMAN 15 MELBY LANE EAST HILLS, NY 11576	DIRECTOR 0	0.	0.	0.
PAMELA GERSTMAN 8 DELL DRIVE EAST ROCKAWAY, NY 11518	DIRECTOR 0	0.	0.	0.
DANIEL GERSTMAN 8 DELL DRIVE EAST ROCKAWAY, NY 11518	DIRECTOR 0	0.	0.	0.
HARVEY GERSTMAN 36 STONE HILL DRIVE SOUTH MANHASSET, NY 11030	DIRECTOR 0	0.	0.	0.
LINDA GERSTMAN 15 BROAD STREET APT 2310 NEW YORK, NY 10005	DIRECTOR 0	0.	0.	0.
CAROLYN GERSTMAN 36 STONE HILL DRIVE SOUTH MANHASSET, NY 11030	DIREC/TREASURER 0	0.	0.	0.
TOTAL		$ 0.	$ 0.	$ 0.

STATEMENT 7
FORM 990-PF, PART XV, LINE 1A
FOUNDATION MANAGERS - 2% OR MORE CONTRIBUTORS

BRADLEY GERSTMAN
DANIEL GERSTMAN
HARVEY GERSTMAN
LINDA GERSTMAN
CAROLYN GERSTMAN

STATEMENT 8
FORM 990-PF, PART XV, LINE 2A-D
APPLICATION SUBMISSION INFORMATION

NAME OF GRANT PROGRAM:
NAME:
CARE OF:
STREET ADDRESS:
CITY, STATE, ZIP CODE:
TELEPHONE:
FORM AND CONTENT: APPLICATIONS FOR FINANCIAL ASSISTANCE ARE TO BE SUBMITTED THROUGH THE ORGANIZATION'S WEB SITE AT WWW.LISABETHGERSTMAN.ORG FOR CONSIDERATION.
SUBMISSION DEADLINES: NONE
RESTRICTIONS ON AWARDS: APPLICATIONS WILL BE ACCEPTED OR REJECTED BASED ON THE QUALITY AND EFFECTIVENESS OF THE APPLYING ORGANIZATION'S PROGRAMS AND FINANCIAL NEED.

STATEMENT 9
FORM 990-PF, PART XV, LINE 3A
RECIPIENT PAID DURING THE YEAR

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND-ATION STATUS	PURPOSE OF GRANT	AMOUNT
THE CROSS ISLAND YMCA 238-10 HILLSIDE AVENUE BELLEROSE, NY 11426	NONE	501C3	SUMMER CAMP ASSISTANCE	$ 31,000.
PAL-O-MINE EQUESTRIAN 829 OLD NICHOLS ROAD ISLANDIA, NY 11749	NONE	501C3	SUMMER CAMP ASSISTANCE	15,000.
HENRY VISCARDI SCH (ABILITIES) 201 I.U. WILLETS ROAD ALBERTSON, NY 11507	NONE	501C3	BASKETBALL FOR DISABLED	4,000.
PROSPECT PARK YMCA 357 NINTH STREET BROOKLYN, NY 11215	NONE	501C3	SUMMER CAMP ASSISTANCE	14,000.

STATEMENT 9 (CONTINUED)
FORM 990-PF, PART XV, LINE 3A
RECIPIENT PAID DURING THE YEAR

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND-ATION STATUS	PURPOSE OF GRANT	AMOUNT
SAMUEL FIELD YM & YWHA 58-20 LITTLE NECK PARKWAY LITTLE NECK, NY 11362	NONE	501C3	SUMMER CAMP ASSISTANCE	$ 28,000.
THE CHILDREN'S AID SOCIETY'S WAGON ROAD 431 QUAKER ROAD CHAPPAQUA, NY 10514	NONE	501C3	SUMMER CAMP ASSISTANCE	18,000.
AUTISM SPEAKS 2 PARK AVE NEW YORK, NY 10016	NONE	501C3	AUTISM RESEARCH	15,000.
AHRC, NASSAU COUNTY CHAPTER 189 WHEATLEY ROAD ALBERTSON, NY 11507	NONE	501C3	ASSISTANCE FOR DISABLED	250.
CAMP NORTHSTAR 157 MONELL AVENUE ISLIP, NY 11751	NONE	501C3	SUMMER CAMP ASSISTANCE	5,000.
			TOTAL	$ 130,250.

Form **8868**
(Rev April 2009)

Department of the Treasury
Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

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

OMB No 1545-1709

- If you are filing for an **Automatic 3-Month Extension, complete only Part I** and check this box ► [X]
- If you are filing for an **Additional (Not Automatic) 3-Month Extension, complete only Part II** (on page 2 of this form)

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension — check this box and complete Part I only ► [ ]

All other corporations (including 1120-C filers), partnerships, REMICS, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Electronic Filing *(e-file)*. Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T) However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868 For more details on the electronic filing of this form, visit *www irs.gov/efile* and click on *e-file for Charities & Nonprofits*

Type or print

File by the due date for filing your return See instructions

Name of Exempt Organization	Employer identification number
LISA BETH GERSTMAN FOUNDATION	20-0704257

Number, street, and room or suite number If a P O box, see instructions
439 OAK ST

City, town or post office, state, and ZIP code For a foreign address, see instructions
GARDEN CITY, NY 11530-6419

Check type of return to be filed (file a separate application for each return):

[ ] Form 990	[ ] Form 990-T (corporation)	[ ] Form 4720
[ ] Form 990-BL	[ ] Form 990-T (section 401(a) or 408(a) trust)	[ ] Form 5227
[ ] Form 990-EZ	[ ] Form 990-T (trust other than above)	[ ] Form 6069
[X] Form 990-PF	[ ] Form 1041-A	[ ] Form 8870

- The books are in the care of ► TAXPAYER

Telephone No. ► 516-594-4400 FAX No. ►

- If the organization does not have an office or place of business in the United States, check this box ► [ ]
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____ If this is for the whole group, check this box ► [ ] If it is for part of the group, check this box ► [ ] and attach a list with the names and EINs of all members the extension will cover

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until 4/15, 20 10, 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 9/01, 20 08, and ending 8/31, 20 09.

2 If this tax year is for less than 12 months, check reason [ ] Initial return [ ] Final return [ ] Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits See instructions	**3a**	$ 26.
b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made Include any prior year overpayment allowed as a credit	**3b**	$ 26.
c Balance Due. Subtract line 3b from line 3a Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions	**3c**	$ 0.

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions

BAA For Privacy Act and Paperwork Reduction Act Notice, see instructions. Form **8868** (Rev 4-2009)