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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

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

2008

For	ca	lenda	ir year 2008, or tax yea			, and e	naing	JAN 31, 2009		
G	Ch	eck all	I that apply: Ir	nitial return	Final return	Amended retu	ırn L	Address change	Name change	
Us	e the IRS Name of foundation							A Employer identification number		
	lal	label.								
Ot	the	rwise,	LEITER'S I	LANDING FOUN	DATION			65-0708062		
	print Number and street (or P O box number if mail is not delivered to street address) Room/suite							B Telephone number		
(	or t	ype.	1001 BRICK	KELL BAY DRI	VE , 9TH FLO	OR		646-242-04	.05	
		pecifi	City or town state at		·- / · · · · ·		1	C if exemption application is p		
Ins	tru	ctions	MIAMI, FL	33131				D 1. Foreign organizations		
-	Oh.		•	X Section 501(c)(3) ex	annat neuroto (eu-detre-			Foreign organizations me check here and attach co	eeting the 85% test,	
	_		-	· · · · · · · · · · · · · · · · · · ·				check here and attach co	omputation	
_ <u>-</u> _			on 4947(a)(1) nonexem	<del></del>	Other taxable private found			E If private foundation sta	tus was terminated	
			et value of all assets at e	·	-	Accı	ruai	under section 507(b)(1)	(A), check here	
			rt II, col (c), line 16)		her (specify)	t\		F If the foundation is in a		
_	<u></u> \$				mn (d) must be on cash	basis )		under section 507(b)(1)	1	
LP:	ar	<u>t I /</u>	Analysis of Revenue an	mns (b), (c), and (d) may not	(a) Revenue and		vestment	(c) Adjusted net	(0) Disbursements for charitable purposes	
		ì	necessarily equal the amoun	mns (b), (c), and (d) may not its in column (a) )	expenses per books	ince	ome	income	(cash basis only)	
		1 C	ontributions, gifts, grant	ts, etc., received	426,524.			N/A		
		_	-	n is not required to attach Sch. B						
		3 In	terest on savings and tempo ash investments	orary	2,699.		2,699.		STATEMENT 2	
			ividends and interest fro	om securities	18,830.	1	8,830.		STATEMENT 3	
		5a G	ross rents			i				
		_	et rental income or (loss)			1				
			et gain or (loss) from sale of	assets not on line 10	-59,288.		-		STATEMENT 1	
e e		h G	ross sales price for all sets on line 6a	194,712.	00,72001				,	
Revenue	:		sets on line 6a apital gain net income (from				0.			
å	2		et short-term capital gai	· · · · ·		<del> </del>				
			. •	III		-				
	١.	G G	come modifications ross sales less returns			ļ				
	Ι'		nd allowances			<del>                                     </del>				
			ess Cost of goods sold							
	1		ross profit or (loss)		F 2 F		ESE		OM 2 MENTENIO A	
	- 1		ther income		535.	ļ	535.		STATEMENT 4	
_	+		otal. Add lines 1 throug		389,300.	4	2,064.			
	1		ompensation of officers, dire		0.		0.		0.	
	1		ther employee salaries a	•						
U.		15 P	ension plans, employee	benefits				<u>_</u>	<del> </del>	
Se	3   1	16a L	egal fees			<u> </u>				
Expenses		b A	ccounting fees							
		c O	ther professional fees							
<u>8</u>	1	1 <b>7</b> In	nterest					RECEIVE		
rat	1	18 Ta	axes						- U	
<u>.</u>	1	1 <b>9</b> D	epreciation and depletio	on				(C)	10 0	
Ë	2	2 <b>0</b> 0	ccupancy					DI JAN U 4 ZU	IU S	
_ ₽	2 2		ravel, conferences, and	meetings						
2010 and <b>A</b>	2 2		rinting and publications	_				OGDEN.	17	
~ ~	5   2		ther expenses	STMT 5	7,071.		4,521.	<u> </u>	0.	
<b>™</b> .	١,		otal operating and adm		. , , , , , ,					
IN ILI 2010 Operation and Administration	[[		xpenses. Add lines 13 t		7.071.		4,521.		0.	
3 6	۶, اڅ		ontributions, gifts, grant	-	7,071. 231,317.		,		231,317.	
7			otal expenses and disb		231,317.			· · · · · · · · · · · · · · · · · · ·	201,017.	
	1			ruiocilicilio.	238,388.		4,521.		231,317.	
띨	+.		dd lines 24 and 25	. 10.	430,300.		4,041.	ļ	431,31/.	
	ľ		ubtract line 26 from line		150,912.					
$\overline{\mathcal{L}}$			ccess of revenue over expen		150,912.		7 5/2			
SCANNED JAN			et investment income (			<del>                                     </del>	7,543.	NT / 3		
42 <u> </u>	1	C A	djusted net income (# ne	egative, enter -0-)	<u> </u>	<u> </u>		N/A		

823501 01-02-09 LHA For Privacy Act and Paperwork Reduction Act Notice, see the instructions.

Form **990-PF** (2008)

		Balance Sheets Attached schedules and amounts in the description	Beginning of year	End o	f year
L	art II Balance Sheets column should be for end-of-year amounts only (a) Book Value (b) B		(b) Book Value	(c) Fair Market Value	
	1	Cash - non-interest-bearing	3.	322.	322.
	2	Savings and temporary cash investments	232,659.	359,184.	359,184.
	3	Accounts receivable ▶			
		Less: allowance for doubtful accounts			
	4	Pledges receivable			
		Less: allowance for doubtful accounts			
	_	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable			
		Less: allowance for doubtful accounts			
ets		Inventories for sale or use			
Assets		Prepaid expenses and deferred charges			
_		Investments - U.S. and state government obligations Investments - corporate stock STMT 6	431,077.	518,296.	371,170.
			431,077.	310,290.	3/1,1/0•
		Investments - corporate bonds			
	''	Investments - land, buildings, and equipment basis			
	۱,,	Less accumulated depreciation Investments - mortgage loans			
	13	Investments - other STMT 7	245,335.	182,184.	182,184.
		Land, buildings, and equipment: basis	213,000	202,202.	202/2020
	'	Less accumulated depreciation			/
	15	Other assets (describe ► )	<del></del>		
	'`			-	
	16	Total assets (to be completed by all filers)	909,074.	1,059,986.	912,860.
	_	Accounts payable and accrued expenses			
	18	Grants payable			
S	19	Deferred revenue			į
Ě	20	Loans from officers, directors, trustees, and other disqualified persons			1
Liabilities	21	Mortgages and other notes payable			
	22	Other liabilities (describe )		· · · · · · · · · · · · · · · · · · ·	
			•		
	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here			
ç		and complete lines 24 through 26 and lines 30 and 31.	000 074	1 050 006	,
nces	ı	Unrestricted	909,074.	1,059,986.	į.
ala	25	Temporarily restricted			}
or Fund Balar	26	Permanently restricted			į
풀		Foundations that do not follow SFAS 117, check here			,
	27	and complete lines 27 through 31. Capital stock, trust principal, or current funds			1
ets	28	Paid-in or capital surplus, or land, bldg., and equipment fund			
Net Assets	29	Retained earnings, accumulated income, endowment, or other funds	<del></del> .		1
ĕ	30	Total net assets or fund balances	909,074.	1,059,986.	
Z	**	Total not associa of fama baranocs		270007000	
	31	Total liabilities and net assets/fund balances	909,074.	1,059,986.	
Ξ					· · · · · · · · · · · · · · · · · · ·
P	art	Analysis of Changes in Net Assets or Fund B	alances		
1	Tota	net assets or fund balances at beginning of year - Part II, column (a), line	30		
	(mu	st agree with end-of-year figure reported on prior year's return)		1	909,074.
2	Ente	r amount from Part I, line 27a		2	150,912.
		r increases not included in line 2 (itemize)		3	0.
		lines 1, 2, and 3		4	1,059,986.
		eases not included in line 2 (itemize)		5	0.
6	Tota	net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	lumn (b), line 30	6	1,059,986.

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Form **990-PF** (2008)

(a) List and descr	ibe the kind(s) of property sold (e.c	., real estate,	it income	( <b>b)</b> H	ow acquired Purchase		acquired	(d) Date sold
					Purchase Donation	(mo.,	day, yr.)	(mo , day, yr.)
1a CAPITAL GAIN D		STANL	EY	<u> </u>	<u>P</u>			
b MERRILL LYNCH : c MORGAN STANLEY	# 803-1015/			┼	P	<del>                                     </del>		
	·	<del></del>			P	<del> </del>		
e e								
	(f) Depreciation allowed	(a) Co	st or other basis	┰		(b) (	Gain or (loss)	<u> </u>
(e) Gross sales price a 2,056.	(or allowable)		expense of sale	_			us (f) minus (	g)
4.40.460			174,00	<u> </u>			<u> </u>	2,056. -25,537.
t 148,463. c 44,193.			80,00					-35,807.
d ==,133.	· ·	<del> </del>	00,00	,,,,,	,			33,007.
e	<u> </u>		· · <u>- ·- ·-</u>		-			
	g gain in column (h) and owned by	the foundatio	n on 12/31/69			(I) Gains (	Col. (h) gaın	minus
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) E	xcess of col. (i) r col. (j), if any		(	ol. (k), but	not less than s (from col. (l	n -0-) <b>or</b>
a								2.056.
b								2,056. -25,537.
C				-		-		-35,807.
d		l	-					•
e				Ì		<del></del>		
2 Capital gain net income or (net cap	oital loss) { If gain, also ente			}	2			-59,288.
3 Net short-term capital gain or (los				<b>΄</b> Γ				
If gain, also enter in Part I, line 8, of the state of th		iu (o).		}	3		N/A	
Part V Qualification U	nder Section 4940(e) for	Reduced	Tax on Net	Inve	* I	ncome		
If section 4940(d)(2) applies, leave th  Was the foundation liable for the sect  If "Yes," the foundation does not quali  Enter the appropriate amount in e	on 4942 tax on the distributable an	mplete this p	art.					Yes X No
(a)	(b)		I making any ontin	(c)		$\overline{}$		(d) ution ratio
Base periód years Calendar year (or tax year beginnin	g in) Adjusted qualifying dis		Net value of no				Distrib (col. (b) divi	ided by col. (c))
2007		1,600.			823,69	9.		.281171
2006	19	2,689.			588,75			.327283
2005		6,685. 8,450.			417,46			.638815
2004		1,250.			443,31			.386296
2003	<u> </u>	1,230.			443,31	3.	Τ	• 300230
2 Total of line 1, column (d)				,		2		1.867284
3 Average distribution ratio for the 5 the foundation has been in existen		on line 2 by 5,	, or by the number	or yea	18	3	ļ	.373457
4 Enter the net value of noncharitable	e-use assets for 2008 from Part X,	line 5				4		689,906.
5 Multiply line 4 by line 3						5		257,650.
6 Enter 1% of net investment incom	e (1% of Part I, line 27b)					6		175.
7 Add lines 5 and 6						7		257,825.
8 Enter qualifying distributions from	Part XII, line 4					8		231,317.
, , ,	line 7, check the box in Part VI, line	1b, and com	plete that part usin	g a 1%	tax rate.		•	

	m 990-PF (2008) LEITER'S LANDING FOUNDATION			0708			Page 4
Pá	art VI Excise Tax Based on Investment Income (Section 4940	0(a), 4940(b), 4940(e), o	r 4948	- see ii	nstri	uctio	ns)
18	Exempt operating foundations described in section 4940(d)(2), check here 🕨 🔛 and er	nter "N/A" on line 1.					
	Date of ruling letter: (attach copy of ruling letter if necessary-s	see instructions)					i
t	Domestic foundations that meet the section 4940(e) requirements in Part V, check here	and enter 1%	1			3	<u>51.</u>
	of Part I, line 27b						
(	f a All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4%	of Part I, line 12, col. (b)					ا ساس سست
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Other	hers enter -0-)	2				<u>0.</u>
3			_3			3	<u> </u>
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Of	thers enter -0-)	4				0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5	_		3	851.
6	Credits/Payments:	1 1					
	a 2008 estimated tax payments and 2007 overpayment credited to 2008	6a	_				
	Exempt foreign organizations - tax withheld at source	6b	_				
	: Tax paid with application for extension of time to file (Form 8868)	6c	_				:
	1 Backup withholding erroneously withheld	6d	ᆈ -				
7	Total credits and payments. Add lines 6a through 6d		7				0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attack.	ched	8				-1
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		► <u>9</u>				51.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	 	► <u>10</u>				
_	Enter the amount of line 10 to be: Credited to 2009 estimated tax ▶  art VII-A   Statements Regarding Activities	Refunded	<u>►   11</u>				
_						Vaa	INO
18	During the tax year, did the foundation attempt to influence any national, state, or local legisl	lation or did it participate or interv	ene in	ŀ	4.	168	No X
	any political campaign?  Did it spend more than \$100 during the year (either directly or indirectly) for political purpos	una (ann innstructions for definition		ŀ	1a		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and	•		}	1b		A .
	distributed by the foundation in connection with the activities	r copies or any materials publi.	snea or				
,	Did the foundation file Form 1120-POL for this year?				1c		X
	I Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the	vear'		ŀ	16		<del>  ^</del>
١	(1) On the foundation. > \$ 0 • (2) On foundation managers.	=	).				
	Enter the reimbursement (if any) paid by the foundation during the year for political expendit	· · · · · · · · · · · · · · · · · · ·	<del></del>				'
Ì	managers. > \$ 0.	tare tax imposed on redindation					
2	Has the foundation engaged in any activities that have not previously been reported to the IR	357		ľ	2		<b>X</b>
_	If "Yes," attach a detailed description of the activities			Ì			<del></del>
3	Has the foundation made any changes, not previously reported to the IRS, in its governing in	nstrument, articles of incorporatio	n, or	ļ			1
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the change		, -	ľ	3		X
48	Did the foundation have unrelated business gross income of \$1,000 or more during the year			ľ	4a		Х
b	o If "Yes," has it filed a tax return on Form 990-T for this year?		N	/A	4b		<b></b>
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			Ī	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 eit	ther:					l .
	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 s	tate law				_ '
	remain in the governing instrument?			į	6		X
7	Did the foundation have at least \$5,000 in assets at any time during the year?				7	X	
	If "Yes," complete Part II, col (c), and Part XV						
8a	Enter the states to which the foundation reports or with which it is registered (see instruction	ns) ► <u>NONE</u>					
		<u></u>	_				1
b	olf the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the At	torney General (or designate)					
	of each state as required by General Instruction G? If "No," attach explanation			Ļ	8b		X
9	, , ,		alendar	}			;
	year 2008 or the taxable year beginning in 2008 (see instructions for Part XIV)? If "Yes," co			Ĺ	9		X
10	Did any persons become substantial contributors during the tax year? # "Yes." attach a schedul	e listing their names and addresses			10		X
				Form	990	-PF(	(2008)

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11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)  12 Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?  13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application?  Website address ► NONE  14 The books are in care of ► MORRISON, BROWN, ARGIZ & FARRA, LLP Telephone no. ► 305 – 37 Located at ► 1001 BRICKELL BAY DRIVE, 9TH FLOOR,, MIAMI, FL	11 12 13	Х	X
<ul> <li>Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?</li> <li>Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► NONE</li> <li>The books are in care of ► MORRISON, BROWN, ARGIZ &amp; FARRA, LLP Telephone no. ► 305-37 Located at ► 1001 BRICKELL BAY DRIVE, 9TH FLOOR, MIAMI, FL</li> </ul>	12 13	Х	
August 17, 2008?  13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application?  Website address ► NONE  14 The books are in care of ► MORRISON, BROWN, ARGIZ & FARRA, LLP Telephone no. ► 305-37  Located at ► 1001 BRICKELL BAY DRIVE, 9TH FLOOR, MIAMI, FL ZIP+4 ► 33	13	Х	
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application?  Website address ► NONE  14 The books are in care of ► MORRISON, BROWN, ARGIZ & FARRA, LLP Telephone no. ► 305-37  Located at ► 1001 BRICKELL BAY DRIVE, 9TH FLOOR, MIAMI, FL ZIP+4 ►33	13	Х	· •
Website address ► NONE  14 The books are in care of ► MORRISON, BROWN, ARGIZ & FARRA, LLP Telephone no. ► 305-37  Located at ► 1001 BRICKELL BAY DRIVE, 9TH FLOOR,, MIAMI, FL ZIP+4 ► 33		_X_	X
14 The books are in care of ► MORRISON, BROWN, ARGIZ & FARRA, LLP Telephone no. ► 305-37 Located at ► 1001 BRICKELL BAY DRIVE, 9TH FLOOR, MIAMI, FL ZIP+4 ► 33	73-5		<u> </u>
Located at ► 1001 BRICKELL BAY DRIVE, 9TH FLOOR, MIAMI, FL ZIP+4 ►33	13-5		
		500	
The second secon	3 I 3 I		<del></del>
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	37	<b>/</b> ₹	ш
and enter the amount of tax-exempt interest received or accrued during the year    Doct VIII R   Statements Regarding Activities for Which Form 4720 May Re Required	11	/A	
Part VII-B   Statements Regarding Activities for Which Form 4720 May Be Required		Yes	No
File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		162	140
1a During the year did the foundation (either directly or indirectly):  (1) Engage in the sale or exchange, or leasing of property with a disqualified person?  Yes X No			
(1) Engage in the sale of exchange, or leasing of property with a disqualined person?  (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			i '
a disqualified person?			
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			:
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
(5) Transfer any income or assets to a disqualified person (or make any of either available			
for the benefit or use of a disqualified person)?			
(6) Agree to pay money or property to a government official? (Exception. Check "No"			
if the foundation agreed to make a grant to or to employ the official for a period after			
termination of government service, if terminating within 90 days.)			;
b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)?	- 1b		X
Organizations relying on a current notice regarding disaster assistance check here			
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			
before the first day of the tax year beginning in 2008?	1c		X
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			
defined in section 4942(j)(3) or 4942(j)(5)):			,
a At the end of tax year 2008, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
before 2008? Yes X No			;
If "Yes," list the years ▶,,			1
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			
valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
statement - see instructions.) N/A	2b		
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
P			
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?  Yes X No			
·			
b If "Yes," did it have excess business holdings in 2008 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			'
of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,			
Form 4720, to determine if the foundation had excess business holdings in 2008)  N/A	3b		'
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		х
b Did the foundation mixes during the year any amount in a mainter that would jeopardize its charitable purpose that	<del>"</del>		<del></del>
had not been removed from jeopardy before the first day of the tax year beginning in 2008?	4b		X
	m <b>990</b>	-PF	

Form 990-PF (2008) LEITER'S LANDING FOUNDAT	ION		<u>65-07080</u>	62	Page 6
Part VII-B   Statements Regarding Activities for Which F	orm 4720 May Be F	Required (contin	ued)		
5a During the year did the foundation pay or incur any amount to.					
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	4945(e))?	Ye	es X No		
(2) Influence the outcome of any specific public election (see section 4955); or	r to carry on, directly or indire				
any voter registration drive?			es X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes?		Ye	es 🗶 No		-   ;
(4) Provide a grant to an organization other than a charitable, etc., organization	described in section				
509(a)(1), (2), or (3), or section 4940(d)(2)?			es X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f				
the prevention of cruelty to children or animals?		Ye	es X No		
<b>b</b> If any answer is "Yes" to 5a(1)-(5), did <b>any</b> of the transactions fail to qualify und	er the exceptions described i	n Regulations			
section 53.4945 or in a current notice regarding disaster assistance (see instru	ctions)?		N/A	5b	
Organizations relying on a current notice regarding disaster assistance check hi	ere				1 '
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr	om the tax because it maintai	ned			'
expenditure responsibility for the grant?	N	/A Y	es L No		
If "Yes," attach the statement required by Regulations section 53 4945	5-5(d)				!
6a Did the foundation, during the year, receive any funds, directly or indirectly, to p	oay premiums on				
a personal benefit contract?		Ye	es X No	.	
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a po	ersonal benefit contract?		L	6b	X
If you answered "Yes" to 6b, also file Form 8870					
7a At any time during the tax year, was the foundation a party to a prohibited tax si	helter transaction?	Y6	es 🗶 No 📙		
b If yes, did the foundation receive any proceeds or have any net income attributa	ible to the transaction?		N/A	7b	
Part VIII Information About Officers, Directors, Trusto	es, Foundation Ma	nagers, Highly	У		
Paid Employees, and Contractors					
1 List all officers, directors, trustees, foundation managers and their	-	L (a) Campanantan	(d) Contributions to		<u> </u>
(a) Name and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans and deferred	acco	Expense ount, other
(a) name and address	to position	`enter -0-)	compensation	all	owances
				ļ	
					•
SEE STATEMENT 8		0.	0.	┞	<u> </u>
	,				
·		_		<u> </u>	
. <u></u>				-	
	luded on line 4) If none	antor INONE II			
2 Compensation of five highest-paid employees (other than those inc	(b) Title, and average	enter "NUNE."	(d) Contributions to	(e)	Expense
(a) Name and address of each employee paid more than \$50,000	hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred	acco	ount, other
MONT	devoted to position		compensation	all	owances
NONE					
				├	
	<del> </del>	<del></del>		+	
		<del></del>			
Total number of other employees paid over \$50,000			<u> </u>	-	0

Paid Employees, and Contractors (continued)  3 Five highest-paid independent contractors for professional services. If none, et	ator "NONE "	
(a) Name and address of each person paid more than \$50,000		(a) Companyation
	(b) Type of service	(c) Compensation
NONE		
	<del> </del>	
	<del></del>	
	<del></del>	
Total number of others receiving over \$50,000 for professional services	L	<b>&gt;</b> 0
Part IX-A Summary of Direct Charitable Activities	<del></del>	
List the foundation's four largest direct charitable activities during the tax year. Include relevant st.	atistical information such as the	
number of organizations and other beneficiaries served, conferences convened, research papers g	produced, etc.	Expenses
1 N/A		<u> </u>
2		
3		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year	on lines 1 and 2.	Amount
1 N/A		
2		
<u> </u>		
All other program-related investments. See instructions		
3		
		<u> </u>
Total Add lines 1 through 3		- 11

Page 8

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations,	, see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		···-
-	Average monthly fair market value of securities	1a	330,097.
	Average of monthly cash balances	1b	330,097. 370,315.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	700,412.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)   1e   0 •		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	700,412.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	10,506.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	689,906.
6	Minimum investment return. Enter 5% of line 5	6	34,495.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations check here  and do not complete this part.)	d certain	
1	Minimum investment return from Part X, line 6	1	34,495.
2a	251		
b	Income tax for 2008. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	351.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	34,144.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	34,144.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	34,144.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		004 045
а	, , , , , , , , , , , , , , , , , , , ,	1a	231,317.
b	•	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	231,317.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		_
	income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	231,317.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of 4940(e) reduction of tax in those years.	jualifies fo	r the section

Form **990-PF** (2008)

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2007	(c) 2007	( <b>d</b> ) 2008
1 Distributable amount for 2008 from Part XI,		<del></del>		
line 7				34,144.
2 Undistributed income, if any, as of the end of 2007	-			
a Enter amount for 2007 only		<u></u>	0.	
<b>b</b> Total for prior years:				;
3 Excess distributions carryover, if any, to 2008:				
a From 2003 149,084.				t
b From 2004 86, 459.				;
c From 2005 245,968.				,
dFrom 2006 163,669.				
eFrom 2007 190,738.				'
f Total of lines 3a through e	835,918.			
4 Qualifying distributions for 2008 from		<u> </u>		
Part XII, line 4: ►\$ 231,317.				:
a Applied to 2007, but not more than line 2a			0.	
<b>b</b> Applied to undistributed income of prior	<u></u>			'
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			ı
d Applied to 2008 distributable amount				34,144.
e Remaining amount distributed out of corpus	197,173.			
Excess distributions carryover applied to 2008 (If an amount appears in column (d), the same amount must be shown in column (a) )	0.			0.
6 Enter the net total of each column as indicated below:				
8 Corpus Add lines 31, 4c, and 4e Subtract line 5	1,033,091.		!	ļ
b Prior years' undistributed income. Subtract		-		
line 4b from line 2b		0.	·	,
c Enter the amount of prior years'				1
undistributed income for which a notice of				'
deficiency has been issued, or on which the section 4942(a) tax has been previously				
assessed		0.		·
d Subtract line 6c from line 6b. Taxable				,
amount - see instructions		0.		
e Undistributed income for 2007. Subtract line			_	1
4a from line 2a. Taxable amount - see instr.			0.	,
f Undistributed income for 2008. Subtract				
lines 4d and 5 from line 1. This amount must				•
be distributed in 2009				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by	_			
section 170(b)(1)(F) or 4942(g)(3)	0.	<del></del>		
8 Excess distributions carryover from 2003	140 004			,
not applied on line 5 or line 7	149,084.			
9 Excess distributions carryover to 2009. Subtract lines 7 and 8 from line 6a	884,007.			
Subtract lines 7 and 8 from line 6a  10 Analysis of line 9:	004,007.			
a Excess from 2004 86,459.				'
b Excess from 2005 245, 968.				,
c Excess from 2006 163,669.				
d Excess from 2007 190, 738.	1			
e Excess from 2008 197, 173.				
				Form <b>990-PF</b> (2008)

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Form **990-PF** (2008)

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

c Any submission deadlines:

3 Grants and Contributions Paid During the	rear or Approved for Future i	Payment	<u></u>	
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	status of recipient	<u>.                                  </u>	
a Paid during the year				
		!		
CEE COMMEMENO O				
SEE STATEMENT 9 Total			<b>▶</b> 3a	231,317
b Approved for future payment				231,317
a Approved for fature payment				
NONE				
Tabl		<u> </u>	L	0
Total 23611 01-02-09			<b>▶</b> 3b	orm <b>990-PF</b> (2008

Form 990-PF (2008) LEITER'S LANDI	NG FOUND	ATION		65-0	708062 Page 12
Part XVI-A Analysis of Income-Produ	cing Activit	ies			
Enter gross amounts unless otherwise indicated	Unrelated	business income		by section 512, 513, or 514	(e)
	(a) Business	(b)	(C) Exclu-	(d)	Related or exempt
1 Program service revenue;	code	Amount	sion code	Amount	function income
a					
b					<del></del>
c					
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash		-			
investments			14	2,699.	
4 Dividends and interest from securities			14	2,699.	
5 Net rental income or (loss) from real estate:			1		
a Debt-financed property					
b Not debt-financed property		•			
6 Net rental income or (loss) from personal				-	
property			1		
7 Other investment income			14	535.	
8 Gain or (loss) from sales of assets other		<del>:: ·</del>			
than inventory			18	-59,288.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory				<del> </del>	
11 Other revenue:					
a					
b					
C		•	<u> </u>		
d					
e					
12 Subtotal. Add columns (b), (d), and (e)		0.		-37,224.	0.
13 Total. Add line 12, columns (b), (d), and (e)	<u> </u>			13	-37,224.
(See worksheet in line 13 instructions to verify calculations.)				<del></del>	
Part XVI-B Relationship of Activities t	to the Acco	mplishment of Ex	kempt l	Purposes	
		<u> </u>			
Line No. Explain below how each activity for which inco			contribute	ed importantly to the accomp	olishment of
the foundation's exempt purposes (other than 3, 4 THE FOUNDATION INVESTS			CONTEN	DIDIMIONO TN	DIDI TOLY
TRADED STOCKS. THE FOUNDATION INVESTS					
SUCH TIME WHEN THE STO					
TO CHARITABLE ORGANIZA		שוו מאא מחי	PROC	FEDS AKE DIST	KIDUIED
TO CHARTIABLE ORGANIZA	TIONS				<del></del>
	<u> </u>				
				_	
				<u> </u>	
				<u> </u>	
		<del></del>			<del></del>
				<del></del>	<del>-</del>
I					

Form **990-PF** (2008)

823621 01-02-09

1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of

01111 000 11 (200			
Part XVII	Information Regarding Transfers To and	Transactions and Relationships With	Noncharitable
	Exempt Organizations		

	the Co	ode (other than section 501(c)	)(3) organizations) or in section 52	27, relating to political org	anizations?			
а	Trans	fers from the reporting founda	ation to a noncharitable exempt or	ganization of:				
	(1) C	eash					1a(1)	X
	(2) 0	Other assets					1a(2)	X
b	Other	transactions:					1	
	(1) S	ales of assets to a noncharital	ble exempt organization				15(1)	X
	(2) P	urchases of assets from a no	ncharitable exempt organization				1b(2)	X
	(3) R	tental of facilities, equipment,	or other assets				1b(3)	X
	(4) R	teimbursement arrangements					1b(4)	X
		oans or loan guarantees					1b(5)	X
			mbership or fundraising solicitation	ons			1b(6)	X
c			iling lists, other assets, or paid em				1c	X
d		• • • • •	"Yes," complete the following sche	• •	alwavs show the	fair market value of the good	ds, other assets.	
		=	oundation. If the foundation receiv	• • •	-	=		
			other assets, or services received.		,	0 0	,	
(a)	Line no	(b) Amount involved	(c) Name of noncharitable		(d) Desc	cription of transfers, transactions,	and sharing arrange	nents
÷	_	, ,	N/A		<del>-   ` ' -  </del>			
_					<del>-  </del> -		-	
_							<del></del>	
_					-	<del></del>	<del>.</del>	<del></del>
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_							· · · · · · · · · · · · · · · · · · ·	
				<u> </u>				
				···				<del></del>
			<u> </u>					
_								
_								
							·	
_								
2 a	ı Is the	foundation directly or indirect	tly affiliated with, or related to, one	e or more tax-exempt orga	nizations describ	oed		
	ın sec	tion 501(c) of the Code (other	r than section 501(c)(3)) or in sec	tion 527?			Yes [	X No
t	o If "Yes	s," complete the following sch	edule.					
		(a) Name of org	anization	(b) Type of organization	1	(c) Description of relation	onship	
		N/A						
_					<u> </u>			
			<del> </del>					
_					1		_	
		•						
$\Box$			nave examined this return, including acco				it is true, correct,	
	and con	nplete Declaration of preparer (other	er than taxpayer or fiduciary) is based on	all information of which prepa	rer has any knowle	dge		
				1	▶ PRE	SIDENT		
ē	Sı	gnature of officer or trustee	<del>-</del> .	Date	Title			
Sign Here	, ,,	<u> </u>			Date	Check if Pre	parer's identifying n	umber
.등	r's V	Preparer's signature			2010	self-		
တ	Paid spare		ISON, BROWN, AR	CT7 & FADDA	T.T.D	employed >		
	Paid Preparer's Use Only		BRICKELL BAY D			EIN ►		
	₹⊃.	address, and ZIP code MIAM		MIVE, JIM F	LOOK	Dhono 2 A E	5-373-55	00
		MIAM	т, гп ээтэт			Phone no. 305		
							Form <b>990-PF</b>	(2008)

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

Department of the Treasury Internal Revenue Service

#### **Schedule of Contributors**

► Attach to Form 990, 990-EZ, and 990-PF.

OMB No 1545-0047

2008

Name of the organization Employer identification number 65-0708062 LEITER'S LANDING FOUNDATION Organization type (check one): Filers of: Section: Form 990 or 990-EZ 501(c)( ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. (Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.) **General Rule** X For organizations filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II **Special Rules** For a section 501(c)(3) organization filing Form 990, or Form 990-EZ, that met the 33 1/3% support test of the regulations under sections 509(a)(1)/170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on Form 990, Part VIII, line 1h or 2% of the amount on Form 990-EZ, line 1. Complete Parts I and II For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, aggregate contributions or bequests of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III. J For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, some contributions for use exclusively for religious, chantable, etc., purposes, but these contributions did not aggregate to more than \$1,000. (If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year) Caution. Organizations that are not covered by the General Rule and/or the Special Rules do not file Schedule B (Form 990, 990-EZ, or 990-PF), but they must answer "No" on Part IV, line 2 of their Form 990, or check the box in the heading of their Form 990-EZ, or on line 2 of their Form 990-PF, to certify that they do not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

823451 12-18-08

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions

for Form 990. These instructions will be issued separately.

Schedule B (Form 990, 990-EZ, or 990-PF) (2008)

Employer identification number

LEITER'S LANDING FOUNDATIO	٠T

65-0708062

Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	FLORIDA MARLINS FLORIDA MARLINS MIAMI, FL, 33056	\$ 250,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
2	UTIMATE SOFTWARE  2000 ULTIMATE WAY  WESTON, FL 33326	\$ <u>171,024.</u>	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

FORM 990-PF	G <i>P</i>	AIN OR (LOSS)	FROM SALE	OF A	ASSETS		STA	TEMEN'	r 1
(A) DESCRIPTION OF PR	OPERTY				IANNER CQUIRED		TE IRED	DATE	SOLI
CAPITAL GAIN DIST	BUTION	MORGAN STANLE	Y	PUF	RCHASED		-		
(B) GROSS SALES PR		(C) COST OR OTHER BASIS	(D) EXPENSE SALE	OF	(E) DEPRE	c.	GAIN	(F)	oss
2	,056.	0.	-	0.		0.		2	,056.
(A) DESCRIPTION OF PR	OPERTY	_			IANNER CQUIRED		TE	DATE	SOLE
MERRILL LYNCH # 8	63-1015	57		PUF	RCHASED		_		
(B) GROSS SALES PR		(C) COST OR OTHER BASIS	(D) EXPENSE SALE	OF	(E) DEPRE	<b>:</b>	GAIN	(F)	oss
148	,463.	174,000.		0.	<del></del>	0.	-	-25	,537.
(A) DESCRIPTION OF PR	OPERTY	_			MANNER CQUIRED		TE IRED	DATE	SOLI
MORGAN STANLEY				PUF	RCHASED				
(B) GROSS SALES PF		(C) COST OR OTHER BASIS	(D) EXPENSE SALE	OF	(E) DEPRE	·	GAIN	(F) OR L	oss
44	,193.	80,000.		0.		0.		-35	,807.
CAPITAL GAINS DIV		EDON DADE IN							0.
CHLIND GWIND DIA	TDENDS	FROM PART IV							0.

NGS AND T	EMPORARY CA	SH ]	NVESTMENTS	STATEMENT	2
				AMOUNT	
63			•		86. 13.
LINE 3,	COLUMN A		:	2,69	99.
S AND INT	EREST FROM	SECU	JRITIES	STATEMENT	3
GRO	SS AMOUNT			COLUMN (A)	)
63	11,462. 7,368.		0.		
N 4	18,830.	-	0.	18,83	30.
OTHER	INCOME			STATEMENT	4
	(A) REVENUE PER BOOKS				
•	5	35.	535	•	
LINE 11	5	35.	535	•	
OTHER	EXPENSES		<del></del>	STATEMENT	5
(A) EXPENSES	(B)		(C) ADJUSTED NET INCOM	(D) CHARITAI	BLE
(A) EXPENSES	(B) NET INVE S MENT INC 1. 4,		ADJUSTED NET INCOM	(D) CHARITAI	BLE
	LINE 3,  S AND INT  GRO  63  N 4	GROSS AMOUNT  GROSS AMOUNT  11,462. 7,368. AN 4 18,830.  OTHER INCOME  (A) REVENUE PER BOOKS	LINE 3, COLUMN A  S AND INTEREST FROM SECULAR  GROSS AMOUNT  11,462. 7,368.  N 4  18,830.  OTHER INCOME  (A)  REVENUE PER BOOKS  535.	LINE 3, COLUMN A  S AND INTEREST FROM SECURITIES  GROSS AMOUNT DIVIDENDS  11,462. 0. 7,368. 0.  AN 4 18,830. 0.  OTHER INCOME  (A) (B) REVENUE NET INVEST- PER BOOKS MENT INCOME  535. 535	AMOUNT  2,48 21 LINE 3, COLUMN A  2,69  S AND INTEREST FROM SECURITIES  CAPITAL GAINS COLUMN (A AMOUNT DIVIDENDS AMOUNT DIVIDENDS AMOUNT 11,46 7,368.  OTHER INCOME  (A) (B) (C) REVENUE NET INVEST- ADJUSTEI PER BOOKS MENT INCOME NET INCOME  535. 535.

FORM 990-PF	CORPORATE STOCK		STAT	EMENT	6	
DESCRIPTION		BOOK VALUE		MARKET ALUE	?	
MORGAN STANLEY # 183 011339 863	-	518,29	96.	371,170.		
TOTAL TO FORM 990-PF, PART II,	LINE 10B	518,29	96.	371,170		
FORM 990-PF	OTHER INVESTMENTS	· <del>-</del> · ·	STAT	EMENT	7	
DESCRIPTION	VALUATION METHOD	BOOK VALUE		MARKET ALUE	ŗ	
MORGAN STANLEY # 183 011339 863	COST	182,18	34.	<del></del>		
TOTAL TO FORM 990-PF, PART II,	LINE 13	182,18	34.			
	IST OF OFFICERS, DIND FOUNDATION MANAGE		STAT	EMENT	8	
	TITLE AND	COMPEN-	EMPLOYEE BEN PLAN	EXPENS		
NAME AND ADDRESS  ALOIS LEITER 2660 RIVIERA MANOR WESTON, FL 33332				EXPENS	1T	
NAME AND ADDRESS  ALOIS LEITER 2660 RIVIERA MANOR	TITLE AND AVRG HRS/WK PRESIDENT	COMPEN- SATION	BEN PLAN CONTRIB	EXPENS ACCOUN	0.	
NAME AND ADDRESS  ALOIS LEITER 2660 RIVIERA MANOR WESTON, FL 33332  LORI LEITER 2660 RIVIERA MANOR	TITLE AND AVRG HRS/WK PRESIDENT 0.00  VICE PRESIDENT	COMPEN- SATION	BEN PLAN CONTRIB	ACCOUN	0.	
NAME AND ADDRESS  ALOIS LEITER 2660 RIVIERA MANOR WESTON, FL 33332  LORI LEITER 2660 RIVIERA MANOR WESTON, FL 33332  STEVE FORREST 511 EAST 80TH STREET APT 11 D	TITLE AND AVRG HRS/WK  PRESIDENT 0.00  VICE PRESIDENT 0.00  SECRETARY	COMPEN- SATION 0.	CONTRIB  0.	ACCOUN	0. 0.	
NAME AND ADDRESS  ALOIS LEITER 2660 RIVIERA MANOR WESTON, FL 33332  LORI LEITER 2660 RIVIERA MANOR WESTON, FL 33332  STEVE FORREST 511 EAST 80TH STREET APT 11 D NEW YORK, NY 10021  PRENTICE CHEVALIER 220 ROBINWOOD TERRACE	TITLE AND AVRG HRS/WK  PRESIDENT 0.00  VICE PRESIDENT 0.00  SECRETARY 0.00  VICE PRESIDENT	COMPEN- SATION  0.  0.	O.  O.	ACCOUN		

	AND CONTRIBUTIONS DURING THE YEAR	STAT	EMENT 9
RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT		AMOUNT
PINE CREST SCHOOL 1501 NE 62ND STREET, FORT LAUDERDALE, FL, 33334	CHARITABLE GIFT		2,500.
AMERICAN CANCER SOCIETY P.O. BOX 22718, OKLAHOMA CITY, OK, 73123-1718	CHARITABLE GIFT		10,000.
AMERICAN HEART ASSOCIATION 2600 SW 3RD AVE., STE. 900, MIAMI, FL, 33129	CHARITABLE GIFT		5,000.
ANGEL PEDIATRIC HEART 151 N. NOB HILL ROAD, SUITE 139, PLANTATION, FL, 33324	CHARITABLE GIFT		2,500.
BEST BUDDIES 100 SOUTHEAST SECOND STREET, MIAMI, FL, 33131	CHARITABLE GIFT		5,000.
BIG BROTHERS BIG SISTER 230 NORTH 13TH STREET, PHILADELPHIA, PA, 19107	CHARITABLE GIFT		19,200.
BROWARD PARTNERSHIP FOR HOMELESS INC 920 NORTHWEST 7TH AVENUE, FORT LAUDERDALE, FL, 33311-7229	CHARITABLE GIFT		10,000.
CENTRAL REGIONAL HIGH SCHOOL FOREST HILLS PARKWAY BAYVILLE, NEW JERSEY, NJ, 08721	CHARITABLE GIFT		8,000.
CYSTIC FIBROSIS 2200 NORTH FLORIDA MANGO ROAD , WEST PALM BEACH, FL, 33409	CHARITABLE GIFT		10,000.

LEITER'S LANDING FOUNDATION	•	65-0708062
FIRST SERVE 3042 N FEDERAL HWY, SUITE 205, FORT LAUDERDALE, FL, 33306	CHARITABLE GIFT	6,000.
HOPE WORLDWIDE 6118 BOWDEN RD , JACKSONVILLE, FL, 32216	CHARITABLE GIFT	6,500.
JESSICA JUNE CHILDREN'S 1600 SOUTH ANDREWS AVENUE, FORT LAUDERDALE, FL, 33316	CHARITABLE GIFT	5,000.
JUNIOR DIABETES RESEARCH 3411 NW 9TH AVENUE, SUITE 701, FORT LAUDERDALE, FL, 33309	CHARITABLE GIFT	5,000.
KIDS IN DISTRESS 819 NE 26TH STREET, WILTON MANORS, FL, 33305	CHARITABLE GIFT	40,000.
LEUKEMIA & LYMPHOMA SOCIETY TWO OAKWOOD BLVD SUITE 200, HOLLYWOOD, FL, 33020	CHARITABLE GIFT	5,000.
NATIONAL KIDNEY FOUNDATION OF FLORIDA 1040 WOODCOCK RD STE 119, ORLANDO, FL, 32803-3510	CHARITABLE GIFT	200.
NATIONAL MS SOCIETY 2701 MAITLAND CTR. PKWY., STE. 100, ORLANDO, FL, 32751	CHARITABLE GIFT	10,000.
SCOTT PATTERSON SCOTT PATTERSON, MIAMI, FL, 33129	CHARITABLE GIFT	25,000.
SCOTTSDALE HEALTH FOUNDATION 10001 N. 92ND STREET, SUITE 121, SCOTTSDALE, AZ, 85258	CHARITABLE GIFT	7,500.

LEITER'S LANDING FOUNDATION	•	65-0708062 ^
SOREF COMMUNITY CENTER 6501 WEST SUNRISE BOULEVARD, PLANTATION, FL, 33313	CHARITABLE GIFT	5,000.
VICTORY LIVING 1001 W. CYPRESS CREEK RD SUITE 400, FORT LAUDERDALE, FL, 33309	CHARITABLE GIFT	2,500.
YMCA WEST BOARD 3620 CLEVELAND HEIGHTS BLVD, LAKELAND, FL, 33803	CHARITABLE GIFT	1,600.
OTHER OTHER, MIAMI, FL, 33129	CHARITABLE GIFT	39,817.
TOTAL TO FORM 990-PF, PART XV, LI	INE 3A	231,317.

Form 8868 (Rev. 4-2009)			Page 2
• If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this b	ох		▶ X
Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously file		8868.	
If you are filing for an Automatic 3-Month Extension, complete only Part I (on page 1)			
Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no	copies i	needed).	
Type or Name of Exempt Organization	Emp	loyer ide	entification number
print LEITER'S LANDING FOUNDATION	ء ا	5-07	08062
File by the extended Number, street, and room or surte no. If a P.O box, see instructions	+	RS use o	
due date for ling the	Form	no use c	only
return See Instructions MIAMI, FL 33131			i
Check type of return to be filed (File a separate application for each return)			
Form 990 Form 990-EZ Form 990-T (sec. 401(a) or 408(a) trust) Form 1041-A	Fo	orm 5227	7
Form 990-BL X Form 990-PF Form 990-T (trust other than above) Form 4720	Fo	om 6069	€
STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previous	usly file	d Form	8868.
MORRISON, BROWN, ARGIZ & FARRA, LLP			-
• The books are in the care of ▶ 1001 BRICKELL BAY DRIVE, 9TH FLOOR, -	MAIM	I. F	L 33131
Telephone No ► 305-373-5500 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 the second of the	his is fo	r the wh	ole 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 a			
4 I request an additional 3-month extension of time until DECEMBER 15, 2009.			
5 For calendar year, or other tax year beginning FEB 1, 2008 , and ending	JAN	31,	2009
6 If this tax year is for less than 12 months, check reason Initial return Final return	$\overline{}$		in accounting period
7 State in detail why you need the extension			
INFORMATION NECESSARY TO PREPARE A COMPLETE & ACCURAT	E RE	TURN	IS NOT
AVAILABLE AT THIS TIME. AN ADDITIONAL EXTENSION IS R	EQUE	STED	•
8a 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.	8a	\$	351.
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated			
tax payments made Include any prior year overpayment allowed as a credit and any amount paid			
previously with Form 8868	8b	\$	0.
c Balance Due. Subtract line 8b from line 8a. 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	. 8c	\$	351.
Signature and Verification			
Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to tilt is true, correct, and complete, and that I am authorized to prepare this form.	ne best o	f my kno	wledge and belief,
Signature ► Title ► PRESIDENT	Date	<u> </u>	
		F	orm <b>8868</b> (Rev. 4-2009)

823832 05-26-09