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Form **990-EZ**

Department of the Treasury Internal Revenue Service

Short Form
Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$1,000,000 and total assets less than \$2,500,000 at the end of the year may use this form

The organization may have to use a copy of this return to satisfy state reporting requirements

OMB No 1545-1150 2008

Open to Public Inspection

Form 990-EZ (2008)

10/01/08 For the 2008 calendar year, or tax year beginning , and ending Please Check if applicable Name of organization Employer identification number use IRS THE ISRAEL & SYLVIA GOLDBERG FAMILY Address change label or FOUNDATION 63-1268283 Name change print or Room/suite Telephone number Initial return type. Number and street (or P O box, if mail is not delivered to street address) See P.O. Box 990 251-438-5591 Termination Specific Group Exemption Amended return City or town, state or country, and ZIP + 4 Instruc-MOBILE AL 36601-0990 Number Application pending X Cash Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach G Accounting method a completed Schedule A (Form 990 or 990-EZ). Other (specify) N/A Website: X Check > if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF) Organization type (check only one)— |X| 501(c) (3) **4** (insert no) | 4947(a)(1) or 527 if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return 51,127 Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts, if \$1,000,000 or more, file Form 990 useed of Form 990-EZ Revenue, Expenses, and Changes in Net Assets or Fund Salances (See the instructions for Part I.) Part I Contributions, gifts, grants, and similar amounts received 2 Program service revenue including government fees and contracts 2 3 Membership dues and assessments 3 37,736 Investment income 4 13,391 Gross amount from sale of assets other than inventory 5a Less cost or other basis and sales expenses b See 13,391 Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) (attach sch.) 5c Revenue Special events and activities (complete applicable parts of Schedule G). If any amount is from gaming, check here Gross revenue (not including \$ of contributions reported on line 1) 6a Less direct expenses other than fundraising expenses 6<u>c</u> Net income or (loss) from special events and activities (Subtract line 6b from line 6a) 7a Gross sales of inventory, less returns and allowances 7а 7b Less cost of goods sold Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) 7c С 8 Other revenue (describe 8 9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8 9 See Statement 10 10 Grants and similar amounts paid (attach schedule) 11 Benefits paid to or for members 11 12 Salaries, other compensation, and employee benefits 12 13 13 Professional fees and other payments to independent contractors Occupancy, rent, utilities, and maintenance 14 14 15 15 Printing, publications, postage, and shipping 14,102 Other expenses (describe > See Statement 3 16) 39.322 17 Total expenses. Add lines 10 through 16 17 11,805 18 Excess or (deficit) for the year (Subtract line 17 from line 9) 18 1,225,876 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return) 19 19 -6,426 See Statement 4 20 20 Other changes in net assets or fund balances (attach explanation) 1,231,255 21 Net assets or fund balances at end of year Combine lines 18 through 20 Part II Balance Sheets. If Total assets on line 25, column (B) are \$2,500,000 or more, file Form 990 instead of Form 990-EZ (A) Beginning of year (B) End of year (See the instructions for Part II) 1,225,876 1,231,255 22 Cash, savings, and investments 22 23 Land and buildings 24 Other assets (describe 24 225,876 **10**25 Total assets 25 0 26 26 Total liabilities (describe 27 Net assets or fund balances (line 27 of column (B) must agree with line 21) 1,225,876 1,231,255

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Form 990-EZ (2008) THE ISRAEL & SYLVIA GOLDBERG		3-1268283		r	Page 2
Part III Statement of Program Service Accomplishments (See the instruct	tions for Part II	l)	Ex	penses
What is the organization's primary exempt purpose?					d for 501(c)(3)
See Statement 5				1	rganizations
Describe what was achieved in carrying out the organization's exempt purposes. In a				1	'(a)(1) trusts,
describe the services provided, the number of persons benefited, or other relevant inf	formation for each pr	ogram title		optional f	for others)
Various contributions to charitable organizations. See schedule.					
(Grants \$ 25,220) If this amount includes foreign grants, ch	eck here	<u> </u>	П	28a	25,220
(Grants \$) If this amount includes foreign grants, ch	eck here	<u> </u>	П	29a	
30					
(Grants \$) If this amount includes foreign grants, ch	eck here	>		30a	
31 Other program services (attach schedule)			\Box		
(Grants \$) If this amount includes foreign grants, ch 32 Total program service expenses (add lines 28a through 31a)	eck here		Ч	31a 32	25,220
Part IV List of Officers, Directors, Trustees, and Key Employees. List ea	ch one even if not co	mnensated (See t	he ins		
	(b) Title and average	(c) Compensation	(d)	Contributions to	(e) Expense
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)		yee benefit plans & red compensation	account and other allowances
Thomas H. Davis, Jr.	Director	0		0	0
Yuell B. Busey	Director			o	0
G. Porter Brock, Jr.	Director	0		0	0
Max Goldberg	Director	0		0	0
Audrey Goldberg	Director	0		0	0
					
		, - '			
DAA	<u> </u>		<u> </u>	For	rm 990-EZ (2008)

Pa	irt V Other Information (Note the statement requirements in the instructions f	or Part VI.)			
		<u> </u>		Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed				
	description of each activity		33		X
34	Were any changes made to the organizing or governing documents but not reported to the IRS? If "Yes,"				İ
	attach a conformed copy of the changes		34		X
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but	not			ĺ
	reported on Form 990-T, attach a statement explaining your reason for not reporting the income on Form 990-T				
а	Did the organization have unrelated business gross income of \$1,000 or more or section 6033(e) notice, r	eporting,			
	and proxy tax requirements?		35a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?		35b		
36	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes,"				
	complete applicable parts of Schedule N	ı	36		X
37a	Enter amount of political expenditures, direct or indirect, as described in the instr	37a	_		
b	Did the organization file Form 1120-POL for this year?		37b	\sqcup	X
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or	were			
	any such loans made in a prior year and still unpaid at the start of the period covered by this return?		38a		X
b	If "Yes," complete Schedule L, Part II and enter the total amount involved	38b	-[
39	Section 501(c)(7) organizations Enter				
а	Initiation fees and capital contributions included on line 9	39a	-		
b	Constitution of the particular and the constitution of the particular and the constitution of the constitu	39b	-		
40a	Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under				
	section 4911 ▶, section 4912 ▶, section 4955 ▶				ĺ
ь	Section 501(c)(3) and (4) organizations Did the organization engage in any section 4958 excess benefit t				
	during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," comple	ete Schedule			•
	L, Part I		40b	ļ	X
С	Enter amount of tax imposed on organization managers or disqualified persons during	_			
	the year under sections 4912, 4955, and 4958	<u> </u>			
d	Enter amount of tax on line 40c reimbursed by the organization	<u> </u>			
е	All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter		100	₩	x
	transaction? If "Yes," complete Form 8886-T		40e		Α
41	List the states with which a copy of this return is filed AL	Telephone no ▶ 25	1-43	0_5	501
42a	The books are in care of Thomas H. Davis, Jr.	Telephone no ► 25	1-43	0-5	J 9 I
	212 St. Joseph St. Located at ▶ Mobile, AL	ZIP+4 ▶ 36	602		
	•		802		
D	At any time during the calendar year, did the organization have an interest in or a signature or other authorized as a bank account account or other financial			Voc	No
	over a financial account in a foreign country (such as a bank account, securities account, or other financial	u	42b	Yes	No X
	account)?		420		
	If "Yes," enter the name of the foreign country See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Ba				
		TIK .			
_	and Financial Accounts.		42c]]	x
С	At any time during the calendar year, did the organization maintain an office outside of the U.S.?		420	<u> </u>	
42	If "Yes," enter the name of the foreign country Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here				L
43		▶ 43			_
	and enter the amount of tax-exempt interest received or accrued during the tax year	F [43]			
				Yes	No
44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of			1.55	```
	Form 990-EZ		44	1	х
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)	2 If	1		
70	"Yes," Form 990 must be completed instead of Form 990-EZ	· 11	45	1	x
	100, 1 omi 330 must be completed instead of 1 omi 330-LZ		Form 99	0-F7	

			<u> </u>	
Total number of	of other independent contractors each receiving over \$100,000	•		
Sign Here	Under penalties of perjury, I declare that I have examined this return, including a and belief, it is true, correct, and complete Declaration of preparer (other than of Signature of officer Type or print name and title	President	on of which preparer	best of my knowledge has any knowledge
Paid	Preparer's signature	1/21/10	Check if self-employed	Preparer's Identifying Number (See instr.) P00141131
Preparer's	Firm's name (or yours Paul L Jernigan CPA			N ► 63-1154088
Use Only	if self-employed). P.O.) Box 16545		F	hone
	address, and ZIP + 4 Mobile, AL 36616		n	
May the IRS d	liscuss this return with the preparer shown above? See instructions			X Yes No

Form **990-EZ** (2008)

SCHEDULE, A (Form 990 or 990-EZ)

Public Charity Status and Public Support

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

2008

Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

THE ISRAEL & SYLVIA GOLDBERG FAMILY FOUNDATION

Employer identification number 63–1268283

Pa	ırt l	Reason for Public Charity	Status (All organizations	must co	omplete	this p	art.) (s	see ins	structi	ons)		
The	orgai	nization is not a private foundation because	it is (Please check only one organic	anization))							
1	A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).											
2	Ш	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)										
3	\sqcup	A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). (Attach Schedule H)										
4		A medical research organization operated	in conjunction with a hospital des	cribed in	section '	170(b)(1)(A)(iii).	Enter th	e hosp	ıtal's name,		
	city, and state											
5		An organization operated for the benefit of	a college or university owned or	operated	by a gove	ernmenta	al unit de	scribed	ın			
	_	section 170(b)(1)(A)(iv). (Complete Part I	1)									
6	Ц	A federal, state, or local government or go	vernmental unit described in sec	tion 170(I	b)(1)(A)(v	/).						
7	Ш	An organization that normally receives a si	ubstantial part of its support from	a governi	mental ur	nit or fror	n the ge	neral pu	iblic			
		described in section 170(b)(1)(A)(vi). (Co	mplete Part II)									
8	Ы	A community trust described in section 17	'0(b)(1)(A)(vi). (Complete Part II)								
9		An organization that normally receives (1)	more than 33 1/3 % of its support	rt from co	ntribution	s, memb	ership f	ees, and	d gross			
		receipts from activities related to its exemp	ot functions—subject to certain ex	ceptions,	and (2) r	no more	than 33	1/3 % of	f its			
		support from gross investment income and	d unrelated business taxable inco	me (less s	section 5	11 tax) fr	om busi	nesses				
		acquired by the organization after June 30,	, 1975 See section 509(a)(2) . (C	complete i	Part III)							
10		An organization organized and operated ex			•	,, ,		•				
11	X	An organization organized and operated ex					-					
		purposes of one or more publicly supported							tion			
		509(a)(3). Check the box that describes the				s 11e thr	ough 11	h				
		a 🗷 Type I b 🗌 Type II	c Type IIIFunctiona			d	<u> </u>	e III–Otl	ner			
е	X	By checking this box, I certify that the organ					-					
		persons other than foundation managers a	ind other than one or more public	ly support	ed organ	izations	describe	d in sec	tion			
		509(a)(1) or section 509(a)(2)										
f		If the organization received a written deterr	mination from the IRS that it is a	lype I, ly	pe II, or I	ype III s	upportin	g				\Box
		organization, check this box			6 41							Ш
g		Since August 17, 2006, has the organization	on accepted any gift or contribution	n irom ar	ly of the							
		following persons?	strala author along or together with	h no	dooonba	()					<u></u>	T
		(i) A person who directly or indirectly con	·	n persons	describe	ia in (ii)				44-0	Yes	No V
	and (iii) below, the governing body of the supported organization? 11g(i) X									X		
		(ii) A family member of a person describe	,,							11g(ii)		X
h												
(1)		e of supported (ii) EIN anization	(iii) Type of organization (described on lines 1–9	(iv) is the o	•	, , ,	ou notify	(vi) l organizati		(VII) Am-		
	٠.5		above or IRC section	governing		1	of your	(I) organi		340,		
			(see instructions))			<u>``</u>	oort?	US				
		<u> </u>	6 6 13 33	Yes	No	Yes	No	Yes	No			
TD	e	Community Foundation	OI SOUTH ALABAMA	a 1		ı	I	1	1			

organization		(1,7 = 20)	(described on lines 1–9 above or IRC section (see instructions))		in col (i) listed in your governing document?		1 -		organization in col (i) organized in the US?		support	
						Yes	No	Yes	No	Yes	No	
The C	Communi	ty Foundation 63-0695166	of	South 8	Alabam	a X						
Total	'											

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule A (Form 990 or 990-EZ) 2008

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I.)

	tion A. Public Support										
Ca	lendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 200	8	(f) Total			
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")										
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf										
3	The value of services or facilities furnished by a governmental unit to the organization without charge										
4	Total. Add lines 1-3							· · · · · · · · · · · · · · · · · · ·			
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)										
6	Public support. Subtract line 5 from line 4					<u> </u>					
	tion B. Total Support		T								
	lendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 200	8	(f) Total			
7	Amounts from line 4										
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources										
9	Net income from unrelated business activities, whether or not the business is regularly carried on		-								
10 11	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. Add lines 7 through 10										
12	Gross receipts from related activities, etc. (see instructions)	<u> </u>	<u> </u>		1	12				
13	First five years. If the Form 990 is for the	•	second, third, fourth	n, or fifth tax vear a	s a section 501(c)	(3)	<u> </u>				
	organization, check this box and stop here	•		., ,		(-)		▶ □			
Sec	tion C. Computation of Public Su	pport Percent	age								
14	Public support percentage for 2008 (line 6,	column (f) divided	by line 11, column ((f))			14	%			
15	Public support percentage from 2007 Sche	dule A, Part IV-A, I	ne 26f				15	%			
16a	33 1/3 % support test—2008. If the organi			s, and line 14 is 33	1/3 % or more, che	eck this box					
	and stop here. The organization qualifies a	is a publicly suppor	ted organization					▶ ∐			
b	33 1/3 % support test—2007. If the organi				s 33 1/3 % or mor	e, check this		. 🗆			
	box and stop here. The organization qualif	• •	· · · · ·					▶ ∐			
17a		~									
	more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here . Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization.										
_						45 400/					
þ	10%-facts-and-circumstances test—200						or				
	more, and if the organization meets the "fact				· ·	v now the		▶ □			
1 Q	organization meets the "facts-and-circumst		•		•	netructions.		Z H			
18	Private foundation. If the organization did	not check a box or	ı iine 13, 16a, 16b,	ira, oi irb, cneck	this pox and see if	เอเเนตเดกร					

Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part 1)

Sec	tion A. Public Support						
Ca	lendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1-5					ļ	·
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
c	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6)						
Sec	tion B. Total Support	l					· · · · · · · · · · · · · · · · · · ·
Ca	lendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13	Total support. (Add lines 9, 10c, 11, and 12)						
14	First five years. If the Form 990 is for the organization, check this box and stop here	-	second, third, four	th, or fifth tax year a	is a section 501(c)	(3)	▶ [
Sec	tion C. Computation of Public Su		tage			· <u>-</u> ,	
15	Public support percentage for 2008 (line 8,			(f))		15	%
16	Public support percentage from 2007 Sche					16	%
Sec	tion D. Computation of Investme	nt Income Per	centage				
17	Investment income percentage for 2008 (lir	ne 10c, column (f)	divided by line 13,	column (f))		17	%
18	Investment income percentage from 2007 S	Schedule A, Part IV	/-A, line 27h			18	%
19a	33 1/3 % support tests—2008. If the organ						
	17 is not more than 33 1/3 %, check this bo			•	• •		▶ ∟
b	33 1/3 % support tests—2007. If the organ line 18 is not more than 33 1/3 %, check this						▶ [
20	Private foundation. If the organization did			•			.
ПАА	•					Schedule A (Form 99)	n or 990-F7) 2008

Part IV Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. (see instructions)

13,391 13,391

Purpose

Gain / Loss 63-1268283

Federal Statements

Statement 3 - Form 990-EZ, Part I, Line 16 - Other Expenses

Description	<u> </u>	Amount
Expenses	\$	
Administrative fees		13,582
Legal and accounting		520
Total	\$	14,102

Statement 4 - Form 990-EZ, Part I, Line 20 - Other Changes in Net Assets or Fund Balances

Description	Amount		
Unrealized loss on investments recorded at market	\$	-6,426	
Total	\$	-6,426	

63-1268283

Federal Statements

Statement 5 - Form 990-EZ, Part III - Organization's Primary Exempt Purpose

Description

The Goldberg Foundation's purpose is the promotion of cultural, social and educational awareness and enrichment in the community through grants to charitable organizations located in the area.