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Form **990-PF**

EXTENSION ATTACHED Return of Private Foundation

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

2009

OMB No 1545-0052

	t of the Treasury	reated as a Privato be able to use a copy of this			rtıng requirements.	2009
	ndar year 2009, or tax year beginning		, and ei			
	all that apply: Initial return Amended return	Initial return of a fo		harity	Final return Name change	
Use the label Otherwi	Name of foundation LEVON NAZARIAN FOUNDA se, C/O MARKS PANETH & SH	TION, INC.			A Employer identification $11-3587458$	number
print or type	88 FROEHLICH FARM BLV			Room/suite	B Telephone number 516 992-590	00
	cific City or town, state, and ZIP code WOODBURY, NY 11797 type of organization: X Section 501(c)(3) ex		ution		C if exemption application is pe D 1. Foreign organizations, 2. Foreign organizations mee check here and attach con	check here sting the 85% test, inputation
I Fair ma	arket value of all assets at end of year J Accounting	ng method: X Cash her (specify)	Accr	ual	E If private foundation state under section 507(b)(1)(F If the foundation is in a 6 under section 507(b)(1)(A), check here O-month termination
Part I		(a) Revenue and expenses per books	(b) Net in		(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
1 2 3	Contributions, gifts, grants, etc., received Check [if the foundation is not required to attach Sch B Interest on savings and temporary cash investments	100,000.			N/A	
l '.	Dividends and interest from securities Gross rents	74,925.	7	4,925.		STATEMENT 1
Revenue 6	Net gain or (loss) from sale of assets not on line 10	624.				
8 9	Capital gain net income (from Part IV, line 2) Net short-term capital gain Income modifications Gross sales less returns			624.		V 1 5 2010
10a b	Less Cost of goods sold Gross profit or (loss)				Si No	DEN, UT
11	Other income Total. Add lines 1 through 11	175,549.	7	5,549.		
13 14 15	Compensation of officers, directors, trustees, etc Other employee salaries and wages Pension plans, employee benefits	0.		0.		0.
Expense	Accounting fees STMT 2 Other professional fees	7,400.		3,700.		3,700.
nistrative 18 19	Interest Taxes Depreciation and depletion					
Operating and Administrative Expenses 12 12 13 14 15 15 15 15 15 15 15 15 15 15 15 15 15	Occupancy Travel, conferences, and meetings Printing and publications					
Operating 52	Other expenses Total operating and administrative expenses. Add lines 13 through 23 Contributions, gifts, grants paid	7,400. 96,650.		3,700.		3,700. 96,650.
26	Total expenses and disbursements. Add lines 24 and 25 Subtract line 26 from line 12:	104,050.		3,700.		100,350.
1	R Excess of revenue over expenses and disbursements Net investment income (if negative, enter -0-)	71,499.	7	1,849.		
923501 02-02-10	Adjusted net income (if negative, enter -0-) LHA For Privacy Act and Paperwork Reduction	Act Notice, see the instruc	tions.		N/A	Form 990-PF (2009)

LEVON NAZARIAN FOUNDATION, INC.

'C/O MARKS PANETH & SHRON <u>11-3587458</u> Page 2 Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only Beginning of year End of year (a) Book Value (b) Book Value (c) Fair Market Value 1 Cash - non-interest-bearing 18,475. 22,525. 18,475. 2 Savings and temporary cash investments 3 Accounts receivable ► Less: allowance for doubtful accounts 4 Pledges receivable ▶ Less: allowance for doubtful accounts Grants receivable Receivables due from officers, directors, trustees, and other disqualified persons 7 Other notes and loans receivable Less: allowance for doubtful accounts Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Investments - U.S. and state government obligations 4,290,946. 4,366,495. 3,786,249. STMT 3 **b** Investments - corporate stock c Investments - corporate bonds 11 Investments - land, buildings, and equipment basis Less accumulated depreciation 12 Investments - mortgage loans 13 Investments - other 14 Land, buildings, and equipment; basis Less accumulated depreciation 15 Other assets (describe ▶ 4,313,471. 4,384,970. 3,804,724. 16 Total assets (to be completed by all filers) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons Mortgages and other notes payable 22 Other liabilities (describe 0. 23 Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. Net Assets or Fund Balances 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 0. 28 Paid-in or capital surplus, or land, bldg., and equipment fund 4,313,471. 4,384,970. Retained earnings, accumulated income, endowment, or other funds 4,313,471. 4,384,970. Total net assets or fund balances 4,313,471. 4,384,970 31 Total liabilities and net assets/fund balances Part III Analysis of Changes in Net Assets or Fund Balances Total net assets or fund balances at beginning of year - Part II, column (a), line 30 4,31<u>3,471.</u> (must agree with end-of-year figure reported on prior year's return) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize)

4,384,970. Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize)

6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

4,384,970. Form **990-PF** (2009)

Page 3

	ribe the kind(s) of property sold (arehouse; or common stock, 200			I P-Pu	acquired rchase mation	(c) Date a (mo., da		(d) Date sold (mo., day, yr.)
a FRANKLIN TEMPL	ETON - MUTUAL (QUEST FU	ND		P	VARIO	OUS	09/04/09
b FRANKLIN TEMPL		GLOBAL D						
c FUND					P	VARIO	วบร	09/04/09
1								
e				<u></u>				
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale				in or (loss (f) minus	
<u>368.</u>								368
256.								256
<u> </u>	<u> </u>	- 	<u> </u>					 -
Complete only for coasts showing	ng gain in column (h) and owned	by the foundation	on 12/21/60			. 0-! (0	.1 (1-)	
Complete only for assets shown						I) Gains (Co I. (k), but n		
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (i) col. (j), if any			Losses (from col.	(h))
	<u> </u>							368
)	 							
;	 							256
	∫ If gain, also e	nter in Part I, line	7	٦				
Capital gain net income or (net ca	ipital loss)	r -0- ın Part I, line	7) 2				62
Net short-term capital gain or (los	ss) as defined in sections 1222(5) and (6):						
If gain, also enter in Part I, line 8,							4-	
If (loss), enter -0- in Part I, line 8 Part V Qualification U	nder Section 4940(e) 1	(T	<u> </u>			N/A	·
is the foundation liable for the sec Yes," the foundation does not qua				iod?	_			Yes X
Enter the appropriate amount in	each column for each year; see ir	nstructions before	making any entri	es.				
(a) Base period years Calendar year (or tax year beginni	ng in) Adjusted qualifying	distributions	Net value of no	(c) ncharitab	le-use assets	; (Distrit col. (b) div	(d) bution ratio vided by col. (c))
2008		236,400.		3,8	31,73	7.		.06169
2007		342,922.		4,0	97,739).		.08368
2006		290,920.			43,466			.0821
2005		142,626.			<u>46,298</u>			.0607
2004		<u>52,000.</u>		<u> 1,7</u>	<u>87,330</u>).		.02909
Total of line 1, column (d)						2		.3173
Average distribution ratio for the	5-year base period - divide the to	tal on line 2 by 5.	or by the number	of years		 		
the foundation has been in existe			•	•		3		.0634
Enter the net value of noncharitat	ole-use assets for 2009 from Part	t X, line 5				4		3,334,61
Multiply line 4 by line 3						5		211,65
Enter 1% of net investment incor	ne (1% of Part I, line 27b)					6		718
Add lines 5 and 6		•				7	_	212,37
Enter qualifying distributions from	n Part XII, line 4					8		100,35
If line 8 is equal to or greater than See the Part VI instructions.	n line 7, check the box in Part VI,	line 1b, and comp	lete that part usin	g a 1% ta	x rate.			

LEVON NAZARIAN FOUNDATION, INC. Form 990-PF (2009) C/O MARKS PANETH & SHRON 11-3587458 Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions Part VI 1a Exempt operating foundations described in section 4940(d)(2), check here \(\bigcup \) and enter "N/A" on line 1. Date of ruling or determination letter: (attach copy of letter if necessary-see instructions) 1,437. b Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1% of Part I, line 27b c 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-) Add lines 1 and 2 3 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 4 , 437 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-Credits/Payments: 4,324 a 2009 estimated tax payments and 2008 overpayment credited to 2009 6a b Exempt foreign organizations - tax withheld at source 6b c Tax paid with application for extension of time to file (Form 8868) 6с d Backup withholding erroneously withheld 6d 4,324. 7 Total credits and payments. Add lines 6a through 6d Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached 8 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9 2,887. 10 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 2.887. Refunded Enter the amount of line 10 to be: Credited to 2010 estimated tax Part VII-A | Statements Regarding Activities No Yes 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in 1a X any political campaign? X b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)? 1b 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. X c Did the foundation file Form 1120-POL for this year? 1c d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. > \$ 0 . (2) On foundation managers. ► \$ e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation X 2 2 Has the foundation engaged in any activities that have not previously been reported to the IRS? 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 4a 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? N/A b If "Yes." has it filed a tax return on Form 990-T for this year? 4b X 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? 5 If "Yes," attach the statement required by General Instruction T.

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 instructions)

NJ

b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation

9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," complete Part XIV

By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law

10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses

6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either;

7 Did the foundation have at least \$5,000 in assets at any time during the year?

• By language in the governing instrument, or

remain in the governing instrument?

Form **990-PF** (2009)

X

X

6

7

8Ь

LEVON NAZARIAN FOUNDATION, INC. Form 990-PF (2009) Page 5 C/O MARKS PANETH & SHRON 11-3587458 Part VII-A Statements Regarding Activities (continued) 11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of X 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? X Did the foundation comply with the public inspection requirements for its annual returns and exemption application? 13 Website address ► N/A Telephone no. ▶516-992-5900 14 The books are in care of ▶ NAZAR NAZARIAN Located at ▶ %MARKS PANETH, 88 FROEHLICH FARM BLVD., WOODBURY, 15 Section 4947(a)(1) nonexempt charitable trusts filling Form 990-PF in lieu of Form 1041 - Check here N/A and enter the amount of tax-exempt interest received or accrued during the year Part VII-B | Statements Regarding Activities for Which Form 4720 May Be Required File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. Yes No 1a During the year did the foundation (either directly or indirectly): Yes X No (1) Engage in the sale or exchange, or leasing of property with a disqualified person? (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) Yes X No a disqualified person? Yes X No (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 Yes X No 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 Yes X No 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 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 2009? 10 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 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2009? If "Yes," list the years 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 N/A 2b statement - see instructions.) c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.

3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

Form 4720, to determine if the foundation had excess business holdings in 2009.)

had not been removed from jeopardy before the first day of the tax year beginning in 2009?

b If "Yes," did it have excess business holdings in 2009 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,

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

Form **990-PF** (2009)

X

3b

4a

🗌 Yes 🛣 No

N/A

during the year?

LEVON NAZARIAN FOUNDATION, INC. Form 990-PF (2009) <u>C/O MARKS PANETH & SHRON</u> 11-3587458 Page 6 Part VII-B | Statements Regarding Activities for Which Form 4720 May Be Required (continued) 5a During the year did the foundation pay or incur any amount to: 🗌 Yes 🗶 No (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, Yes X No any voter registration drive? Yes X No (3) Provide a grant to an individual for travel, study, or other similar purposes? (4) Provide a grant to an organization other than a charitable, etc., organization described in section Yes 🗶 No 509(a)(1), (2), or (3), or section 4940(d)(2)? (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for Yes X No the prevention of cruelty to children or animals? b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? N/A 5b Organizations relying on a current notice regarding disaster assistance check here c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained __ Yes [__ No N/A expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53.4945-5(d). 6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on Yes X No a personal benefit contract? b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 6b X If "Yes" to 6b, file Form 8870. Yes X No 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? 7b b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? N/AInformation About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII Paid Employees, and Contractors List all officers, directors, trustees, foundation managers and their compensation. (c) Compensation (d) Contributions to employee benefit plans and deterred compensation (b) Title, and average hours per week devoted to position (e) Expense account, other (If not paid, enter -0-) (a) Name and address allowances NAZAR NAZARIAN DIRECTOR 88 FROEHLICH FARM BLVD. WOODBURY, NY 11797 5.00 0 0 0. LEVON NAZARIAN DIRECTOR 88 FROEHLICH FARM BLVD. 5.00 0. WOODBURY, NY 11797 0 0 DIRECTOR CLAUDIA NAZARIAN 88 FROEHLICH FARM BLVD. WOODBURY, NY 11797 5.00 0 . 0 0. 2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (d) Contributions to employee benefit plans and deterred compensation (b) Title, and average (e) Expense account, other (c) Compensation (a) Name and address of each employee paid more than \$50,000 hours per week devoted to position allowances NONE

Form **990-PF** (2009)

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

LEVON NAZARIAN FOUNDATION, INC.

Form 990-PF (2009) C/O MARKS PANETH & SHRON	11-3	3587458 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	on Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter	NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
		
Total number of others receiving over \$50,000 for professional services		▶ 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistica number of organizations and other beneficiaries served, conferences convened, research papers produc	al information such as the sed, etc.	Expenses
1 N/A		
2		
		
3		
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 line.	00 1 00 1 2	Amount
1 N/A	55 1 dilu 2.	Amount
N/A		
2		
All other program-related investments. See instructions.		
3		

Form **990-PF** (2009)

0.

Total. Add lines 1 through 3

P	art X Minimum Investment Return (All domestic foundations	must o	complete this p	art. Foreign fou	ndations, s	see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitab	ole, etc.	, purposes:			
а	Average monthly fair market value of securities	-			1a	3,344,708.
	Average of monthly cash balances				1b	3,344,708. 40,683.
	Fair market value of all other assets				1c	
d	Total (add lines 1a, b, and c)				1d	3,385,391.
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	3,385,391.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amoun	t, see ii	nstructions)		4	50,781.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and o				5	3,334,610.
6	Minimum investment return. Enter 5% of line 5		•		6	166,731.
Ρ	art XI Distributable Amount (see instructions) (Section 4942(j)(3) a foreign organizations check here and do not complete this part	****	5) private operati	ng foundations ar	id certain	
1	Minimum investment return from Part X, line 6				1	166,731.
2a	Tax on investment income for 2009 from Part VI, line 5	2a]	1,437.		
b	Income tax for 2009. (This does not include the tax from Part VI.)	2b				
C	Add lines 2a and 2b				2c	1,437.
3	Distributable amount before adjustments. Subtract line 2c from line 1				3	165,294.
4	Recoveries of amounts treated as qualifying distributions				4	0.
5	Add lines 3 and 4				5	165,294.
6	Deduction from distributable amount (see instructions)				6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Par	t XIII, I	ine 1		7	165,294.
P	art XII Qualifying Distributions (see instructions)					
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., pur	rposes				
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26				1a	100,350.
b	Program-related investments - total from Part IX-B				1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charita	ble, etc	c., purposes		2	
3	Amounts set aside for specific charitable projects that satisfy the:					
а	Suitability test (prior IRS approval required)				3a	
b	Cash distribution test (attach the required schedule)				3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, a	and Par	t XIII, line 4		4	100,350.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net invo	estmer	nt			
	income. Enter 1% of Part I, line 27b		-		5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4				6	100,350.
	Note. The amount on line 6 will be used in Part V. column (h), in subsequent years to	when c	alculating wheth	er the foundation (nualifies for	the section

Form **990-PF** (2009)

4940(e) reduction of tax in those years.

Form 990-PF (2009)

Part XIII Undistributed Income (see instructions)

		(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1	Distributable amount for 2009 from Part XI,				
	line 7				165,294.
	Undistributed income, if any, as of the end of 2009.				
	Enter amount for 2008 only			0.	
t	Total for prior years:				
	Excess distributions carryover, if any, to 2009:				
	1 -				
	From 2004 52,000. From 2005 29,659.				
	From 2006 121,107.				
	From 2007 146,191.				
	From 2008 48, 206.				
	Total of lines 3a through e	397,163.			
	Qualifying distributions for 2009 from	03.7200			
•	Part XII, line 4: ►\$100,350.				
8	Applied to 2008, but not more than line 2a				
	Applied to undistributed income of prior				
	years (Election required - see instructions)		0.		
(Treated as distributions out of corpus				
	(Election required - see instructions)	0.			
(Applied to 2009 distributable amount				100,350.
•	Remaining amount distributed out of corpus	0.			
5	Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a))	64,944.			64,944.
6	Enter the net total of each column as indicated below:				
8	Corpus Add lines 3f, 4c, and 4e Subtract line 5	332,219.			
ŧ	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		0.		
•	d Subtract line 6c from line 6b. Taxable				-
	amount - see instructions		0.		
(e Undistributed income for 2008. Subtract line				
	4a from line 2a. Taxable amount - see instr.			0.	
1	f Undistributed income for 2009. Subtract				
	lines 4d and 5 from line 1. This amount must				
	be distributed in 2010				0.
7	Amounts treated as distributions out of				
	corpus to satisfy requirements imposed by				
	section 170(b)(1)(F) or 4942(g)(3)	0.			
8	Excess distributions carryover from 2004	_			
_	not applied on line 5 or line 7	0.			
9	Excess distributions carryover to 2010.	222 210			
	Subtract lines 7 and 8 from line 6a	332,219.			
	Analysis of line 9: a Excess from 2005 16,715.				
	a Excess from 2005 16,715. b Excess from 2006 121,107.	1			
	Excess from 2007 146,191.				
	d Excess from 2008 48, 206.				
	e Excess from 2009				

LEVON NAZARIAN FOUNDATION, INC.

Form 990-PF (2009) C/O MARKS PANETH & SHRON 11-3587458 Page 10 Part XIV | Private Operating Foundations (see instructions and Part VII-A, question 9) N/A 1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2009, enter the date of the ruling 4942(j)(3) or 4942(1)(5) b Check box to indicate whether the foundation is a private operating foundation described in section Prior 3 years Tax year 2 a Enter the lesser of the adjusted net (a) 2009 (b) 2008 (c) 2007 (d) 2006 (e) Total 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: a "Assets" alternative test - enter: (1) Value of all assets (2) Value of assets qualifying under section 4942(1)(3)(B)(1) b "Endowment" alternative test - enter 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 as provided in section 4942(j)(3)(B)(iii) (3) Largest amount of support from an exempt organization (4) Gross investment income Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets Part XV at any time during the year-see the instructions.) Information Regarding Foundation 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).) NAZAR NAZARIAN 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 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs: Check here X if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d. a The name, address, and telephone number of the person to whom applications should be addressed: b The form in which applications should be submitted and information and materials they should include: c Any submission deadlines: d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

C/O MARKS PANETH & SHRON

Form 990-PF (2009)

11-3587458 Page 11

Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to any foundation manager or substantial contributor Recipient Purpose of grant or contribution Foundation **Amount** status of Name and address (home or business) recipient a Paid during the year SEE STATEMENT 4 96,650. **▶** 3a Totai b Approved for future payment NONE 0. **▶** 3b Total Form **990-PF** (2009) 923611 02-02-10

nter gross amounts unless otherwise indicated.	Unrelated b	usiness income	Excluded by	section 512, 513, or 514	(e)
•	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
Program service revenue:	Code		1 1		
a					
G					
d					
e					
Fees and contracts from government agencies					
Membership dues and assessments					
nterest on savings and temporary cash					
nvestments			 		
Dividends and interest from securities			14	74,925.	
Net rental income or (loss) from real estate:					
Debt-financed property					
Not debt-financed property					
Net rental income or (loss) from personal					
property Other proctment income	 				
Other investment income Gain or (loss) from sales of assets other				+	
than inventory			18	624.	
Net income or (loss) from special events			-		
Gross profit or (loss) from sales of inventory					
Other revenue:				- "	<u> </u>
a					
b		<u> </u>			
c	1				
d					
e					
Subtotal. Add columns (b), (d), and (e)		().	75,549.	
				13	75,54
e worksheet in line 13 instructions to verify calculations		nlishment of	Evemnt Pu	ımosas	
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Form 990-		I NAZARIAN FOUNL IARKS PANETH & S	-	11_3	587458	Page 13
Part X				nd Relationships With Non		i age 10
	Exempt Organ					
1 Did th	ne organization directly or indi	rectly engage in any of the following	ng with any other organization	n described in section 501(c) of	Y	es No
the C	ode (other than section 501(c)(3) organizations) or in section 5	27, relating to political organia	zations?		
a Trans	fers from the reporting found	ation to a noncharitable exempt or	ganization of:	•		
(1)	Cash `				1a(1)	X_
(2)	Other assets				1a(2)	X
b Other	transactions:					
	Sales of assets to a noncharita				1b(1)	X
• •		ncharitable exempt organization			1b(2)	X
	Rental of facilities, equipment,				1b(3)	<u> </u>
	Reimbursement arrangements				1b(4)	X
	oans or loan guarantees				1b(5)	X
٠.		embership or fundraising solicitation			1b(6)	X
	•	ailing lists, other assets, or paid en	·		1 <u>c </u>	X_
				ays show the fair market value of the go in any transaction or sharing arrangem		i ,
		other assets, or services received.		in any transaction or snaring arrangen	ieni, snow in	
(a) Line no	(b) Amount involved	(c) Name of noncharitable		(d) Description of transfers, transaction	and sharing arrang	nements
(4)2	(B) ranount involved	N/A	o oxompt or gameation	(a) Description of quisions, subsection	s, and snamy army	
		- N/A				

			· · · · · · · · · · · · · · · · · · ·			
-						
					-	
					_	_
ın sei	·	tly affiliated with, or related to, one r than section 501(c)(3)) or in sec ledule.	· · · · ·	ations described	Yes	X No
	(a) Name of org	ganization	(b) Type of organization	(c) Description of rela	tionship	
	N/A	·				
	·					
					_	
		<u>.</u>				
		nave examined this return, including according to the taxoard or fiduciary) is based on		ints, and to the best of my knowledge and believes and knowledge If & Sa I (MA)	ef, it is true, correct,	
2 S	gnature of officer or trustee		Date	Title	-	_
Sign Here	Preparer's	hlP. Sal	NO		Preparer's identifying) number

Form **990-PF** (2009)

516-992-5900

Firm's name (or yours if self-employed), address, and ZIP code LLP, CPAS

MARKS PANETH & SHRON LL: 88 FROEHLICH FARM BLVD WOODBURY, NEW YORK 11797

EIN ►

Phone no.

Schedule B (Form 990, 990-EZ,

or 990-PF)
Department of the Treasury
Internal Revenue Service

Name of the organization

Schedule of Contributors

➤ Attach to Form 990, 990-EZ, or 990-PF.

OMB No 1545-0047

2009

Employer identification number

Schedule B (Form 990, 990-EZ, or 990-PF) (2009)

LEVON NAZARIAN FOUNDATION, INC. 11-3587458 C/O MARKS PANETH & SHRON 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 chantable 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 For an organization 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 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 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 (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions 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. ☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, 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. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF),

but it must answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify

that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

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

for Form 990, 990-EZ, or 990-PF.

Name of organization

LEVON NAZARIAN FOUNDATION, INC.

Employer identification number

C/O MARKS PANETH & SHRON 11-3587458 Part I Contributors (see instructions) (a) (b) (c) (d) No. Name, address, and ZIP + 4 Type of contribution Aggregate contributions NAZAR & ARTEMIS NAZARIAN Person Payroll 100,000. Noncash 147 DEMAREST AVE (Complete Part II if there is a noncash contribution.) ENGLEWOOD CLIFFS, NJ 07632 (b) (c) (d) (a) Name, address, and ZIP + 4 No. Aggregate contributions Type of contribution Person **Payroll** Noncash (Complete Part II if there is a noncash contribution.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 Aggregate contributions Type of contribution Person **Payroll** Noncash (Complete Part II if there is a noncash contribution.) (d) (a) (b) (c) No. Name, address, and ZIP + 4 Aggregate contributions Type of contribution Person Payroll Noncash (Complete Part II if there is a noncash contribution.) (d) (a) (b) (c) Name, address, and ZIP + 4 Aggregate contributions Type of contribution No. Person Payroll Noncash (Complete Part II if there is a noncash contribution.) (c) (d) (b) (a) Aggregate contributions Type of contribution Name, address, and ZIP + 4 No. Person Payroll Noncash (Complete Part II if there is a noncash contribution.) Name of organization

LEVON NAZARIAN FOUNDATION, INC.

C/O MARKS PANETH & SHRON

11-3587458

Part II	Noncash Property (see instructions)		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

of Part III Page Name of organization Employer identification number LEVON NAZARIAN FOUNDATION, INC. C/O MARKS PANETH & SHRON 11-3587458 Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations aggregating more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry. For organizations completing Part III Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) (a) No. from Part I (c) Use of gift (d) Description of how gift is held (b) Purpose of gift (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (c) Use of gift (d) Description of how gift is held (b) Purpose of gift Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Relationship of transferor to transferee Transferee's name, address, and ZIP + 4 (a) No. from (c) Use of gift (d) Description of how gift is held (b) Purpose of gift **Part** (e) Transfer of gift Relationship of transferor to transferee Transferee's name, address, and ZIP + 4

FORM 990-PF DIVIDENT	OS AND	INTER	EST	FROM	SECUI	RITIES	STATEMENT	1
SOURCE		GROSS	AMC	UNT		ITAL GAINS IVIDENDS	COLUMN (A	.)
MUTUAL FUNDS	•		74,	925.		0.	74,9	25.
TOTAL TO FM 990-PF, PART I, I	LN 4		74,	925.		0.	74,9	25.
FORM 990-PF	AC	COUNTI	NG E	EES			STATEMENT	2
DESCRIPTION	EXPE	A) NSES BOOKS		(B) INVI IT INC		(C) ADJUSTED NET INCOM		
ACCOUNTING FEES		7,400.		3 ,	,700.		3,7	00.
TO FORM 990-PF, PG 1, LN 16B		7,400.		3 ,	,700.		3,7	00.
FORM 990-PF	CO	RPORAT	E SI	OCK			STATEMENT	3
DESCRIPTION					вос	OK VALUE	FAIR MARKE VALUE	T
FRANKLIN TEMPLETON - MUTUAL S	SHARES QUEST	FUND FUND	RVT	'ES		405,480. 338,403. 419,524.	315,0 295,7 394,8	81.
FUND FRANKLIN TEMPLETON - MUTUAL I FRANKLIN TEMPLETON - MUTUAL (FUND	EUROPE	AN FUN	D			605,837. 934,939. 835,686.	358,1 912,0 896,9	46.
TOTAL TO FORM 990-PF, PART I	I. I.TN	E 10B				826,626.	3,786,2	33.
10 10101 990 11, 11011 11	-,							===

FORM 990-PF

STATEMENT

PAID DURING THE YEAR							
RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT	RECIPIENT STATUS	AMOUNT				
AMAA 31 W. CENTURY ROAD PARAMUS, NJ 07652	NONE CHARITABLE	501(C)(3)	1,000.				
ARMENIAN GENERAL BENEVOLENT UNION 55 EAST 59TH STREET NEW YORK, NY 10022	NONE CHARITABLE	501(C)(3)	59,000.				
KELLOGG SCHOOL OF MANAGEMENT 2001 SHERIDAN RD EVANSTON, IL 60208	NONE EDUCATIONAL	501(C)(3)	4,000.				
MEMORIAL SLOAN-KETTERING CANER CENTER 1275 YORK AVENUE NEW YORK, NY 10065	NONE CHARITABLE	501(C)(3)	500.				
RSNA RESEARCH 820 JORIE BLVD OAK BROOK, IL 60523	NONE EDUCATIONAL	501(C)(3)	1,500.				
TRUSTEES OF TUFTS COLLEGE 169 HOLLAND ST SOMERVILLE, MA 021442401	NONE EDUCATIONAL	501(C)(3)	5,000.				
WILLIAM PENN CHARTER SCHOOL 3000 WEST SCHOOL HOUSE LANE PHILADELPHIA, PA 19144	NONE EDUCATIONAL	501(C)(3)	6,000.				
ARENIAN FUND USA 80 MAIDEN LANE, SUITE 301 NEW YORK, NY 10038	NONE CHARITABLE	501(C)(3)	6,000.				

GRANTS AND CONTRIBUTIONS

LEVON NAZARIAN FOUNDATION, INC.	C/O MARK	1	.1-3587458
BROOKLYN ACADEMY OF MUSIC 30 LAFAYETTE AVENUE BROOKLYN , NY 11217	NONE CHARITABLE	501(C)(3)	2,400.
ARMENIAN EYE CARE PROJECT P.O. BOX 5630 NEW PORT BEACH, CA 92662	NONE CHARITABLE	501(C)(3)	1,000.
BREAKTHROUGH OF GREATER PHILADELPHIA 34 W. COULTER ST PHILADELPHIA, PA 19144	NONE CHARITABLE	501(C)(3)	1,000.
CHILDREN OF ARMENIA FUND 162 FIFTH AVENUE, SUITE 900 NEW YORK, NY 10010	NONE CHARITABLE	501(C)(3)	5,000.
PHILADELPHIA MUSEAUM OF ART 1275 YORK AVENUE PHILADELPHIA, PA 19101		501(C)(3)	1,000.
THE ROENTGEN FUND 44211 SLATESTONE COURT LEESBURG, VA 20176	NONE CHARITABLE	501(C)(3)	1,000.
HRCM FOUNDATION P.O. BOX 381987 CAMBRIDGE, MA 02238	NONE CHARITABLE	501(C)(3)	2,250.
TOTAL TO FORM 990-PF, PART XV, LI	NE 3A		96,650.

F (2000 (Day 4 0000)				Dans 0
	3868 (Rev. 4-2009) *				Page 2
	ou are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this bo				X
-	Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed	Form (8868.		
Par	ou are filing for an Automatic 3-Month Extension, complete only Part I (on page 1). t II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no co	opioo r	ondod)		
, a.					
Type	Name of Exempt Organization LEVON NAZARIAN FOUNDATION, INC.	Emp	loyer identi	meation	number
print	C/O MARKS PANETH & SHRON	1	1-3587	1150	
File by	the Name of the Police of the	† – –	RS use only		
extende due dat		"	13 use offig		
filing th		L			
instruct	WOODBURY, NY 11797				
Chec	k 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	rm 5227	Fo	m 8870
	Form 990-BL X Form 990-PF Form 990-T (trust other than above) Form 4720] Fo	rm 6069		
STOP	l Do not complete Part II if you were not already granted an automatic 3-month extension on a previou	sly file	d Form 88	38.	
	NAZAR NAZARIAN - %MARKS PANETH,88 FROEH	LTC	H FARM	BLV	
• Th	e books are in the care of WOODBURY, NY 11797				
	lephone No. ► 516-992-5900 FAX No. ►				
	he organization does not have an office or place of business in the United States, check this box		·	•	
		ıs is fo	the whole	group, ch	eck this
box		memb	ers the exte	nsion is f	or.
4	I request an additional 3-month extension of time until NOVEMBER 15, 2010.				
5	For calendar year 2009, or other tax year beginning, and ending,				·
6	If this tax year is for less than 12 months, check reason: Initial return Final return		Change in a	ccountin	g period
7	State in detail why you need the extension				
	ADDITIONAL TIME IS NEEDED TO FILE A COMPLETE AND ACCUR	ATE	TAX F	ETURI	<u> </u>
		,			
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	\$	4	<u>,324.</u>
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	<u> </u>			
	previously with Form 8868.	8b	\$	4	<u>,324.</u>
С	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	\$		0.
	Signature and Verification				

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature >

Title 🕨

Date >

Form 8868 (Rev. 4-2009)