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Return of Private Foundation
or Section 4947(a)(1) Nonexempt Charitable Trust
Treated as a Private Foundation
Note: The foundation may be able to use a copy of this return to satisfy state reporting require ments

OMB No 1545-0052 2009

Fo	r ca	lendar	year 2009, o	r tax year beg	inning			, 2009	, and endi	ing			, 20
G	Che	ck all t	hat apply	Initial retu	rn		Initial return	of a former p	oublic char	rity	,	Final retui	rn
				Amended	return		Addre	ss change		Na Na	ame char je		
			Name of foun							- 14	A Employe / Identii	ication number	
U		e IRS		DEL MEMORI									
_	lab	-		MAN MIZRAC							13-	-3217479	
С		wise,	Number and s	treet (or P O box	number if	mail is not d	elivered to street	address)	Room/su	ite i	B Telephone number (se	e page 10 of the instr	uctions)
	pri or ty									- 1			
Se	-	ecific		E ONE SOUT					<u> </u>		<u>.</u>	32) 404-1	1860
		ctions.	City or town, s	state, and ZIP co	de					- 19	If exemption application pending, check her		. ▶
											1. Foreign organiza	ations, check here	. ▶∟_
			ISELIN, 1								2. Foreign organiz		
ᄔ	_		of organization				mpt private f				85% test, check computation •	nere and attach	. ▶∟_
\perp	S	ection 4	947(a)(1) none	exempt chantable				ivate founda			If private foundation	n status was termir	nated —
ı	Fair	marke	t value of all a	ssets at end		-		ash 🔙 Acc	crual		under section 507(- 1 1
			m Part II, col			ther (spec			 -	1	If the foundation is	s in a 60-month terr	mination
_		▶ \$	•	9,527.	<u>'</u>	column (c	d) must be on	cash basis)			under section 507(t)(1)(B), check here	<u>. ▶ </u>
P	art i			ue and Expens		(a) Rev	venue and	(b) Net inve	etment	(6)	Adjusted net	(d) Disbur	
				umns (b), (c), an qual the amount		expe	nses per	incon		(0)	Adjusted net income	for char	
	_			11 of the instruc		b	ooks					(cash bas	
	1	Contribut	ion <u>s, gift</u> s, grants, et	c , received (attach sci	nedule) .		4,500.						
	2	Check	► If the fou attach Se	undation is not req	ured to								
	3	Interest		emporary cash inve			107,607.		7,607.		107,607		
	4	Dividen	ds and interest	from securities			39,490.	3	39,490.		39,490	ATCH	1
	5 a	Gross re	ents										
	b	Net rent	al income or (loss)								<u> </u>	
!				le of assets not on									
2012	b	Gross sa assets o	ales pnce for all n line 6a —	795	,000.								
	7	Capital	gain net incom	ie (from Part IV, I	ine 2) .								
1	8	Net sho	ort-term capital	gaın									
1	9	Income	modifications										
1	0 a		les less returns wances										
l	b		st of goods sold	1		_							
l	С	Gross p	profit or (loss) (a	attach schedule)	ALL T								
1	11	Other II	ncome (attach-	attach schedule)	IVE	<u> </u>							
1	12	Total. A	dd lines 1 thro	ugh 1		- 181	151,597.		7,097.		147,097		
1	13	Compen	sation of officers	directors, trustees;	_{0etc]} 20	10 10	39,500.	3	9,500.		39,500		39,500
. 1	14	Other e	mployee salane	as and walles?	[
1			n plans, employ			III							
1			ees (attach sche		JFIN.								
			ting fees (attac										
			- '	s (attach schedul	e) [
1		Interest			[
1		Taxes (a	ttach schedule) (s	ee page 14 of the ins	ructions) *		832.		832.		832		
1		-		chedule) and de	· [
	20	_ '	incy	•									
; 2			*	nd meetings			1,200.		1,200.		1,200		
2				ns									
P 2	23	Other e	xpenses (attach	n schedule) AT(н з		7,378.		7,378.		7,378		3,933
				dministrative ex									
2			es 13 through 2				48,910.	4	8,910.		48,910		43,433
Operating and Administrative Expenses			_	ants paid	[191,100.					1 -	191,100
				ments. Add lines 2			240,010.	4	8,910.		48,910		234,533
1			t line 26 from l										
				nses and disburseme	ents		-88,413.						
			-	e (if negative, er		-		9	8,187.				
				(if negative, enter							98,187		

13-3217479

Form 99	0-PF (2009)	-		3217479	Page 2
Part	Balance Sheets	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End o	
	<u> </u>	amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
1		ang	3,121,236.	2 520 520	2 520 520
2	-	cash investments	3,121,236.	2,539,539.	2,539,539
3	Accounts receivable				
		ıbtful accounts ▶			
4	Pledges receivable				
1 _		ubtful accounts ▶			
5				-	
6		officers, directors, trustees, and other			
_		ach schedule) (see page 16 of the instructions)			
7		receivable (attach schedule)			
		ıbtful accounts ▶			
8 8		se	·		
Assets 0 0 0		deferred charges	200,000.		<u></u>
- 1		te government obligations (attach schedule)	200,000.		
		e stock (attach schedule)	399,252.	1,092,536.	1,109,988
11	Investments - land, building	s	3,3,12,32.	1,002,000.	1,100,000
	and equipment basis Less accumulated deprecia	ation			
42	(attach schedule)				
12		loans			
14	Land, buildings, and	ach schedule)			
1	equipment basis Less accumulated deprecia	ation			
15	(attach schedule)			· - ·	
16		▶) _			
'6		preted by all filers - see the page 1, item l)	3,720,488.	3,632,075.	3,649,527
17				370327073.	3/013/321
18					
1					
19 20 21		ors, trustees, and other disqualified persons			
21		otes payable (attach schedule)			
22		e P)			
	Other habilities (describe	/			
23	Total liabilities (add line	es 17 through 22)			
1	Foundations that fol	low SFAS 117, check here ►X			
1	and complete lines	24 through 26 and lines 30 and 31.			
3 24	· ·		3,720,488.	3,632,075.	
25					
26					
<u>.</u>	•	not follow SFAS 117,			
5		plete lines 27 through 31.			•
24 25 26 27 28 29 30		cipal, or current funds			
28		r land, bldg , and equipment fund	-		
29	, , ,	ulated income, endowment, or other funds	-		
30		d balances (see page 17 of the	-		
2			3,720,488.	3,632,075.	
31	Total liabilities and net	t assets/fund balances (see page 17			
			3,720,488.	3,632,075.	
art		anges in Net Assets or Fund B			
		alances at beginning of year - Part II, o		agree with	
		d on prior year's return)			3,720,488.
Ente	er amount from Part I.	line 27a		2	-88,413.
Oth	er increases not includ	ed in line 2 (itemize) ▶		3	
Add					3,632,075.
n		1 - 0 / 1		1 _ 1	
Tota	al net assets or fund ha	line 2 (itemize) ▶ plances at end of year (line 4 minus lin	ne 5) - Part II, column (b)	line 30	3,632,075.

Part IV Capital Gains	and Losses for Tax on Inv	estment Income			
• •	d describe the kind(s) of property sold (= .	(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a			D DOTTONION		_
b					
c					
d		-			
<u>e</u>					<u> </u>
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) mini	
<u>a</u>					
b					
<u>c</u>					
d					-
Complete only for accets of	howing gain in column (h) and owr	ed by the foundation on 12/31/60			
	(j) Adjusted basis	(k) Excess of col (i)		Gains (Col (h) g	
(i) F M V as of 12/31/69	as of 12/31/69	over col (j), if any		Losses (from co	
_a					
<u>b</u>					
С					
_e		non also artes in Dort I has 7			
2 Capital gain net income or	(net capital loss) {	gain, also enter in Part I, line 7 (loss), enter -0- in Part I, line 7	2		
	or (loss) as defined in sections 12				
	line 8, column (c) (see pages 13	4			
If (loss), enter -0- in Part I, I	ıne 8	<u> </u>	3		
Part V Qualification Ur	ider Section 4940(e) for Redu	uced Tax on Net Investment Inc	ome		
	the section 4942 tax on the distrib	outable amount of any year in the ba	ase perio	d? □	Yes X No
	not qualify under section 4940(e)	<u> </u>	foro mak	ing any ontrine	
(a)		, see page 18 of the instructions be	rore mak	ing any entries (d)	
Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets		Distribution ra (col (b) divided by	col (c))
2008	162,311.	3,642,663.			0.044558
2007	202,634. 178,533.	3,682,497.			0.055026
2006	178,533.	3,807,562. 3,710,583.			0.046889
2005	35,860.	3,548,427.			0.010106
2004	33,000.	3,340,427.			0.010100
2 Total of line 1, column (d)			2		0.190412
	for the 5-year base period - divide	the total on line 2 by 5, or by the			0.130112
-	dation has been in existence if less	= = = = = = = = = = = = = = = = = = = =	3		0.038082
4 Enter the net value of non	charitable-use assets for 2009 fro	m Part X, line 5	4	3,	632,720.
5 Multiply line 4 by line 3			5		138,341.
			6		982.
			7		139,323.
					024 522
8 Enter qualifying distribution If line 8 is equal to or great VI instructions on page	eater than line 7, check the box i	n Part VI, line 1b, and complete t	8 hat part	using a 1% ta	234,533. x rate See the

Par	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of t	he ins	tructi	ons)_
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1			
	Date of ruling or determination letter (attach copy of ruling letter if necessary - see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		9	82.
	here X and enter 1% of Part I, line 27b			
С	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-) 2			
3	Add lines 1 and 2			82.
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			82.
6	Credits/Payments			
	2009 estimated tax payments and 2008 overpayment credited to 2009 6a 1,092.			
	Exempt foreign organizations-tax withheld at source			
	Tax paid with application for extension of time to file (Form 8868) 6c 0 .			
d	Backup withholding erroneously withheld			
7	Total credits and payments Add lines 6a through 6d		Ι,(92.
8	Enter any penalty for underpayment of estimated tax. Check here If Form 2220 is attached 8			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			10.
11	Enter the amount of line 10 to be Credited to 2010 estimated tax ▶ 0 · Refunded ▶ 11		1	10.
	t VII-A Statements Regarding Activities		<u> </u>	
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	
	participate or intervene in any political campaign?	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19			.,
	of the instructions for definition)?	1b		X
	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			
C	Did the foundation file Form 1120-POL for this year?	1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation \blacktriangleright \$ (2) On foundation managers \blacktriangleright \$			
0	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
	on foundation managers \$			37
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
	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			37
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4 b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		
	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			
	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that		Х	
_	conflict with the state law remain in the governing instrument?	6	$\frac{x}{x}$	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7		
8a	NV NV			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General	i		
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8 b	Х	
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 on page			
	27)? If "Yes," complete Part XIV	9		Х
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their		-	_
	names and addresses	10		Х
-			0-PF (2009)
	·	_		•

orm	990-PF (2009) 13-3217479,			Page \$
ar	₹ 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 section 512(b)(13)? If "Yes," attach schedule (see page 20 of the instructions)	11		X
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before			
	August 17, 2008?	12		_X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	<u></u>
	Website address N/A		zz=-	
14	The books are in care of ▶GERALD WENDEL Located at ▶2877 PARADISE ROAD LAS VEGAS, NV ZIP+4 ▶ 89109	35-3	911	- - -
			-	
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			
'ar	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required	1		г .
	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?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	uisquaimed person.			
	(b) I difficilly a disqualified person.			
	(4) Fay compensation to, or pay of reimburse the expenses of, a disqualment persons.	ĺ		
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if			
	the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days)			
h	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
Ü	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)?	1ь		
	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			l
	were not corrected before the first day of the tax year beginning in 2009?	1 c		Х
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))			
а	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? Yes X No			
	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)			ļ ,,
	to all years listed, answer "No" and attach statement - see page 20 of the instructions)	2 b		Х
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	>	1		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business	}		
	enterprise at any time during the year?			
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	1	1	1

Х

Χ

of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the

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

orm	990-PF (2009)		13-321	1		Page (
Par	VII-B Statements Regarding Activities for	or Which Form 4	720 May Be Requ	ired (continued)		
5 a	During the year did the foundation pay or incur any amou	int to				
	(1) Carry on propaganda, or otherwise attempt to influe	nce legislation (section	4945(e))?	Yes X No	,	
	(2) Influence the outcome of any specific public election	(see section 4955), o	or to carry on,			
	directly or indirectly, any voter registration drive?			Yes X No	,	
	(3) Provide a grant to an individual for travel, study, or ot				,	
	(4) Provide a grant to an organization other than a char					
	section 509(a)(1), (2), or (3), or section 4940(d)(2)?	. , •		Yes X No	,	
	(5) Provide for any purpose other than religious, charita					
	purposes, or for the prevention of cruelty to children of	• • • • • • • • • • • • • • • • • • • •		Yes X No	,	
_	If any answer is "Yes" to 5a(1)-(5), did any of the trans				'	
U	Regulations section 53 4945 or in a current notice regard				5b	
	-	-		. —	30	
	Organizations relying on a current notice regarding disas					
С	If the answer is "Yes" to question 5a(4), does the foundation			Yes X No		
	because it maintained expenditure responsibility for the g			. Yes X No	'	
	If "Yes," attach the statement required by Regulations sec					
6 a	Did the foundation, during the year, receive any funds, of			m., 🖘		
	on a personal benefit contract?			Yes X No		
b	Did the foundation, during the year, pay premiums, direct	ctly or indirectly, on a p	personal benefit contrac	ct?	6b	X
	If "Yes" to 6b, file Form 8870					
	At any time during the tax year, was the foundation a pa		-			
	If yes, did the foundation receive any proceeds or have a					X
Par	t VIII Information About Officers, Directors	, Trustees, Foun	dation Managers.	Highly Paid Emplo	ovees.	
	and Contractors	•	aatron managoro,	ringiniy i did Empi	-,,	
1	and Contractors List all officers, directors, trustees, foundation m	anagers and their	compensation (see			
1		anagers and their	compensation (see	page 22 of the instru	uctions). (e) Expense	
1	List all officers, directors, trustees, foundation m	anagers and their	compensation (see	page 22 of the instru	uctions).	
	List all officers, directors, trustees, foundation m (a) Name and address	anagers and their	compensation (see (c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	uctions). (e) Expense other allov	vances
	List all officers, directors, trustees, foundation m (a) Name and address	anagers and their	compensation (see	page 22 of the instru (d) Contributions to employee benefit plans	uctions). (e) Expense	vances
ĀŢ	List all officers, directors, trustees, foundation m (a) Name and address	anagers and their	compensation (see (c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	uctions). (e) Expense other allov	vances
ĀŢ	List all officers, directors, trustees, foundation m (a) Name and address FACHMENT 5	anagers and their	compensation (see (c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	uctions). (e) Expense other allov	vances
ĀT	List all officers, directors, trustees, foundation m (a) Name and address FACHMENT 5	anagers and their	compensation (see (c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	uctions). (e) Expense other allov	vances
ĀT	List all officers, directors, trustees, foundation m (a) Name and address TACHMENT 5	anagers and their	compensation (see (c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	uctions). (e) Expense other allov	vances
ĀT	List all officers, directors, trustees, foundation m (a) Name and address TACHMENT 5	anagers and their	compensation (see (c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	uctions). (e) Expense other allov	vances
ĀT	List all officers, directors, trustees, foundation m (a) Name and address TACHMENT 5	anagers and their	compensation (see (c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	uctions). (e) Expense other allov	vances
ĀT'	List all officers, directors, trustees, foundation m (a) Name and address TACHMENT 5 Compensation of five highest-paid employees (ot	anagers and their (b) Title, and average hours per week devoted to position	compensation (see (c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	uctions). (e) Expense other allow	vances
ĀT'	List all officers, directors, trustees, foundation m (a) Name and address TACHMENT 5	anagers and their (b) Title, and average hours per week devoted to position	compensation (see (c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation - 0 -	uctions). (e) Expense other allow	vances
ĀT'	List all officers, directors, trustees, foundation m (a) Name and address FACHMENT 5 Compensation of five highest-paid employees (of none, enter "NONE."	anagers and their (b) Title, and average hours per week devoted to position her than those inc (b) Title, and average	(c) Compensation (see (c) Compensation (If not paid, enter -0-) 39, 500.	e page 22 of the instru (d) Contributions to employee benefit plans and deferred compensation - 0 - e page 23 of the instructions to employee benefit	(e) Expense other allow — ()	account,
ĀT'	List all officers, directors, trustees, foundation m (a) Name and address TACHMENT 5 Compensation of five highest-paid employees (ot	anagers and their (b) Title, and average hours per week devoted to position	compensation (see (c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation - 0 -	uctions). (e) Expense other allow - 0	account,
ĀT'	List all officers, directors, trustees, foundation m (a) Name and address FACHMENT 5 Compensation of five highest-paid employees (of none, enter "NONE."	anagers and their (b) Title, and average hours per week devoted to position her than those inc (b) Title, and average hours per week	(c) Compensation (see (c) Compensation (If not paid, enter -0-) 39, 500.	e page 22 of the instru (d) Contributions to employee benefit plans and deferred compensation - 0 - ee page 23 of the inst (d) Contributions to employee benefit plans and deferred	(e) Expense other allow — ()	account,
AT'	List all officers, directors, trustees, foundation m (a) Name and address FACHMENT 5 Compensation of five highest-paid employees (of none, enter "NONE."	anagers and their (b) Title, and average hours per week devoted to position her than those inc (b) Title, and average hours per week	(c) Compensation (see (c) Compensation (If not paid, enter -0-) 39, 500.	e page 22 of the instru (d) Contributions to employee benefit plans and deferred compensation - 0 - ee page 23 of the inst (d) Contributions to employee benefit plans and deferred	(e) Expense other allow — ()	account,
AT" 2 (a)	List all officers, directors, trustees, foundation m (a) Name and address TACHMENT 5 Compensation of five highest-paid employees (of f none, enter "NONE." Name and address of each employee paid more than \$50,000	anagers and their (b) Title, and average hours per week devoted to position her than those inc (b) Title, and average hours per week	(c) Compensation (see (c) Compensation (If not paid, enter -0-) 39, 500.	e page 22 of the instru (d) Contributions to employee benefit plans and deferred compensation - 0 - ee page 23 of the inst (d) Contributions to employee benefit plans and deferred	(e) Expense other allow — ()	account,
AT"	List all officers, directors, trustees, foundation m (a) Name and address TACHMENT 5 Compensation of five highest-paid employees (of f none, enter "NONE." Name and address of each employee paid more than \$50,000	anagers and their (b) Title, and average hours per week devoted to position her than those inc (b) Title, and average hours per week	(c) Compensation (see (c) Compensation (If not paid, enter -0-) 39, 500.	e page 22 of the instru (d) Contributions to employee benefit plans and deferred compensation - 0 - ee page 23 of the inst (d) Contributions to employee benefit plans and deferred	(e) Expense other allow — ()	account,
AT"	List all officers, directors, trustees, foundation m (a) Name and address TACHMENT 5 Compensation of five highest-paid employees (of f none, enter "NONE." Name and address of each employee paid more than \$50,000	anagers and their (b) Title, and average hours per week devoted to position her than those inc (b) Title, and average hours per week	(c) Compensation (see (c) Compensation (If not paid, enter -0-) 39, 500.	e page 22 of the instru (d) Contributions to employee benefit plans and deferred compensation - 0 - ee page 23 of the inst (d) Contributions to employee benefit plans and deferred	(e) Expense other allow — ()	account,
AT"	List all officers, directors, trustees, foundation m (a) Name and address TACHMENT 5 Compensation of five highest-paid employees (of f none, enter "NONE." Name and address of each employee paid more than \$50,000	anagers and their (b) Title, and average hours per week devoted to position her than those inc (b) Title, and average hours per week	(c) Compensation (see (c) Compensation (If not paid, enter -0-) 39, 500.	e page 22 of the instru (d) Contributions to employee benefit plans and deferred compensation - 0 - ee page 23 of the inst (d) Contributions to employee benefit plans and deferred	(e) Expense other allow — ()	account,
AT"	List all officers, directors, trustees, foundation m (a) Name and address TACHMENT 5 Compensation of five highest-paid employees (of f none, enter "NONE." Name and address of each employee paid more than \$50,000	anagers and their (b) Title, and average hours per week devoted to position her than those inc (b) Title, and average hours per week	(c) Compensation (see (c) Compensation (If not paid, enter -0-) 39, 500.	e page 22 of the instru (d) Contributions to employee benefit plans and deferred compensation - 0 - ee page 23 of the inst (d) Contributions to employee benefit plans and deferred	(e) Expense other allow — ()	account,
AT"	List all officers, directors, trustees, foundation m (a) Name and address TACHMENT 5 Compensation of five highest-paid employees (of f none, enter "NONE." Name and address of each employee paid more than \$50,000	anagers and their (b) Title, and average hours per week devoted to position her than those inc (b) Title, and average hours per week	(c) Compensation (see (c) Compensation (If not paid, enter -0-) 39, 500.	e page 22 of the instru (d) Contributions to employee benefit plans and deferred compensation - 0 - ee page 23 of the inst (d) Contributions to employee benefit plans and deferred	(e) Expense other allow — ()	account,

Form **990-PF** (2009)

Part VIII	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid E and Contractors (continued)	mployees,	
3 Five high	est-paid independent contractors for professional services (see page 23 of the instructions). If	none, enter "I	NONE."
	(a) Name and address of each person paid more than \$50,000 (b) Type of service		mpensation
NONE			
-			
-			
Total number	er of others receiving over \$50,000 for professional services		NONE
		<u> </u>	
Part IX-A	Summary of Direct Charitable Activities		
List the found	dation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number		
	ons and other beneficianes served, conferences convened, research papers produced, etc	E E	penses
1 N/A			
•			
2			_
2			
	· · · · · · · · · · · · · · · · · · ·		
3			
4			
	Summary of Program-Related Investments (see page 23 of the instructions) two largest program-related investments made by the foundation during the tax year on lines 1 and 2		
	two largest program-related investments made by the foundation during the tax year on lines 1 and 2		mount
1 NONE			
-			
2	~		
	gram-related investments. See page 24 of the instructions		
3 NONE			
Total. Add I	nes 1 through 3	▶	

Form 990-PF (2009)

Pa	Minimum Investment Return (All domestic foundations must complete this part. Forei see page 24 of the instructions.)	gn foundation	IS,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes		
а	Average monthly fair market value of securities	1a	3,425,734.
b		1b	262,307.
C		1c	0.
d	Total (add lines 1a, b, and c)	1d	3,688,041.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Cultivant line 2 from line 4d	3	3,688,041.
4	Cash deemed held for charitable activities Enter 1 1/2 % of line 3 (for greater amount, see page 25		
	of the instructions)	4	55,321.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	3,632,720.
6	Minimum investment return. Enter 5% of line 5	6	181,636.
Pa	Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) privation foundations and certain foreign organizations check here ▶ ☐ and do not complete this page 25.		
1	Minimum investment return from Part X, line 6	1	181,636.
2 a	Tax on investment income for 2009 from Part VI, line 5		
b]	
С	Add lines 2a and 2b	2c	982.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	180,654.
4	Recoveries of amounts treated as qualifying distributions	4	-
5	Add lines 3 and 4	5	180,654.
6	Deduction from distributable amount (see page 25 of the instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1	7	180,654.
Pa	art XII Qualifying Distributions (see page 25 of the instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes	}	
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	234,533.
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 charitable, etc.,		
	purposes	2	0.
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	0.
b	Cash distribution test (attach the required schedule)	3 b	0.
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	234,533.
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 page 26 of the instructions)	5	982.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	233,551.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating w qualifies for the section 4940(e) reduction of tax in those years	hether the four	ndation

Form **990-PF** (2009)

13-3217479

Pa	rt XIII Undistributed Income (see page	e 26 of the instruction	ns)		
		(a)	(b)	(c)	(d)
1	Distributable amount for 2009 from Part XI,	Corpus	Years prior to 2008	2008	2009
	line 7				180,654.
2	Undistributed income, if any, as of the end of 2009				
_	Enter amount for 2008 only			175,968.	
h	Total for pnor years 20 07 ,20 06 20 05			· -	
3	Excess distributions carryover, if any, to 2009		_	· · · · · · · · · · · · · · · · · · ·	
_	From 2004				
- L					
ن	From 2006				
a	From 2007				
	F10III 2006	0.			
	Total of lines 3a through e	0.		<u> </u>	
4	Qualifying distributions for 2009 from Part XII,				
	line 4 ▶ \$ 234,533.			175 060	
а	Applied to 2008, but not more than line 2a			175,968.	
b	Applied to undistributed income of prior years (Election				
	required - see page 26 of the instructions)				
С	Treated as distributions out of corpus (Election				
	required - see page 26 of the instructions)				
d	Applied to 2009 distributable amount				58,565.
θ	Remaining amount distributed out of corpus	0.			
5	Excess distributions carryover applied to 2009	0.			0.
	(If an amount appears in column (d), the same		•		
6	amount must be shown in column (a)) Enter the net total of each column as				
•	indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
	Prior years' undistributed income Subtract				
b	line 4b from line 2b				
С	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				
d	Subtract line 6c from line 6b Taxable amount - see page 27 of the instructions				
е	Undistributed income for 2008 Subtract line		· · · · · · · · · · · · · · · · · · ·		
	4a from line 2a Taxable amount - see page				
	27 of the instructions				
f	Undistributed income for 2009 Subtract lines				
	4d and 5 from line 1 This amount must be				122,089.
7	distributed in 2010				
′	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (see page 27 of the				
	instructions)		<u> </u>		· · · · · · · · · · · · · · · · · · ·
8	Excess distributions carryover from 2004 not applied on line 5 or line 7 (see page 27 of the				
	instructions)				
9	Excess distributions carryover to 2010.]	
	Subtract lines 7 and 8 from line 6a	0.			
10	Analysis of line 9				
а	Excess from 2005				
b	Excess from 2006				
С	Excess from 2007				
d	Excess from 2008				
	Excess from 2009 0 .				

For	n 990-PF (2009)			13-3	217479.	Page 10				
Pa	rt XIV Private Oper	ating Foundations	see page 27 of the	e instructions and Pa	art VII-A, question	9) NOT APPLICABLE				
1 a	If the foundation has	received a ruling or d	etermination letter th	at it is a private opei	rating					
	foundation, and the ruling	g is effective for 2009, e	nter the date of the ruling	1	>					
b		eck box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)								
_		Tax year	Prior 3 years							
2 a	Enter the lesser of the ad-	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total				
	justed net income from Part I or the minimum investment	(a) 2003	(5) 2000	(6) 2007	(u) 2008					
	return from Part X for each									
	year listed				 					
b	85% of line 2a			 	 					
С	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									
0	Qualifying distributions made				· 					
	directly for active conduct of exempt activities. Subtract line 2d from line 2c.									
3	Complete 3a, b, or c for the									
а	alternative test relied upon "Assets" alternative test - enter-									
a	445									
	(1) Value of all assets (2) Value of assets qualifying		_							
	under section									
b	4942(j)(3)(B)(i) "Endowment" alternative test-	_								
	enter 2/3 of minimum invest-									
	ment return shown in Part X,									
С	"Support" alternative test - enter	<u></u>			 					
·	(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									
	()(3)(B)(m)				-					
	(3) Largest amount of sup- port from an exempt									
	organization									
Da		any Information /C	omplete this part	only if the found	lation had \$5.0	00 or more in assets				
<u>г</u> а	at any time o	luring the year - se	e page 28 of the ir		ation nau \$5,0					
1	Information Regarding									
а	List any managers of before the close of any	the foundation who h tax year (but only if th	lave contributed mol ney have contributed	re than 2% of the tota more than \$5,000) (S	al contributions re See section 507(d)(ceived by the foundation (2))				
	N/A									
b	List any managers of ownership of a partner					ually large portion of the				
	NONE			•						
2	Information Regarding	Contribution, Grant	, Gift, Loan, Scholars	hip, etc., Programs:		<u> </u>				
		•		· · · · · ·	itable organization	ns and does not accept				
	unsolicited requests forganizations under other	or funds. If the foun	dation makes gifts,	grants, etc (see page	e 28 of the instru	uctions) to individuals or				
a	The name, address, a	_ •			oe addressed	1				
b	The form in which appl	ications should be sul	omitted and informat	on and materials they	should include					
c	Any submission deadli	nes								
d	Any restrictions or lii factors	mitations on awards,	such as by geogr	aphical areas, charita	able fields, kinds	of institutions, or other				

Part XV Supplementary Information (continued)							
3 Grants and Contributions Paid Durin	ng the Year or Appr		Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount			
Name and address (home or business)	or substantial contributor	recipient	- Contribution				
a Paid during the year							
ATTACHMENT 6							
MINGHIENI O							
		İ					
Total		·		191,100.			
b Approved for future payment							
		ļ					
•							
Total	· <u></u>		▶ 3b				

Form 99	0-PF (2009)			13-	-3217479	Page 12
Part 2		icing Activ	vities			
	oss amounts unless otherwise indicated		ated business income	Excluded by	y section 512, 513, or 514	(e)
_		(a) Business code	(b)	(c) Exclusion code	(d)	Related or exempt function income (See page 28 of the instructions.)
	gram service revenue			_		the instructions.)
a b				 		
c					- :-	
d						
8		\				
f		-				
•	Fees and contracts from government agencies					
_	bership dues and assessments					
	est on savings and temporary cash investments					
	dends and interest from securities			14	147,097.	
	rental income or (loss) from real estate					
a	Debt-financed property					
b	Not debt-financed property					
	ental income or (loss) from personal property .					
7 Othe	er investment income					
	or (loss) from sales of assets other than inventory			- 		
9 Net	income or (loss) from special events			-		
	ss profit or (loss) from sales of inventory			 		
	er revenue a				<u> </u>	
b				-		
C						
d e						
-	total Add columns (b), (d), and (e)			1	147,097.	
	II. Add line 12, columns (b), (d), and (e)					
	rksheet in line 13 instructions on page 28					
Part >	VI-B Relationship of Activities	to the Ac	complishment of Ex	empt Purp	oses	
Line N	the accomplishment of the for page 29 of the instructions)					
	, page and the same and the sam					
		·· <u></u>				· · · · · · · · · · · · · · · · · · ·
1				-		
					-	
					 .	
			NOT APPLICABL	-Ε 	<u>-</u>	
	- -					•
						
						
	- -		·		······································	
	 				-	
	- 					

Pa	rt XVI	Information I Exempt Orga		ransfers To and	Transac	tions	and Relati	onships With I	Nonc	harit	able
1	ın se	the organization directly	ode (other than	section 501(c)(3) or	ganızatıons)					Yes	No
а	organ Trans	izations? ifers from the reporting fo	oundation to a no	oncharitable exempt orga	inization of						
		ash									X
		other assets	<i>.</i>			• • • •		<i></i>	1a(2)		X
b		transactions ales of assets to a nonch	aritable evemot o	rmanization					15/1)		x
		urchases of assets from									X
		ental of facilities, equipme							[]		X
		eimbursement arrangeme									Х
		oans or loan guarantees									X
		erformance of services o									X
		ng of facilities, equipmen									<u> </u>
d		e answer to any of t			_			-			
		of the goods, other in any transaction or			-						
	value	in any transaction of	onaing unung	goment, ener in con	(4)	14.40	or the good	o, other accets, or	00.10	20 100	civea
(a)	Line no	(b) Amount involved	(c) Name of r	noncharitable exempt organ	ization	(d) Desc	cription of transf	ers, transactions, and sha	nng ama	ngeme	nts
		N/A				N/A					
										_	
		,									
							,				
		_							_		
											—
			•								
								•			
2 a	Is the	foundation directly or	indirectly affiliat	ted with, or related to	, one or mo	re tax-e	xempt organiz	ations described in			
	sectio	on 501(c) of the Code (oth	er than section 5	01(c)(3)) or in section 5	27?			!	Ye	s 🔼	No
<u>b</u>	If "Ye	s," complete the following		(h) Tuno of or		1		a) December of colors			
	.	(a) Name of organization		(b) Type of org	anization			c) Description of relations	snip		
	Under belief,	penalties of perjury, I declar it is true, correct, and comp	ire that I have exa pleter Declaration o	amined this return, including of preparer (other than tax)	ng accompany payer or fiduc:	ing sched ary) is bas	lules and staten sed on all inforr	nents, and to the best of mation of which prepare	of my kı r has ar	nowled	ge and wledge
	belief, it is true correct, and complete Declaration of preparer (other than taxpayer or fiduciary) is based on all information						Truster		•	•	
اه	<u>-</u>	ignature of officer or trustee	Ugho-	<u>'</u>		 Date	> 10	Title			
Ę.		grature or officer of trustee	Α		Date		T	Preparer's	ıdentıf	/ing	
Sign Here	ν° >	Preparer's		~		1, _	Check if self-employe	number (Se	e Signa	ture or	
Si	Paid Preparer's Use Only	signature	NUL		- 11	0110		063-38	-451		
	Prep Use	Firm's name (or yours if		N MIZRACH & TI	HALER, I	LP		EIN ▶ 13-1790	992		
		self-employed), address, and ZIP code	✓ 555 RC	OUTE ONE SOUTH		088	330	Phone no 732-4	∩ <i>I</i> = 1	960	
		1 2 0000	エクロアエル	I, NJ		000) J U	Phone no 732-4	O-4-T	000	

- DIVIDENDS AND INTEREST FROM SECURITIES PART I FORM 990PF,

ADJUSTED NET INCOME	39,490.	39,490.
NET INVESTMENT INCOME	39,490.	39,490.
REVENUE AND EXPENSES PER BOOKS	39,490.	39,490.
		TOTAL
	T	
DESCRIPTION	MERRILL LYNCH	

ADJUSTED NET INCOME	832.	832.
NET INVESTMENT INCOME	832.	832.
REVENUE AND EXPENSES PER BOOKS	832.	832.
		TOTALS
DESCRIPTION	FEDERAL TAXES	

CHARITABLE PURPOSES			3,933.			3,933.
ADJUSTED NET INCOME	300.	495.	3,933.	250.	2,400.	7,378.
NET INVESTMENT INCOME	300.	495.	3,933.	250.	2,400.	7,378.
REVENUE AND EXPENSES PER BOOKS		495.	3,933.	250.	2,400.	7,378.
						TOTALS
DESCRIPTION	BANK CHARGES	FOUNDATION DUES	INSURANCE	FILING FEES	RENT	

ATTACHMENT 3

TTACHMENT 4	
A	

13-3217479

DESCRIPTION	ENDING BOOK VALUE	ENDING <u>FMV</u>
WALMART STORES NM GENL ELEC CAP CORP NM BOEING CAPITAL CRP BE HSBC FINANCE CORP GOLDMAN SACHS GROUP INC CONCOPHILLIPS COCA-COLA CO DELL INC. E.I. DUPONT DE NEMOURS JP MORGAN CHASE MORGAN STANLEY WAL-MART STORES INC. WAL-MART STORES INC. AT&T INC. APACHE CORPORATION	24,252. 150,000. 50,000. 54,787. 53,020. 53,434. 52,952. 53,844. 44,175. 107,506. 108,732. 80,761.	25,896. 156,186. 52,658. 100,000. 54,435. 54,472. 54,472. 43,630. 107,520. 110,975. 53,344.
TOTALS	1,092,536.	1,109,988.

AND TRUSTEES	
, DIRECTORS,	
OF OFFICERS,	
III - LIST	
F, PART VI	
FORM 990P	

ATTACHMENT

TITLE AND AVERAGE HOURS PER NAME AND ADDRESS

WEEK DEVOTED TO POSITION

COMPENSATION

2877 PARADISE ROAD GERALD WENDEL

PRESIDENT

30,000.

LAS VEGAS, NV 89109

PH 2904

THOMAS BERGMAN

C/O THOMAS H. BERGMAN & ASSOCIATES

4695 LAKE FOREST DRIVE

CINCINNATI, OH 45242

VICE-PRESIDENT

MICHAEL WENDEL

155 EAST 29TH STREET NEW YORK, NY 10016

TREASURER

DAVID DORFMAN

SECRETARY

C/O DORFMAN MIZRACH & THALER, LLP

555 ROUTE ONE SOUTH ISELIN, NJ 08830

BRIAN WENDEL

2800 NIELSON WAY, SUITE 206 SANTA MONICA, CA 90405

AND TRUSTEES	
DIRECTORS,	
IST OF OFFICERS,	
LIST (
PART VIII -	
PART	
990PE,	
FORM	

ATTACHMENT 5 (CONT'D)

NAME AND ADDRESS

TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION

COMPENSATION

LAS VEGAS, NV 89109 DIANE WENDEL 2877 PARADISE ROAD PH 2904

9,500.

GRAND TOTALS

39,500.

FORM 990PE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

EVEN POUL FOR AVIOLOGICAL CONTINUED LINES	בטדה הסעדואם דונף זבטא		ATTACHMENT 6
	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
ADAPTIVE SPORTS FOUNDATION	NONE	GENERAL CHARITABLE PURPOSES	. 10,000.
PO BOX 266	501 (C) (3)		
100 SILVERMAN WAY			
WINDHAM, NY 12496	,		
ANDERSON RANCH	NONE	GENERAL CHARITABLE PURPOSES	5,000
OWL CREEK RD	501 (C) 3		
SNOWMASS VILLAGE, CO 81615			
MERCY & SHARING	NONE	GENERAL CHARITABLE PURPOSES	75,000
201 NORTH MILL STREET, SUITE 201	501 (C) (3)		
ASPEN, CO 81611			
NEVADA CANCER INSTITUTE	NONE	GENERAL CHARITABLE PURPOSES	50,000.
10000 W CHARLESTON	501 (C) (3)		
LAS VEGAS, NV 89135			
T COLIN CAMPBELL FOUNDATION	NONE	GENERAL CHARITABLE PURPOSES	5,000
8 FIDDLERS GREEN	501 (C) (3)		
LANSING, NY 14882			
BOYS & GIRLS TOWN	NONE	GENERAL CHARITABLE PURPOSES	2,600.
821 N MOJAVE RD	501 (C) (3)		
LAS VEGAS, NV 89101			

ATTACHMENT 6 (CONT'D)

	ı
YEAR	
THE	
TIONS PAID DURING THE YEAR	
PAID	
AND CONTRIBUTIONS	-
AND	
- GRANTS A	-
- 1	l
×	l
PART	
990PF,	
FORM	

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		
	AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION AN	AMOUNT
MARTY HENNESSEY JR TENNIS FOUNDATION	NONE	GENERAL CHARITABLE PURPOSES	7,900.
PO BOX 60117	501 (C) (3)		
LAS VEGAS, NV 89160			
NATHAN ADELSON HOSPICE	NONE	GENERAL CHARITABLE PURPOSES	4,200.
4131 SWENSON ST	501 (C) (3)		
LAS VEGAS, NV 89119			
KEVIN O'KEFFE	NONE	GENERAL CHARITABLE PURPOSES	10,000
6300 W. OAKLEY BLVD	501 (C) (3)		
LAS VEGAS, NV 89146			
RHETT SYNDROME FOUNDATION	NONE	GENERAL CHARITABLE PURPOSES	300.
60 THE GLEN	501 (C) (3)		
GLEN HEAD, NY 11545			
CHALLENGE ASPEN	NONE	GENERAL CHARITABLE PURPOSES	1,500
PO BOX 6639	501 (C) (3)		
SNOWMASS VILLAGE, CO 81615			
LEUKEMIA 6 LYMPHOMA SOCIETY	NONE	GENERAL CHARITABLE PURPOSES	200
6280 S VALLEY VIEW BLVD SUITE 342	501 (C) (3)		
LAS VEGAS, NV 89118			

ATTACHMENT 6 (CONT'D)

LISA WENDEL MEMORIAL FOUNDATION

YEAR	
THE	
PAID DURING	
PAID	
CONTRIBUTIONS	
AND C	
GRANTS	
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PART	
990PF,	
FORM	

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		
	AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
HABITAT FOR HUMANITY	501 (C) (3)	GENERAL CHARITABLE PURPOSES	2,000
121 HABITAT STREET			
AMERICUS, GA 31709			
CONGREGATION B'NAI ISRAEL	NONE	GENERAL CHARITABLE PURPOSES	1,500.
2710 PARK AVENUE	501 (C) (3)		
BRIDGEPORT, CT 06604			
LAKE TAHOE SHAKESPEARE FESTIVAL	NONE	GENERAL CHARITABLE PURPOSES	1,500
948 INCLINE WAY	501 (C) (3)		
INCLINE VILLAGE, NV 89451			
NEVADA WOMENS PHILANTHROPY	NONE	GENERAL CHARITABLE PURPOSES	5,000.
S. 4TH STREET	501 (C) (3)		
LAS VEGAS, NV 89117			
CANCER RESEARCH AND TREATMENT FUND	NONE	GENERAL CHARITABLE PURPOSES	2,000.
500 EAST 77TH STREET SUITE 1001	501 (C) (3)		
NEW YORK, NY 10162			
SAPPHIRE FOUNDATION	NONE	GENERAL CHARITABLE PURPOSES	3,650
1315 SPRUCE STREET	501 (C) (3)		
PHILADELPHIA, PA 19107			

ATTACHMENT 6

FOUNDATION	
MEMORIAL	
WENDEL	
LISA	

13-3217479

FORM 990PE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR

FOUNDATION STATUS OF RECIPIENT

PURPOSE OF GRANT OR CONTRIBUTION

3,750

AMOUNT

ATTACHMENT 6 (CONT'D)

3220 w CHARLESTON BLVD PLANNED PARENTHOOD

LAS VEGAS, NV 89102

RECIPIENT NAME AND ADDRESS

501 (C) (3)

NONE

GENERAL CHARITABLE PURPOSES

TOTAL CONTRIBUTIONS PAID

191,100.

ATTACHMENT 6

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SCHEDULE D (Form 1041)

Department of the Treasury Internal Revenue Service

Capital Gains and Losses

► Attach to Form 1041, Form 5227, or Form 990-T. See the instructions for Schedule D (Form 1041) (also for Form 5227 or Form 990-T, if applicable).

OMB No 1545-0092

2009

LISA WENDEL MEMORIAL FOUNDATION Name of estate or trust Employer identification number C/O DORFMAN MIZRACH & THALER, LLP 13-3217479 Note: Form 5227 filers need to complete only Parts I and II Short-Term Capital Gains and Losses - Assets Held One Year or Less (e) Cost or other basis (f) Gain or (loss) for (a) Description of property (b) Date acquired (c) Date sold (see page 4 of the instructions) the entire year Subtract (e) from (d) (d) Sales price (Example 100 shares 7% preferred of "Z" Co) (mo, day, yr) (mo, day, yr) 1a b Enter the short-term gain or (loss), if any, from Schedule D-1, line 1b 1b Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824 Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts 3 Short-term capital loss carryover Enter the amount, if any, from line 9 of the 2008 Capital Loss 4 Net short-term gain or (loss). Combine lines 1a through 4 in column (f) Enter here and on line 13, 0. Long-Term Capital Gains and Losses - Assets Held More Than One Year Part II (e) Cost or other basis (f) Gain or (loss) for (a) Description of property (Example 100 shares 7% preferred of "Z" Co) (b) Date acquired (c) Date sold (see page 4 of the (d) Sales price the entire year (mo , day, yr) (mo, day, yr) instructions) Subtract (e) from (d) 6a **b** Enter the long-term gain or (loss), if any, from Schedule D-1, line 6b. 0. 6b Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824 7 Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts 8 9 10 Gain from Form 4797, Part I 10 Long-term capital loss carryover Enter the amount, if any, from line 14 of the 2008 Capital Loss 11 Net long-term gain or (loss). Combine lines 6a through 11 in column (f) Enter here and on line 14a, For Paperwork Reduction Act Notice, see the Instructions for Form 1041. Schedule D (Form 1041) 2009

Schedule D (Form 1041) 2009

33

Tax on all taxable income. Enter the smaller of line 32 or line 33 here and on Form 1041, Schedule

SCHEDULE D-1 (Form 1041)

Department of the Treasury Internal Revenue Service

Continuation Sheet for Schedule D (Form 1041) ► See instructions for Schedule D (Form 1041).

► See instructions for Schedule D (Form 1041).

► Attach to Schedule D to list additional transactions for lines 1a and 6a.

OMB No 1545-0092

2009

Name of estate or trust

LISA WENDEL MEMORIAL FOUNDATION

Employer Identification number 13-3217479

Part I Short-Term Capital Gains and Losses - Assets Held One Year or Less							
(a) Description of property (Example 100 sh 7% preferred of "Z" Co)	(b) Date acquired (mo , day, yr)	(c) Date sold (mo , day, yr)	(d) Sales price (see page 4 of the instructions)	(e) Cost or other basis (see page 4 of the instructions)	(f) Gain or (loss) Subtract (e) from (d)		
1a 100M CD BRANCH BANKING \$ TRUST	10/06/2008	01/22/2009		100,000.			
11001	10,00,200	01/22/2003	100,000.	100,000.			
							
							
 							
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0.

Name of estate or trust as shown on Form 1041 Do not enter name and employer identification number if shown on the other side

Employer identification number

(a) Description of property (Example 100 sh 7% preferred of "Z" Co)	(b) Date acquired (mo , day, yr)	(c) Date sold (mo , day, yr)	(d) Sales price (see page 4 of the instructions)	(e) Cost or other basis (see page 4 of the instructions)	(f) Gain or (loss) Subtract (e) from (d
5M CD CALIFORNIA B&T	01/24/2006	08/03/2009	35,000.	35,000.	
7M STATE BANK & TRUST, GA		08/07/2009	97,000.	97,000.	
5M CD HUNTINGTON NATIONAL	01/14/2008	01/23/2009	95,000.	95,000.	
5M CD PRIVATE B & T CO	01/14/2008	01/23/2009	95,000.	95,000.	
00M FEDERAL NATIONAL MTG	01/17/2008	04/20/2009	100,000.	100,000.	
00M FEDERAL NATIONAL MTG	02/07/2008	04/06/2009	100,000.	100,000.	
8M CD CAPITAL ONE BANK	01/10/2005	01/20/2009	98,000.	98,000.	
5M NM IBM CORP	05/02/2003	05/15/2009	75,000.	75,000.	
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