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Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year	End of year	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
ASSETS	1	Cash – non-interest-bearing	26,043.	14,456.	14,456.
	2	Savings and temporary cash investments	391,509.	446,240.	446,240.
	3	Accounts receivable			
		Less: allowance for doubtful accounts			
	4	Pledges receivable			
		Less: allowance for doubtful accounts			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see the instructions)			
	7	Other notes and loans receivable (attach sch)			
		Less: allowance for doubtful accounts			
	8	Inventories for sale or use			
	9	Prepaid expenses and deferred charges			
	10a	Investments – U S. and state government obligations (attach schedule)	2,078,776.	1,820,022.	2,164,408.
	b	Investments – corporate stock (attach schedule)	3,046,807.	3,017,956.	5,281,315.
	c	Investments – corporate bonds (attach schedule)			
	11	Investments – land, buildings, and equipment basis			
		Less: accumulated depreciation (attach schedule)			
	12	Investments – mortgage loans			
	13	Investments – other (attach schedule)	926,995.	929,672.	705,450.
	14	Land, buildings, and equipment. basis			
		Less: accumulated depreciation (attach schedule)			
	15	Other assets (describe ► <u>SEE STATEMENT 6</u> ▶)	15,425.	15,426.	297,650.
	16	Total assets (to be completed by all filers – see instructions. Also, see page 1, item I)	6,485,555.	6,243,772.	8,909,519.
LIABILITIES	17	Accounts payable and accrued expenses			
	18	Grants payable			
	19	Deferred revenue			
	20	Loans from officers, directors, trustees, & other disqualified persons.			
	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe ►)			
	23	Total liabilities (add lines 17 through 22)	0.	0.	
	Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.		<input type="checkbox"/>		
	24	Unrestricted			
	25	Temporarily restricted			
	26	Permanently restricted			
	Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.		<input checked="" type="checkbox"/>		
	27	Capital stock, trust principal, or current funds	6,485,555.	6,243,772.	
	28	Paid-in or capital surplus, or land, building, and equipment fund			
	29	Retained earnings, accumulated income, endowment, or other funds			
	30	Total net assets or fund balances (see the instructions)	6,485,555.	6,243,772.	
	31	Total liabilities and net assets/fund balances (see the instructions)	6,485,555.	6,243,772.	

Part III **Analysis of Changes in Net Assets or Fund Balances**

1	Total net assets or fund balances at beginning of year – Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	6,485,555.
2	Enter amount from Part I, line 27a	2	-241,783.
3	Other increases not included in line 2 (itemize) ▶	3	
4	Add lines 1, 2, and 3	4	6,243,772.
5	Decreases not included in line 2 (itemize) ▶	5	
6	Total net assets or fund balances at end of year (line 4 minus line 5) – Part II, column (b), line 30	6	6,243,772.

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shares MLC Company)			(b) How acquired P — Purchase D — Donation	(c) Date acquired (month, day, year)	(d) Date sold (month, day, year)
1a N/A					
b					
c					
d					
e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)		
a					
b					
c					
d					
e					
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(i) Gains (Column (h)) gain minus column (k), but not less than -0- or Losses (from column (h))		
(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column (i) over column (j), if any			
a					
b					
c					
d					
e					
2 Capital gain net income or (net capital loss)	If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7		2		
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c) (see the instructions). If (loss), enter -0- in Part I, line 8.			3		

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

 Yes No

If 'Yes,' the foundation does not qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year, see the instructions before making any entries.

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (column (b) divided by column (c))
2008	587,277.		
2007	757,125.		
2006	165,156.		
2005	545,904.		
2004	128,210.		

2 Total of line 1, column (d)

2

3 Average distribution ratio for the 5-year base period— divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years

3

4 Enter the net value of noncharitable-use assets for 2009 from Part X, line 5

4

5 Multiply line 4 by line 3

5

6 Enter 1% of net investment income (1% of Part I, line 27b)

6

2,854.

7 Add lines 5 and 6

7

2,854.

8 Enter qualifying distributions from Part XII, line 4

8

521,476.

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see the instructions)

1a	Exempt operating foundations described in section 4940(d)(2), check here ► <input type="checkbox"/> and enter 'N/A' on line 1.	
Date of ruling or determination letter: _____ (attach copy of letter if necessary - see instr.)		
1	2,854.	
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here ► <input checked="" type="checkbox"/> 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, column (b)	
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 0.	
3	Add lines 1 and 2 2,854.	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 0.	
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0- 2,854.	
6 Credits/Payments:		
a	2009 estimated tax pmts and 2008 overpayment credited to 2009 12,688.	
b	Exempt foreign organizations – tax withheld at source	
c	Tax paid with application for extension of time to file (Form 8868)	
d	Backup withholding erroneously withheld	
7	Total credits and payments Add lines 6a through 6d 12,688.	
8	Enter any penalty for underpayment of estimated tax Check here <input type="checkbox"/> if Form 2220 is attached	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 0.	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 9,834.	
11	Enter the amount of line 10 to be: Credited to 2010 estimated tax ► 9,834.	Refunded ► 0.

Part VII-A Statements Regarding Activities

1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? Yes No

1b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)? Yes No

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.

1c Did the foundation file Form 1120-POL for this year? Yes No

1d 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 ► \$ 0.

1e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ► \$ 0.

2 Has the foundation engaged in any activities that have not previously been reported to the IRS? Yes No

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 Yes No

4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? Yes No

b If 'Yes,' has it filed a tax return on Form 990-T for this year? Yes No

5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? Yes No

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 either Yes No

• By language in the governing instrument, or

• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? Yes No

7 Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV Yes No

8a Enter the states to which the foundation reports or with which it is registered (see the instructions) ► N/A

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 Yes No

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 Yes No

10 Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses. Yes No

Part VII-A Statements Regarding Activities Continued

11		X
12		X
13	X	
14	Telephone no ► (805) 577-0526	
15	N/A ► <input type="checkbox"/>	N/A

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 ► N/A

14 The books are in care of ► PAUL GOODNOUGH, CPA Located at ► 543 COUNTRY CLUB DRIVE, B-116 ZIP + 4 ► 93065

15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here and enter the amount of tax-exempt interest received or accrued during the year ► 15 N/A

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):		
(1)	Engage in the sale or exchange, or leasing of property with a disqualified person?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(2)	Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(3)	Furnish goods, services, or facilities to (or accept them from) a disqualified person?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(4)	Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(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)?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(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)	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
1b	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 the instructions)? Organizations relying on a current notice regarding disaster assistance check here ► <input type="checkbox"/>	N/A	
1c	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?	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)): 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?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
	If 'Yes,' list the years ► 20__ , 20__ , 20__ , 20__ .		
2b	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 the instructions.)	N/A	
3a	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ► 20__ , 20__ , 20__ , 20__ .		
3b	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
	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, Form 4720, to determine if the foundation had excess business holdings in 2009.)	N/A	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	X	
4b	b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2009?	X	

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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	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3) Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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)? (see instructions)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
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)?		5b	N/A
Organizations relying on a current notice regarding disaster assistance check here	<input checked="" type="checkbox"/>		
c If the answer is 'Yes' to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No	
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 a personal benefit contract?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
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			
7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?		7b	N/A

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).**

(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
FRANK N. MORGNSTERN 17616 LAKE ESTATES DRIVE BOCA RATON, FL 33496	TRUSTEE 8.00	0.	0.	0.

2 Compensation of five highest-paid employees (other than those included on line 1 – see instructions). If none, enter 'NONE.'

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

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

► 0

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

3 Five highest-paid independent contractors for professional services – (see instructions). 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 statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

Expenses

1	N/A	
2		
3		
4		

Part IX-B Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2

Amount

1	<u>N/A</u> ----- -----	
2	----- -----	

All other program-related investments. See instructions.

3 _____

Total. Add lines 1 through 3

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Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes:	
a Average monthly fair market value of securities	1a
b Average of monthly cash balances	1b
c Fair market value of all other assets (see instructions)	1c
d Total (add lines 1a, b, and c)	1d 0.
e Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e
2 Acquisition indebtedness applicable to line 1 assets	2
3 Subtract line 2 from line 1d	3
4 Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions)	4
5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5 0.
6 Minimum investment return. Enter 5% of line 5	6 0.

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here and do not complete this part.)

1 Minimum investment return from Part X, line 6	1
2a Tax on investment income for 2009 from Part VI, line 5	2a 2,854.
b Income tax for 2009. (This does not include the tax from Part VI)	2b
c Add lines 2a and 2b	2c 2,854.
3 Distributable amount before adjustments. Subtract line 2c from line 1	3 -2,854.
4 Recoveries of amounts treated as qualifying distributions	4
5 Add lines 3 and 4	5 -2,854.
6 Deduction from distributable amount (see instructions)	6
7 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7 0.

Part XII Qualifying Distributions (see instructions)

1 Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes:	
a Expenses, contributions, gifts, etc – total from Part I, column (d), line 26.	1a 521,476.
b Program-related investments – total from Part IX-B	1b
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	4 521,476.
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 (see instructions)	5 2,854.
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6 518,622.

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

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				0.
2 Undistributed income, if any, as of the end of 2009.			0.	
a Enter amount for 2008 only			0.	
b Total for prior years: 20____, 20____, 20____		0.		
3 Excess distributions carryover, if any, to 2009:				
a From 2004	130,053.			
b From 2005	549,426.			
c From 2006	171,267.			
d From 2007	762,476.			
e From 2008	591,105.			
f Total of lines 3a through e	2,204,327.			
4 Qualifying distributions for 2009 from Part XII, line 4 ► \$ 521,476.			0.	
a Applied to 2008, but not more than line 2a			0.	
b Applied to undistributed income of prior years (Election required – see instructions)		0.		
c Treated as distributions out of corpus (Election required – see instructions)	0.			
d Applied to 2009 distributable amount			0.	
e Remaining amount distributed out of corpus	521,476.			
5 Excess distributions carryover applied to 2009 (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:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	2,725,803.			
b Prior years' undistributed income Subtract line 4b from line 2b		0.		
c 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 instructions			0.	
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) (see instructions)	0.			
8 Excess distributions carryover from 2004 not applied on line 5 or line 7 (see instructions)	130,053.			
9 Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a	2,595,750.			
10 Analysis of line 9.				
a Excess from 2005	549,426.			
b Excess from 2006	171,267.			
c Excess from 2007	762,476.			
d Excess from 2008	591,105.			
e Excess from 2009	521,476.			

Part XIV | Private Operating Foundations (see instructions and Part VII-A, question 9)

N/A

1a 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	>			
b Check box to indicate whether the foundation is a private operating foundation described in section	<input type="checkbox"/> 4942(j)(3) or			<input checked="" type="checkbox"/> 4942(j)(5)
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed	Tax year	Prior 3 years		
	(a) 2009	(b) 2008	(c) 2007	(d) 2006
				(e) Total
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				
3 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(j)(3)(B)(i)				
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				

Part XV | Supplementary Information (Complete this part only if the organization had \$5,000 or more in assets at any time during the year – see instructions.)**1 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).)

NONE

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

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc, Programs:

Check here 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

Part XV Supplementary Information (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
<i>a Paid during the year</i>				
Total				► 3a
<i>b Approved for future payment</i>				
Total				► 3b

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (see the instructions)
	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	
1 Program service revenue:					
a					
b					
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	4,272.	
4 Dividends and interest from securities			14	323,423.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory					-5,690.
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a					
b					
c					
d					
e					
12 Subtotal. Add columns (b), (d), and (e)				327,695.	-5,690.
13 Total. Add line 12, columns (b), (d), and (e)					322,005.

(See worksheet in the instructions for line 13 to verify calculations.)

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See the instructions)
N/A	

Part XVII **Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations**

	Yes	No
1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?		
a Transfers from the reporting foundation to a noncharitable exempt organization of		
(1) Cash	1a (1)	X
(2) Other assets	1a (2)	X
b Other transactions		
(1) Sales of assets to a noncharitable exempt organization	1b (1)	X
(2) Purchases of assets from a noncharitable exempt organization	1b (2)	X
(3) Rental of facilities, equipment, or other assets	1b (3)	X
(4) Reimbursement arrangements	1b (4)	X
(5) Loans or loan guarantees	1b (5)	X
(6) Performance of services or membership or fundraising solicitations	1b (6)	X
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees	1c	X

d If the answer to any of the above is 'Yes,' complete the following schedule. Column **(b)** should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column **(d)** the value of the goods, other assets, or services received.

(a) Line no.	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements
N/A			

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?

Yes No

b If 'Yes,' complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship
N/A		

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge.

Signature of officer or trustee		Date	Title	
<i>Paul Goodnough</i>		6/26/10	<i>Trustee</i>	
Paid Pre- parer's Use Only	Preparer's signature	Date	Preparer's Identifying number (See Signature in the instrs)	
	PAUL GOODNOUGH <i>Paul Goodnough</i>	6-24-10	Check if self- employed	<input checked="" type="checkbox"/> N/A
Firm's name (or yours if self- employed), address, and ZIP code	PAUL GOODNOUGH, CPA		EIN	N/A
	525 COUNTRY CLUB DR, STE C SIMI VALLEY, CA 93065-7697		Phone no	(805) 577-0526

BAA

2009

FEDERAL STATEMENTS
MORRIS MORGENSTERN FOUNDATION
C/O PAUL GOODNOUGH, CPA

PAGE 1

13-1635719

STATEMENT 1**FORM 990-PF, PART I, LINE 6A****NET GAIN (LOSS) FROM NONINVENTORY SALES PER BOOKS
ASSETS NOT INCLUDED IN PART IV**

DESCRIPTION:	THRU MORGAN STANLEY		
DATE ACQUIRED:	VARIOUS		
HOW ACQUIRED:	PURCHASE		
DATE SOLD:	VARIOUS		
TO WHOM SOLD:			
GROSS SALES PRICE:	2,353.		
COST OR OTHER BASIS:	2,000.		
BASIS METHOD:	COST		
		GAIN (LOSS)	353.
DESCRIPTION:	THRU VANGUARD		
DATE ACQUIRED:	VARIOUS		
HOW ACQUIRED:	PURCHASE		
DATE SOLD:	VARIOUS		
TO WHOM SOLD:			
GROSS SALES PRICE:	366,000.		
COST OR OTHER BASIS:	372,043.		
BASIS METHOD:	COST		
		GAIN (LOSS)	-6,043.
		TOTAL \$	<u>-5,690.</u>

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

	<u>(A) EXPENSES PER BOOKS</u>	<u>(B) NET INVESTMENT INCOME</u>	<u>(C) ADJUSTED NET INCOME</u>	<u>(D) CHARITABLE PURPOSES</u>
PAUL GOODNOUGH	\$ 24,000.	\$ 24,000.	\$ 0.	\$ 0.
TOTAL	<u>\$ 24,000.</u>	<u>\$ 24,000.</u>	<u>\$ 0.</u>	<u>\$ 0.</u>

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

	<u>(A) EXPENSES PER BOOKS</u>	<u>(B) NET INVESTMENT INCOME</u>	<u>(C) ADJUSTED NET INCOME</u>	<u>(D) CHARITABLE PURPOSES</u>
BROKERAGE	\$ 784.	\$ 784.	\$ 0.	\$ 0.
TOTAL	<u>\$ 784.</u>	<u>\$ 784.</u>	<u>\$ 0.</u>	<u>\$ 0.</u>

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

	(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
FOREIGN TAXES	\$ 17,248.	\$ 17,248.		
NY TAXES	250.	250.		
TOTAL	\$ 17,498.	\$ 17,498.	\$ 0.	\$ 0.

STATEMENT 5
FORM 990-PF, PART I, LINE 25
CONTRIBUTIONS, GIFTS, AND GRANTS

CASH GRANTS AND ALLOCATIONS

CLASS OF ACTIVITY:	EDUCATIONAL		
DONEE'S NAME:	ANTI DEFAMATION LEAGUE		
DONEE'S ADDRESS:			
RELATIONSHIP OF DONEE:			
ORGANIZATIONAL STATUS OF DONEE:	EDUCATIONAL		
AMOUNT GIVEN:		\$ 1,000.	
CLASS OF ACTIVITY:	RELIGIOUS		
DONEE'S NAME:	BINAI B'RITH FOUNDATION		
DONEE'S ADDRESS:			
RELATIONSHIP OF DONEE:			
ORGANIZATIONAL STATUS OF DONEE:	RELIGIOUS		
AMOUNT GIVEN:		128.	
CLASS OF ACTIVITY:	EDUCATIONAL		
DONEE'S NAME:	BROWN UNIVERSITY		
DONEE'S ADDRESS:			
RELATIONSHIP OF DONEE:			
ORGANIZATIONAL STATUS OF DONEE:	EDUCATIONAL		
AMOUNT GIVEN:		5,000.	
CLASS OF ACTIVITY:	RELIGIOUS		
DONEE'S NAME:	COMMUNITY CHEST		
DONEE'S ADDRESS:			
RELATIONSHIP OF DONEE:			
ORGANIZATIONAL STATUS OF DONEE:	RELIGIOUS		
AMOUNT GIVEN:		1,000.	
CLASS OF ACTIVITY:	RELIGIOUS		
DONEE'S NAME:	GREAT NECK SYNAGOGUE		
DONEE'S ADDRESS:			
RELATIONSHIP OF DONEE:			
ORGANIZATIONAL STATUS OF DONEE:	RELIGIOUS		
AMOUNT GIVEN:		180.	
CLASS OF ACTIVITY:	RELIGIOUS		
DONEE'S NAME:	HADASSAH		

STATEMENT 5 (CONTINUED)
FORM 990-PF, PART I, LINE 25
CONTRIBUTIONS, GIFTS, AND GRANTS

DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

RELIGIOUS

\$ 7,000.

CLASS OF ACTIVITY:

DONEE'S NAME:

DONEE'S ADDRESS:

EDUCATIONAL
COLUMBIA UNIVERSITY

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

EDUCATIONAL

2,000.

CLASS OF ACTIVITY:

DONEE'S NAME:

DONEE'S ADDRESS:

RELIGIOUS
SINAI TEMPLE

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

RELIGIOUS

3,600.

CLASS OF ACTIVITY:

DONEE'S NAME:

DONEE'S ADDRESS:

EDUCATIONAL
UNIVERSITY OF PENN

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

EDUCATIONAL

15,507.

CLASS OF ACTIVITY:

DONEE'S NAME:

DONEE'S ADDRESS:

CHARITABLE
MISC ORGANIZED CHARITIES

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

CHARITABLE

8,030.

CLASS OF ACTIVITY:

DONEE'S NAME:

DONEE'S ADDRESS:

RELIGIOUS
TEMPLE ANSHEI SHALOM

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

RELIGIOUS

4,036.

CLASS OF ACTIVITY:

DONEE'S NAME:

DONEE'S ADDRESS:

STAND WITH US

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

CHARITABLE

2,500.

CLASS OF ACTIVITY:

DONEE'S NAME:

DONEE'S ADDRESS:

RELIGIOUS
JEWISH NATIONAL FUND

STATEMENT 5 (CONTINUED)
FORM 990-PF, PART I, LINE 25
CONTRIBUTIONS, GIFTS, AND GRANTS

RELATIONSHIP OF DONEE:
ORGANIZATIONAL STATUS OF DONEE: EDUCATIONAL
AMOUNT GIVEN: \$ 2,500.

CLASS OF ACTIVITY: RELIGIOUS
DONEE'S NAME: BOCA RATON SYNAGOGUE
DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:
ORGANIZATIONAL STATUS OF DONEE: RELIGIOUS
AMOUNT GIVEN: 1,000.

CLASS OF ACTIVITY: RELIGIOUS
DONEE'S NAME: JBI INTERNATIONAL
DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:
ORGANIZATIONAL STATUS OF DONEE: RELIGOUS
AMOUNT GIVEN: 2,500.

CLASS OF ACTIVITY: NORTH SHORE HEBREW ACADEMY
DONEE'S NAME:
DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:
ORGANIZATIONAL STATUS OF DONEE: EDUCATIONAL
AMOUNT GIVEN: 1,000.

CLASS OF ACTIVITY: CHARITABLE
DONEE'S NAME: STEVEN FRAGER FOUNDATION INC.
DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:
ORGANIZATIONAL STATUS OF DONEE: MEDICAL RESEARCH
AMOUNT GIVEN: 500.

CLASS OF ACTIVITY: EDUCATIONAL
DONEE'S NAME: TALMUDIC COLLEGE OF FLORIDA
DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:
ORGANIZATIONAL STATUS OF DONEE: EDUCATIONAL
AMOUNT GIVEN: 180.

CLASS OF ACTIVITY: MIRRER YESHIVA
DONEE'S NAME:
DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:
ORGANIZATIONAL STATUS OF DONEE: RELIGIOUS
AMOUNT GIVEN: 2,500.

CLASS OF ACTIVITY: RELIGIOUS
DONEE'S NAME: JEWISH FEDERATION OF S PALM BEACH COUNTY
DONEE'S ADDRESS:

STATEMENT 5 (CONTINUED)
FORM 990-PF, PART I, LINE 25
CONTRIBUTIONS, GIFTS, AND GRANTS

RELATIONSHIP OF DONEE:
ORGANIZATIONAL STATUS OF DONEE: RELIGIOUS
AMOUNT GIVEN: \$ 24,500.

CLASS OF ACTIVITY: CHARITABLE
DONEE'S NAME: LONG BEACH MEDICAL CENTER
DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:
ORGANIZATIONAL STATUS OF DONEE:
AMOUNT GIVEN: 100.

CLASS OF ACTIVITY: RELIGIOUS
DONEE'S NAME: CONGREGATION SONS OF ISRAEL
DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:
ORGANIZATIONAL STATUS OF DONEE:
AMOUNT GIVEN: 3,000.

CLASS OF ACTIVITY: RELIGIOUS
DONEE'S NAME: ALEPH SOCIETY
DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:
ORGANIZATIONAL STATUS OF DONEE:
AMOUNT GIVEN: 1,500.

CLASS OF ACTIVITY: CHARITABLE
DONEE'S NAME: AM. COMM. ZEDEK HOSPITAL
DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:
ORGANIZATIONAL STATUS OF DONEE:
AMOUNT GIVEN: 500.

CLASS OF ACTIVITY: CHARITABLE
DONEE'S NAME: BRCH FOUNDATION LOCKBOX
DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:
ORGANIZATIONAL STATUS OF DONEE:
AMOUNT GIVEN: 1,800.

CLASS OF ACTIVITY: EDUCATIONAL
DONEE'S NAME: B'KURA MAIN ORDER ACADEMY
DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:
ORGANIZATIONAL STATUS OF DONEE:
AMOUNT GIVEN: 500.

CLASS OF ACTIVITY: CHARITABLE
DONEE'S NAME: C.A.M.E.R.A.
DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:

STATEMENT 5 (CONTINUED)
FORM 990-PF, PART I, LINE 25
CONTRIBUTIONS, GIFTS, AND GRANTS

ORGANIZATIONAL STATUS OF DONEE:
AMOUNT GIVEN: \$ 2,625.

CLASS OF ACTIVITY: RELIGIOUS
DONEE'S NAME: ISRAEL SPECIAL KIDS FUND
DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:
ORGANIZATIONAL STATUS OF DONEE:
AMOUNT GIVEN: 250.

CLASS OF ACTIVITY: EDUCATIONAL
DONEE'S NAME: LUBAVITCH YOUTH ORGANIZATION
DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:
ORGANIZATIONAL STATUS OF DONEE:
AMOUNT GIVEN: 180.

CLASS OF ACTIVITY: CHARITABLE
DONEE'S NAME: LYNBROOK YOUTH ATHLETIC ASSN
DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:
ORGANIZATIONAL STATUS OF DONEE:
AMOUNT GIVEN: 25.

CLASS OF ACTIVITY: RELIGIOUS
DONEE'S NAME: TOMCHEI SHABBOS - YAD YESHAYAH
DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:
ORGANIZATIONAL STATUS OF DONEE:
AMOUNT GIVEN: 200.

CLASS OF ACTIVITY: CHARITABLE
DONEE'S NAME: AABA FOUNDATION INC
DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:
ORGANIZATIONAL STATUS OF DONEE:
AMOUNT GIVEN: 350.

CLASS OF ACTIVITY: RELIGIOUS
DONEE'S NAME: AGUDATH ISRAEL OF AMERICA
DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:
ORGANIZATIONAL STATUS OF DONEE:
AMOUNT GIVEN: 250,000.

CLASS OF ACTIVITY: CHARITABLE
DONEE'S NAME: BOCA RATON COMMUNITY HOSPITAL FOUNDATION
DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:
ORGANIZATIONAL STATUS OF DONEE:

STATEMENT 5 (CONTINUED)
FORM 990-PF, PART I, LINE 25
CONTRIBUTIONS, GIFTS, AND GRANTS

AMOUNT GIVEN:	\$ 25,000.
CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:	RELIGIOUS CHERROH HATZUESH
RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DONEE: AMOUNT GIVEN:	1,500.
CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:	CHARITABLE HEWLETT FIRE DEPARTMENT
RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DONEE: AMOUNT GIVEN:	250.
CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:	CHARITABLE UCLA DEPT OF UROLOGY
RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DONEE: AMOUNT GIVEN:	500.
CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:	RELIGIOUS AMIT WOMEN
RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DONEE: AMOUNT GIVEN:	100.
CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:	CHARITABLE COLUMBIA PRESBYTERIAN MEDICAL CENTER
RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DONEE: AMOUNT GIVEN:	1,800.
CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:	RELIGIOUS CONGREGATION DARCHEI TORAH
RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DONEE: AMOUNT GIVEN:	50,000.
CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:	CHARITABLE FIVE TOWNS SOCIETY
RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DONEE:	

STATEMENT 5 (CONTINUED)
FORM 990-PF, PART I, LINE 25
CONTRIBUTIONS, GIFTS, AND GRANTS

AMOUNT GIVEN: \$ 500.

CLASS OF ACTIVITY: CHARITABLE
DONEE'S NAME: SEEDS OF PEACE
DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:
ORGANIZATIONAL STATUS OF DONEE:
AMOUNT GIVEN: 2,500.

CLASS OF ACTIVITY: CHARITABLE
DONEE'S NAME: THE WOODMERE CLUB FOUNDATION
DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:
ORGANIZATIONAL STATUS OF DONEE:
AMOUNT GIVEN: 750.

CLASS OF ACTIVITY: CHARITABLE
DONEE'S NAME: ALYN HOSPITAL
DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:
ORGANIZATIONAL STATUS OF DONEE:
AMOUNT GIVEN: 500.

CLASS OF ACTIVITY: CHARITABLE
DONEE'S NAME: AMERICAN COMM. FOR WEIZMANN INST OF SCI
DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:
ORGANIZATIONAL STATUS OF DONEE:
AMOUNT GIVEN: 2,000.

CLASS OF ACTIVITY: CHARITABLE
DONEE'S NAME: AM SOCIETY FOR TECHNION-ISRAEL INST TECH
DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:
ORGANIZATIONAL STATUS OF DONEE:
AMOUNT GIVEN: 1,000.

CLASS OF ACTIVITY: CHARITABLE
DONEE'S NAME: BASCOM PALMER EYE INSTITUTE
DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:
ORGANIZATIONAL STATUS OF DONEE:
AMOUNT GIVEN: 250.

CLASS OF ACTIVITY: RELIGIOUS
DONEE'S NAME: BEIT T'SHUVAH
DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:
ORGANIZATIONAL STATUS OF DONEE:

STATEMENT 5 (CONTINUED)
FORM 990-PF, PART I, LINE 25
CONTRIBUTIONS, GIFTS, AND GRANTS

AMOUNT GIVEN: \$ 10,000.

CLASS OF ACTIVITY: RELIGIOUS
DONEE'S NAME: B'NAI TORAH CONGREGATION
DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:
ORGANIZATIONAL STATUS OF DONEE:
AMOUNT GIVEN: 6,000.

CLASS OF ACTIVITY: EDUCATIONAL
DONEE'S NAME: BROWN HILLEL FOUNDATION
DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:
ORGANIZATIONAL STATUS OF DONEE:
AMOUNT GIVEN: 500.

CLASS OF ACTIVITY: RELIGIOUS
DONEE'S NAME: COLEL CHABAD
DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:
ORGANIZATIONAL STATUS OF DONEE:
AMOUNT GIVEN: 500.

CLASS OF ACTIVITY: CHARITABLE
DONEE'S NAME: CHILDRENS HOSPITAL BOSTON
DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:
ORGANIZATIONAL STATUS OF DONEE:
AMOUNT GIVEN: 100.

CLASS OF ACTIVITY: RELIGIOUS
DONEE'S NAME: CONGREGACION ISRAELITA DE LA REP ARGENTI
DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:
ORGANIZATIONAL STATUS OF DONEE:
AMOUNT GIVEN: 250.

CLASS OF ACTIVITY: CHARITABLE
DONEE'S NAME: EPILEPSY FOUNDATION
DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:
ORGANIZATIONAL STATUS OF DONEE:
AMOUNT GIVEN: 6,000.

CLASS OF ACTIVITY: CHARITABLE
DONEE'S NAME: FOUNDATION FOR CHILDREN WITH CANCER
DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:
ORGANIZATIONAL STATUS OF DONEE:

STATEMENT 5 (CONTINUED)
FORM 990-PF, PART I, LINE 25
CONTRIBUTIONS, GIFTS, AND GRANTS

AMOUNT GIVEN:	\$ 50.
CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:	CHARITABLE FRIENDS OF ISRAEL DEFENSE FORCES
RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DONEE: AMOUNT GIVEN:	3,000.
CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:	CHARITABLE GLOBALGIVING FOUNDATION
RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DONEE: AMOUNT GIVEN:	250.
CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:	CHARITABLE HEWLETT WOODMERE UFSD
RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DONEE: AMOUNT GIVEN:	500.
CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:	EDUCATIONAL HEBREW ACADEMY OF LONG BEACH
RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DONEE: AMOUNT GIVEN:	16,000.
CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:	EDUCATIONAL HILLEL COUNCIL AT UCLA
RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DONEE: AMOUNT GIVEN:	350.
CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:	CHARITABLE HYPERTROPIC CARDIOMYOPATHY ASSOC.
RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DONEE: AMOUNT GIVEN:	100.
CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:	CHARITABLE IPTF
RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DONEE:	

STATEMENT 5 (CONTINUED)
FORM 990-PF, PART I, LINE 25
CONTRIBUTIONS, GIFTS, AND GRANTS

AMOUNT GIVEN: \$ 2,500.

CLASS OF ACTIVITY: RELIGIOUS
DONEE'S NAME: ISRAEL CHILDREN'S FOUNDATION
DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:
ORGANIZATIONAL STATUS OF DONEE:
AMOUNT GIVEN: 500.

CLASS OF ACTIVITY: RELIGIOUS
DONEE'S NAME: ISREAL DEFENSE FOUNDATION
DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:
ORGANIZATIONAL STATUS OF DONEE:
AMOUNT GIVEN: 2,500.

CLASS OF ACTIVITY: RELIGIOUS
DONEE'S NAME: ISREAL HUMANITARIAN FOUNDATION
DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:
ORGANIZATIONAL STATUS OF DONEE:
AMOUNT GIVEN: 500.

CLASS OF ACTIVITY: CHARITABLE
DONEE'S NAME: JACARANDA FOUNDATION
DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:
ORGANIZATIONAL STATUS OF DONEE:
AMOUNT GIVEN: 200.

CLASS OF ACTIVITY: CHARITABLE
DONEE'S NAME: JEWISH ADOPTION & FOSTER CARE OPTIONS
DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:
ORGANIZATIONAL STATUS OF DONEE:
AMOUNT GIVEN: 610.

CLASS OF ACTIVITY: CHARITABLE
DONEE'S NAME: LYNN UNIVERSITY
DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:
ORGANIZATIONAL STATUS OF DONEE:
AMOUNT GIVEN: 500.

CLASS OF ACTIVITY: RELIGIOUS
DONEE'S NAME: MEIR PANIM
DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:
ORGANIZATIONAL STATUS OF DONEE:

STATEMENT 5 (CONTINUED)
FORM 990-PF, PART I, LINE 25
CONTRIBUTIONS, GIFTS, AND GRANTS

AMOUNT GIVEN: \$ 125.

CLASS OF ACTIVITY: CHARITABLE
DONEE'S NAME: MUSCULAR DYSTROPHY
DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:
ORGANIZATIONAL STATUS OF DONEE:
AMOUNT GIVEN: 250.

CLASS OF ACTIVITY: CHARITABLE
DONEE'S NAME: NATIONAL KERATOCONUS FOUNDATION
DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:
ORGANIZATIONAL STATUS OF DONEE:
AMOUNT GIVEN: 250.

CLASS OF ACTIVITY: CHARITABLE
DONEE'S NAME: NATIONAL TEMPLE
DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:
ORGANIZATIONAL STATUS OF DONEE:
AMOUNT GIVEN: 1,000.

CLASS OF ACTIVITY: CHARITABLE
DONEE'S NAME: OCP
DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:
ORGANIZATIONAL STATUS OF DONEE:
AMOUNT GIVEN: 500.

CLASS OF ACTIVITY: CHARITABLE
DONEE'S NAME: PAPANICOLAON CORPS CANCER RESEARCH
DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:
ORGANIZATIONAL STATUS OF DONEE:
AMOUNT GIVEN: 250.

CLASS OF ACTIVITY: CHARITABLE
DONEE'S NAME: PBR
DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:
ORGANIZATIONAL STATUS OF DONEE:
AMOUNT GIVEN: 100.

CLASS OF ACTIVITY: CHARITABLE
DONEE'S NAME: PRESERVATION FOUNDATION OF PALM BEACH CO
DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:
ORGANIZATIONAL STATUS OF DONEE:

STATEMENT 5 (CONTINUED)
FORM 990-PF, PART I, LINE 25
CONTRIBUTIONS, GIFTS, AND GRANTS

AMOUNT GIVEN:	\$ 100.
CLASS OF ACTIVITY:	CHARITABLE
DONEE'S NAME:	SARRC
DONEE'S ADDRESS:	
RELATIONSHIP OF DONEE:	
ORGANIZATIONAL STATUS OF DONEE:	
AMOUNT GIVEN:	1,000.
CLASS OF ACTIVITY:	EDUCATIONAL
DONEE'S NAME:	SOUTH FLORIDA JEWISH ACADEMY
DONEE'S ADDRESS:	
RELATIONSHIP OF DONEE:	
ORGANIZATIONAL STATUS OF DONEE:	
AMOUNT GIVEN:	500.
CLASS OF ACTIVITY:	CHARITABLE
DONEE'S NAME:	SOUTH BEACH COMMUNITY HOSPITAL
DONEE'S ADDRESS:	
RELATIONSHIP OF DONEE:	
ORGANIZATIONAL STATUS OF DONEE:	
AMOUNT GIVEN:	1,000.
CLASS OF ACTIVITY:	CHARITABLE
DONEE'S NAME:	SPACE
DONEE'S ADDRESS:	
RELATIONSHIP OF DONEE:	
ORGANIZATIONAL STATUS OF DONEE:	
AMOUNT GIVEN:	450.
CLASS OF ACTIVITY:	CHARITABLE
DONEE'S NAME:	SPANISH RIVER CHRISTIAN SCHOOL
DONEE'S ADDRESS:	
RELATIONSHIP OF DONEE:	
ORGANIZATIONAL STATUS OF DONEE:	
AMOUNT GIVEN:	500.
CLASS OF ACTIVITY:	CHARITABLE
DONEE'S NAME:	SPBCC
DONEE'S ADDRESS:	
RELATIONSHIP OF DONEE:	
ORGANIZATIONAL STATUS OF DONEE:	
AMOUNT GIVEN:	250.
CLASS OF ACTIVITY:	CHARITABLE
DONEE'S NAME:	ST ANDREWS CANCER RESEARCH
DONEE'S ADDRESS:	
RELATIONSHIP OF DONEE:	
ORGANIZATIONAL STATUS OF DONEE:	

STATEMENT 5 (CONTINUED)
FORM 990-PF, PART I, LINE 25
CONTRIBUTIONS, GIFTS, AND GRANTS

AMOUNT GIVEN: \$ 100.

CLASS OF ACTIVITY: CHARITABLE
DONEE'S NAME: THE CHILDRENS AID SOCIETY
DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:
ORGANIZATIONAL STATUS OF DONEE:
AMOUNT GIVEN: 250.

CLASS OF ACTIVITY: CHARITABLE
DONEE'S NAME: THE RABBI GERLAD I. WOLPE MEM FUND
DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:
ORGANIZATIONAL STATUS OF DONEE:
AMOUNT GIVEN: 500.

CLASS OF ACTIVITY: EDUCATIONAL
DONEE'S NAME: U OF A
DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:
ORGANIZATIONAL STATUS OF DONEE:
AMOUNT GIVEN: 1,100.

CLASS OF ACTIVITY: EDUCATIONAL
DONEE'S NAME: UC SANTA BARBARA FOUNDATION
DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:
ORGANIZATIONAL STATUS OF DONEE:
AMOUNT GIVEN: 4,000.

CLASS OF ACTIVITY: EDUCATIONAL
DONEE'S NAME: UNIVERSITY OF FLORIDA
DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:
ORGANIZATIONAL STATUS OF DONEE:
AMOUNT GIVEN: 1,000.

CLASS OF ACTIVITY: RELIGIOUS
DONEE'S NAME: YESHIVA OF FAR ROCKAWAY
DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:
ORGANIZATIONAL STATUS OF DONEE:
AMOUNT GIVEN: 25,000.

TOTAL \$ 521,476.

2009

FEDERAL STATEMENTS
MORRIS MORGENSTERN FOUNDATION
C/O PAUL GOODNOUGH, CPA

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STATEMENT 6
FORM 990-PF, PART II, LINE 15
OTHER ASSETS

HISTORICAL DOCUMENTS
ROUNDING

	<u>BOOK VALUE</u>	<u>FAIR MARKET VALUE</u>
	\$ 15,425.	\$ 297,650.
TOTAL	<u>\$ 15,426.</u>	<u>\$ 297,650.</u>

Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

► File a separate application for each return.

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

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

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

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

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

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

Type or print	Name of Exempt Organization MORRIS MORGENSTERN FOUNDATION C/O PAUL GOODNOUGH, CPA	Employer identification number 13-1635719
File by the due date for filing your return. See instructions	Number, street, and room or suite number If a P O box, see instructions 543 COUNTRY CLUB DRIVE B-116	
	City, town or post office, state, and ZIP code For a foreign address, see instructions WOOD RANCH, CA 93065	

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

<input type="checkbox"/> Form 990	<input type="checkbox"/> Form 990-T (corporation)	<input type="checkbox"/> Form 4720
<input type="checkbox"/> Form 990-BL	<input type="checkbox"/> Form 990-T (section 401(a) or 408(a) trust)	<input type="checkbox"/> Form 5227
<input type="checkbox"/> Form 990-EZ	<input type="checkbox"/> Form 990-T (trust other than above)	<input type="checkbox"/> Form 6069
<input checked="" type="checkbox"/> Form 990-PF	<input type="checkbox"/> Form 1041-A	<input type="checkbox"/> Form 8870

- The books are in the care of ► PAUL GOODNOUGH, CPA

Telephone No ► (805) 577-0526 FAX No. ► _____

- If the organization does not have an office or place of business in the United States, check this box ►

- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box ► . If it is for part of the group, check this box ► and attach a list with the names and EINs of all members the extension will cover.

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until 8/15, 20 10, to file the exempt organization return for the organization named above.

The extension is for the organization's return for

► calendar year 20 09 or

► tax year beginning _____, 20 ____, and ending _____, 20 ____.

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

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions	3a \$ 2,854.
b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit	3b \$ 12,688.
c Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions	3c \$ 0.

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

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

Form 8868 (Rev 4-2009)