



See a Social Security Number? Say Something!  
Report Privacy Problems to <https://public.resource.org/privacy>  
Or call the IRS Identity Theft Hotline at 1-800-908-4490



# Return of Private Foundation

## or Section 4947(a)(1) Nonexempt Charitable Trust

### Treated as a Private Foundation

2009

Department of the Treasury  
Internal Revenue Service

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements

For calendar year 2009, or tax year beginning

, and ending

G Check all that apply

☐ Initial return☐ Initial return of a former public charity☐ Final return☐ Amended return☐ Address change☐ Name changeUse the IRS  
label.  
Otherwise,  
print  
or type.  
See Specific  
Instructions

Name of foundation

ABNER &amp; MILDRED LEVINE FAMILY FOUNDATION

Number and street (or P O box number if mail is not delivered to street address)

Room/suite

16858 RIVER BIRCH CIRCLE

City or town, state, and ZIP code

DELRAY BEACH, FL 33445

A Employer identification number

13-6172502

B Telephone number

(561)-498-1500

C If exemption application is pending, check here ☐D 1. Foreign organizations, check here ☐2. Foreign organizations meeting the 85% test, check here and attach computation ☐E If private foundation status was terminated under section 507(b)(1)(A), check here ☐F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ☐

H Check type of organization

☒ Section 501(c)(3) exempt private foundation☐ Section 4947(a)(1) nonexempt charitable trust☐ Other taxable private foundation

I Fair market value of all assets at end of year

(from Part II, col. (c), line 16)

\$ 2,461,177.

J Accounting method

☒ Cash☐ Accrual☐ Other (specify)

(Part I, column (d) must be on cash basis.)

## Part I Analysis of Revenue and Expenses

(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))

(a) Revenue and expenses per books

(b) Net investment income

(c) Adjusted net income

(d) Disbursements for charitable purposes (cash basis only)

Revenue	1	Contributions, gifts, grants, etc., received	80,000.			
	2	Check <input type="checkbox"/> if the foundation is not required to attach Sch B				
	3	Interest on savings and temporary cash investments	11,319.	11,319.	11,319.	STATEMENT 1
	4	Dividends and interest from securities	12.	12.	12.	STATEMENT 2
	5a	Gross rents	29,666.	29,666.	29,666.	STATEMENT 3
	b	Net rental income or (loss)	-20,357.			STATEMENT 4
	6a	Net gain or (loss) from sale of assets not on line 10				
	b	Gross sales price for all assets on line 6a				
	7	Capital gain net income (from Part IV, line 2)		0.		
	8	Net short-term capital gain				
	9	Income modifications				
	10a	Gross sales less return and allowances				
Operating and Administrative Expenses	b	Less Cost of goods sold				
	c	Gross profit or (loss)				
	11	Other income	785,826.	790,228.	785,826.	STATEMENT 5
	12	Total. Add lines 1 through 11	906,823.	831,225.	826,823.	
	13	Compensation of officers, directors, trustees, etc	0.	0.	0.	0.
	14	Other employee salaries and wages				
	15	Pension plans, employee benefits				
	16a	Legal fees STMT 6	2,671.	2,671.	2,671.	0.
	b	Accounting fees				
	c	Other professional fees				
	17	Interest	6,716.	6,716.	6,716.	0.
	18	Taxes STMT 7	500.	0.	0.	0.
	19	Depreciation and depletion				
	20	Occupancy				
	21	Travel, conferences, and meetings				
	22	Printing and publications				
	23	Other expenses STMT 8	40,688.	40,636.	40,636.	0.
	24	Total operating and administrative expenses. Add lines 13 through 23	50,575.	50,023.	50,023.	0.
	25	Contributions, gifts, grants paid	81,721.			81,721.
	26	Total expenses and disbursements. Add lines 24 and 25	132,296.	50,023.	50,023.	81,721.
	27	Subtract line 26 from line 12	774,527.			
	a	Excess of revenue over expenses and disbursements		781,202.		
	b	Net investment income (if negative, enter -0-)				
	c	Adjusted net income (if negative, enter -0-)			776,800.	

SCANNED MAY 13 2010

9/6

4

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only		
		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash - non-interest-bearing	10,562.	843,620.	843,620.
	2 Savings and temporary cash investments			
	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			
	7 Other notes and loans receivable ▶			
	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			
	b Investments - corporate stock			
	c Investments - corporate bonds			
Liabilities	11 Investments - land, buildings, and equipment basis ▶			
	Less accumulated depreciation ▶			
	12 Investments - mortgage loans			
	13 Investments - other STMT 9	602,452.	545,348.	545,348.
	14 Land, buildings, and equipment basis ▶ 1,070,000.	1,070,000.	1,070,000.	1,070,000.
	Less accumulated depreciation ▶			
	15 Other assets (describe ▶ STATEMENT 10)	3,636.	2,209.	2,209.
	16 Total assets (to be completed by all filers)	1,686,650.	2,461,177.	2,461,177.
	17 Accounts payable and accrued expenses			
	18 Grants payable			
Net Assets or Fund Balances	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable			
	22 Other liabilities (describe ▶)			
23 Total liabilities (add lines 17 through 22)	0.	0.		
Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.	24 Unrestricted			
	25 Temporarily restricted			
	26 Permanently restricted			
	Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.			
	27 Capital stock, trust principal, or current funds	0.	0.	
	28 Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
	29 Retained earnings, accumulated income, endowment, or other funds	1,686,650.	2,461,177.	
	30 Total net assets or fund balances	1,686,650.	2,461,177.	
31 Total liabilities and net assets/fund balances	1,686,650.	2,461,177.		

## 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	1,686,650.
2 Enter amount from Part I, line 27a	2	774,527.
3 Other increases not included in line 2 (itemize) ▶	3	0.
4 Add lines 1, 2, and 3	4	2,461,177.
5 Decreases not included in line 2 (itemize) ▶	5	0.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	2,461,177.

**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 shs MLC Co.)		(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)	
1a					
b NONE					
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 (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))		
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any			
a					
b					
c					
d					
e					
2 Capital gain net income or (net capital loss)		<div style="display: flex; align-items: center;"> <div style="border-left: 1px solid black; border-right: 1px solid black; padding: 0 5px;">           If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7         </div> <div style="margin: 0 5px;">}</div> </div>		2	
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6)		<div style="display: flex; align-items: center;"> <div style="border-left: 1px solid black; border-right: 1px solid black; padding: 0 5px;">           If gain, also enter in Part I, line 8, column (c) If (loss), enter -0- in Part I, line 8         </div> <div style="margin: 0 5px;">}</div> </div>		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 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 (col. (b) divided by col. (c))
2008	1,389,173.	2,355,060.	.589867
2007	694,972.	4,109,043.	.169132
2006	415,995.	3,707,762.	.112196
2005	502,537.	3,327,803.	.151012
2004	323,664.	2,769,269.	.116877

2 Total of line 1, column (d)	2	1.139084
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	.227817
4 Enter the net value of noncharitable-use assets for 2009 from Part X, line 5	4	1,533,980.
5 Multiply line 4 by line 3	5	349,467.
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	7,812.
7 Add lines 5 and 6	7	357,279.
8 Enter qualifying distributions from Part XII, line 4	8	81,721.

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 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 instructions)	1	15,624.
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input 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, col (b)	2	0.
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	3	15,624.
3	Add lines 1 and 2	4	0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	5	15,624.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		
6	Credits/Payments		
a	2009 estimated tax payments and 2008 overpayment credited to 2009	6a	9,400.
b	Exempt foreign organizations - tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868)	6c	
d	Backup withholding erroneously withheld	6d	
7	Total credits and payments. Add lines 6a through 6d	7	9,400.
8	Enter any penalty for underpayment of estimated tax. Check here <input checked="" type="checkbox"/> 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	9	6,224.
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 <input type="checkbox"/> Refunded <input type="checkbox"/>	11	

**Part VII-A Statements Regarding Activities**

	Yes	No
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?		X
1b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)? If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.		X
1c Did the foundation file Form 1120-POL for this year?		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation <input type="checkbox"/> \$ 0. (2) On foundation managers <input type="checkbox"/> \$ 0.		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers <input type="checkbox"/> \$ 0.		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities.		X
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		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		X
b If "Yes," has it filed a tax return on Form 990-T for this year?		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T.		X
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 conflict with the state law remain in the governing instrument?		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	X	
8a Enter the states to which the foundation reports or with which it is registered (see instructions) <input type="checkbox"/> NY		
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	X	
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		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	X	

N/A

STMT 11

**Part VII-A** Statements Regarding Activities (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see 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? Website address ▶ N/A	13	X	
14	The books are in care of ▶ ABNER LEVINE Located at ▶ 16858 RIVER BIRCH CIRCLE DELRAY BEACH, FL Telephone no ▶ 561-498-1500 ZIP+4 ▶ 33445			
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	
b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)? Organizations relying on a current notice regarding disaster assistance check here ▶ N/A		1b
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2009?		1c X
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))		
a At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2009? If "Yes," list the years ▶ N/A	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions.)	N/A	2b
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ▶		
3a 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	3b
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4a X
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?		4b X

Form 990-PF (2009)

**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

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?

☐ Yes ☒ No

(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?

☐ Yes ☒ No

(3) Provide a grant to an individual for travel, study, or other similar purposes?

☐ Yes ☒ 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)?

☐ Yes ☒ 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?

☐ Yes ☒ 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)?

N/A

5b

Organizations relying on a current notice regarding disaster assistance check here

☒

c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?

N/A

☐ Yes ☐ 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?

☐ Yes ☒ No

b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

6b

If "Yes" to 6b, file Form 8870.

X

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?

☐ Yes ☒ No

b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?

N/A

7b

**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.

(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
SEE STATEMENT 12		0.	0.	0.

2 Compensation of five highest-paid employees (other than those included on line 1). 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

Form 990-PF (2009)

**Part VIII****Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors** (continued)**3** Five highest-paid independent contractors for professional services. If none, enter "NONE."

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		

Total number of others receiving over \$50,000 for professional services

0

**Part IX-A****Summary of Direct Charitable Activities**

List the foundation's four largest direct charitable activities during the tax year. Include relevant 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**

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

	Amount
1 N/A	
2	
All other program-related investments See instructions	
3	
<b>Total.</b> Add lines 1 through 3	0.

Form 990-PF (2009)



**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	1,457,834.
b	Average of monthly cash balances	1b	99,506.
c	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	1,557,340.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	0.
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	1,557,340.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	23,360.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,533,980.
6	Minimum investment return. Enter 5% of line 5	6	76,699.

**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	76,699.
2a	Tax on investment income for 2009 from Part VI, line 5	2a	15,624.
b	Income tax for 2009 (This does not include the tax from Part VI)	2b	
c	Add lines 2a and 2b	2c	15,624.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	61,075.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	61,075.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	61,075.

**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	81,721.
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	
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	81,721.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	81,721.

**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.

Form 990-PF (2009)

**Part XIII** Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
<b>1</b> Distributable amount for 2009 from Part XI, line 7				61,075.
<b>2</b> Undistributed income, if any, as of the end of 2009				
<b>a</b> Enter amount for 2008 only			0.	
<b>b</b> Total for prior years		0.		
<b>3</b> Excess distributions carryover, if any, to 2009				
<b>a</b> From 2004	200,081.			
<b>b</b> From 2005	350,817.			
<b>c</b> From 2006	246,535.			
<b>d</b> From 2007	508,104.			
<b>e</b> From 2008	1,271,420.			
<b>f</b> Total of lines 3a through e	2,576,957.			
<b>4</b> Qualifying distributions for 2009 from Part XII, line 4 ▶ \$	81,721.			
<b>a</b> Applied to 2008, but not more than line 2a			0.	
<b>b</b> Applied to undistributed income of prior years (Election required - see instructions)		0.		
<b>c</b> Treated as distributions out of corpus (Election required - see instructions)	0.			
<b>d</b> Applied to 2009 distributable amount				61,075.
<b>e</b> Remaining amount distributed out of corpus	20,646.			
<b>5</b> Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
<b>6</b> Enter the net total of each column as indicated below:				
<b>a</b> Corpus Add lines 3f, 4c, and 4e Subtract line 5	2,597,603.			
<b>b</b> Prior years' undistributed income Subtract line 4b from line 2b		0.		
<b>c</b> 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.		
<b>d</b> Subtract line 6c from line 6b Taxable amount - see instructions		0.		
<b>e</b> Undistributed income for 2008 Subtract line 4a from line 2a Taxable amount - see instr			0.	
<b>f</b> Undistributed income for 2009 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2010				0.
<b>7</b> Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3)	0.			
<b>8</b> Excess distributions carryover from 2004 not applied on line 5 or line 7	200,081.			
<b>9</b> Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a	2,397,522.			
<b>10</b> Analysis of line 9				
<b>a</b> Excess from 2005	350,817.			
<b>b</b> Excess from 2006	246,535.			
<b>c</b> Excess from 2007	508,104.			
<b>d</b> Excess from 2008	1,271,420.			
<b>e</b> Excess from 2009	20,646.			



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

Recipient		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
Name and address (home or business)					
a Paid during the year SEE STATEMENT ATTACHED					81,721.
Total					▶ 3a 81,721.
b Approved for future payment  NONE					
Total					▶ 3b 0.



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

		Yes	No
<b>1</b>	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?		
<b>a</b>	Transfers from the reporting foundation to a noncharitable exempt organization of		
	(1) Cash		X
	(2) Other assets		X
<b>b</b>	Other transactions		
	(1) Sales of assets to a noncharitable exempt organization		X
	(2) Purchases of assets from a noncharitable exempt organization		X
	(3) Rental of facilities, equipment, or other assets		X
	(4) Reimbursement arrangements		X
	(5) Loans or loan guarantees		X
	(6) Performance of services or membership or fundraising solicitations		X
<b>c</b>	Sharing of facilities, equipment, mailing lists, other assets, or paid employees		X
<b>d</b>	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.		

[illegible]

**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.

Sign Here	Signature of officer or trustee		Date		Title	
	<i>[Signature]</i>		5/5/10		President	
Paid Preparer's Use Only	Preparer's signature		Date		Check if self-employed <input type="checkbox"/>	
	<i>[Signature]</i>		5/4/2010			
Firm's name (or yours if self-employed), address, and ZIP code					Preparer's identifying number	
TUBBS & BARTNICK, P.L. 2300 GLADES ROAD SUITE 415 EAST BOCA RATON, FL 33431					EIN <input type="text"/>	
					Phone no 561-361-0330	

Form **990-PF** (2009)

**Schedule B**(Form 990, 990-EZ,  
or 990-PF)Department of the Treasury  
Internal Revenue Service**Schedule of Contributors**

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

OMB No 1545-0047

**2009****Name of the organization**

ABNER &amp; MILDRED LEVINE FAMILY FOUNDATION

**Employer identification number**

13-6172502

**Organization type (check one)****Filers of:****Section:**

Form 990 or 990-EZ

☐ 501(c)( ) (enter number) organization☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation☐ 527 political organization

Form 990-PF

☒ 501(c)(3) exempt private foundation☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation☐ 501(c)(3) taxable private foundationCheck if your organization is covered by the **General Rule** or a **Special Rule**.**Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.**General Rule**

- ☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

**Special Rules**

- ☐ For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- ☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- ☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year ▶ \$ \_\_\_\_\_

**Caution.** An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions  
for Form 990, 990-EZ, or 990-PF.

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

Name of organization

Employer identification number

ABNER &amp; MILDRED LEVINE FAMILY FOUNDATION

13-6172502

**Part I Contributors** (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	ABNER & MILDRED LEVINE 16858 RIVER BIRCH CIRCLE DELRAY BEACH, FL 33435	\$ 80,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)



---



---

FORM 990-PF INTEREST ON SAVINGS AND TEMPORARY CASH INVESTMENTS STATEMENT 1

---

SOURCE	AMOUNT
FROM CENTRAL PARK EIN # 13-3061318	1.
FROM LEMTAG K-1 EIN # 65-0439942	364.
INTEREST INCOME	10,954.
TOTAL TO FORM 990-PF, PART I, LINE 3, COLUMN A	11,319.

---



---

FORM 990-PF DIVIDENDS AND INTEREST FROM SECURITIES STATEMENT 2

---

SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	COLUMN (A) AMOUNT
FROM LEMTAG K-1 EIN# 65-0439942	12.	0.	12.
TOTAL TO FM 990-PF, PART I, LN 4	12.	0.	12.

---



---

FORM 990-PF RENTAL INCOME STATEMENT 3

---

KIND AND LOCATION OF PROPERTY	ACTIVITY NUMBER	GROSS RENTAL INCOME
SCARSDALE APARTMENT	1	29,666.
TOTAL TO FORM 990-PF, PART I, LINE 5A		29,666.

---



---

FORM 990-PF RENTAL EXPENSES STATEMENT 4

---

DESCRIPTION	ACTIVITY NUMBER	AMOUNT	TOTAL
MORTGAGE INTEREST		6,716.	
MAINTENANCE EXPENSE (INCLUDES REAL ESTATE TAXES)		38,885.	
UTILITIES		93.	
INSURANCE EXPENSE		258.	
PERMITS & FEES		55.	
BUILDING REPAIRS		1,315.	
LEGAL FEES		2,671.	

MISCELLANEOUS EXPENSE		30.	
- SUBTOTAL -	1		50,023.
TOTAL RENTAL EXPENSES			50,023.
NET RENTAL INCOME TO FORM 990-PF, PART I, LINE 5B			-20,357.

FORM 990-PF	OTHER INCOME	STATEMENT	5
-------------	--------------	-----------	---

DESCRIPTION	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
LOSS FROM PARTNERSHIP EIN# 13-3061318	-193.	0.	-193.
MISCELLANEOUS INCOME	3,270.	0.	3,270.
CHASE DYNASTY TRUST/ANNUITY	790,228.	790,228.	790,228.
LOSS FROM PARTNERSHIP EIN# 65-0439942	-7,479.	0.	-7,479.
TOTAL TO FORM 990-PF, PART I, LINE 11	785,826.	790,228.	785,826.

FORM 990-PF	LEGAL FEES	STATEMENT	6
-------------	------------	-----------	---

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
LEGAL FEES	2,671.	2,671.	2,671.	0.
TO FM 990-PF, PG 1, LN 16A	2,671.	2,671.	2,671.	0.

FORM 990-PF	TAXES	STATEMENT	7
-------------	-------	-----------	---

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
NEW YORK STATE DEPT OF LAW	500.	0.	0.	0.
TO FORM 990-PF, PG 1, LN 18	500.	0.	0.	0.

---



---

FORM 990-PF	OTHER EXPENSES	STATEMENT	8
-------------	----------------	-----------	---

---

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
OFFICE EXPENSE	30.	0.	0.	0.
INVESTMENT SERVICE FEES	22.	0.	0.	0.
MAINTENANCE EXPENSE (INCLUDES REAL ESTATE TAXES)	38,885.	38,885.	38,885.	0.
UTILITIES	93.	93.	93.	0.
INSURANCE EXPENSE	258.	258.	258.	0.
PERMITS & FEES	55.	55.	55.	0.
BUILDING REPAIRS	1,315.	1,315.	1,315.	0.
MISCELLANEOUS EXPENSE	30.	30.	30.	0.
TO FORM 990-PF, PG 1, LN 23	40,688.	40,636.	40,636.	0.

---



---

FORM 990-PF	OTHER INVESTMENTS	STATEMENT	9
-------------	-------------------	-----------	---

---

DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
INVESTMENT IN PARTNERSHIP EIN# 13-3061318 230 CENTRAL PARK WEST JNT VENTURE	COST	-124.	-124.
INVESTMENT IN PARTNERSHIP EIN# 65-0439942 LEMTAG ASSOCIATES	COST	220,472.	220,472.
INVESTMENTS - STATE OF ISRAEL BONDS	COST	325,000.	325,000.
TOTAL TO FORM 990-PF, PART II, LINE 13		545,348.	545,348.

---



---

FORM 990-PF	OTHER ASSETS	STATEMENT	10
-------------	--------------	-----------	----

---

DESCRIPTION	BEGINNING OF YR BOOK VALUE	END OF YEAR BOOK VALUE	FAIR MARKET VALUE
DUE TO/FROM MANAGEMENT COMPANY	3,636.	2,209.	2,209.
TO FORM 990-PF, PART II, LINE 15	3,636.	2,209.	2,209.

FORM 990-PF

LIST OF SUBSTANTIAL CONTRIBUTORS  
PART VII-A, LINE 10

STATEMENT 11

## NAME OF CONTRIBUTOR

## ADDRESS

ABNER &amp; MILDRED LEVINE

16858 RIVER BIRCH CIRCLE  
DELRAY BEACH, FL 33435

FORM 990-PF

PART VIII - LIST OF OFFICERS, DIRECTORS  
TRUSTEES AND FOUNDATION MANAGERS

STATEMENT 12

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
ABNER LEVINE DELRAY BEACH, FL 33445	DIRECTOR 2.00	0.	0.	0.
MILDRED LEVINE DELRAY BEACH, FL 33445	DIRECTOR 2.00	0.	0.	0.
ELLEN K. MILLER DELRAY BEACH, FL 33445	DIRECTOR 2.00	0.	0.	0.
LAWRENCE I. LEVINE DELRAY BEACH, FL 33445	DIRECTOR 2.00	0.	0.	0.
MICHAEL F. LEVINE DELRAY BEACH, FL 33445	DIRECTOR 2.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6, PART VIII		0.	0.	0.

**SUN-SENTINEL**  
**PUBLISHED DAILY**  
**FORT LAUDERDALE, BROWARD COUNTY, FLORIDA**  
**BOCA RATON, PALM BEACH COUNTY, FLORIDA**  
**MIAMI, MIAMI-DADE COUNTY, FLORIDA**

**Legal Notice**  
 The Annual Report of the Abner and Mirad Levine Family Foundation for the year ended 12/31/2009 is available at its principal office located 16858 River Birch Circle, Delray Beach, Florida for inspection during regular business hours by any citizen who request within 180 days hereof. Principal manager of the Foundation is Abner Levine.  
 January 31, 2010

STATE OF FLORIDA  
 COUNTY OF BROWARD/PALM BEACH/MIAMI-DADE

BEFORE THE UNDERSIGNED AUTHORITY, PERSONALLY APPEARED LINDA HALL, WHO, ON OATH, SAYS THAT SHE IS A DULY AUTHORIZED REPRESENTATIVE OF THE CLASSIFIED DEPARTMENT OF THE SUN-SENTINEL, DAILY NEWSPAPER PUBLISHED IN BROWARD/PALM BEACH/MIAMI-DADE COUNTY, FLORIDA, THAT THE ATTACHED COPY OF ADVERTISEMENT, BEING A:

LEGAL NOTICE

THE MATTER OF:

LEVINE FAMILY FOUNDATION  
 ANNUAL REPORT AVAILABLE FOR INSPECTION  
 DURING REGULAR BUSINESS HOURS

IN THE CIRCUIT COURT, WAS PUBLISHED IN SAID NEWSPAPER IN THE ISSUES OF:

JANUARY 31, 2010

13841886

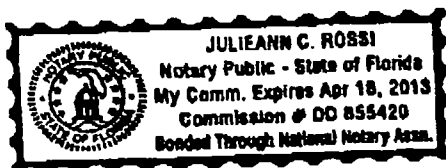
AFFIANT FURTHER SAYS THAT THE SAID SUN-SENTINEL IS A NEWSPAPER PUBLISHED IN SAID BROWARD/PALM BEACH/MIAMI-DADE COUNTY, FLORIDA, AND THAT THE SAID NEWSPAPER HAS HERETOFORE BEEN CONTINUOUSLY PUBLISHED IN SAID BROWARD/PALM BEACH/MIAMI-DADE COUNTY, FLORIDA, EACH DAY, AND HAS BEEN ENTERED AS SECOND CLASS MATTER AT THE POST OFFICE IN FORT LAUDERDALE, IN SAID BROWARD COUNTY, FLORIDA, FOR A PERIOD OF ONE YEAR NEXT PRECEDING THE FIRST PUBLICATION OF ATTACHED COPY OF ADVERTISEMENT: AND AFFIANT FURTHER SAYS THAT SHE HAS NEITHER PAID, NOR PROMISED, ANY PERSON, FIRM, OR CORPORATION, ANY DISCOUNT, REBATE, COMMISSION, OR REFUND, FOR THE PURPOSE OF SECURING THIS ADVERTISEMENT FOR PUBLICATION IN SAID NEWSPAPER.

*Linda Hall*

(SIGNATURE OF LINDA HALL, AFFIANT)

SWORN TO AND SUBSCRIBED BEFORE ME  
 ON 1 FEBRUARY 2010, A.D.

*Julieann C. Rossi*  
 (SIGNATURE OF NOTARY PUBLIC)



(NAME OF NOTARY, TYPED, PRINTED, OR STAMPED)

PERSONALLY KNOWN ( X ) OR PRODUCED IDENTIFICATION ( )

ABNER AND MILDRED LEVINE FAMILY FOUNDATION  
EIN 13-6172502  
FORM 990-PF/DECEMBER 31, 2009

PART XV, 3: CHARITABLE CONTRIBUTIONS PAID DURING THE YEAR

ORGANIZATION	AMOUNT	
HILLEL-WASHINGTON	1,000 00	CHARITABLE CONTRIBUTION
OAKLAND HERBREW DAY	1,800.00	CHARITABLE CONTRIBUTION
B'NAI TORAH	1,000.00	CHARITABLE CONTRIBUTION
LEVIS JCC	500 00	CHARITABLE CONTRIBUTION
JEWISH FED OF SPBC	80.00	CHARITABLE CONTRIBUTION
HADASSAH	72.00	CHARITABLE CONTRIBUTION
B'NAI TORAH CONG	216.00	CHARITABLE CONTRIBUTION
J.D.C.	72.00	CHARITABLE CONTRIBUTION
B'NAI TORAH SISTER	10.00	CHARITABLE CONTRIBUTION
B'NAI TORAH	360.00	CHARITABLE CONTRIBUTION
JEWISH THEO	1,200 00	CHARITABLE CONTRIBUTION
TEMPLE BETH EL	18 00	CHARITABLE CONTRIBUTION
B'NAI TORAH MEN'S	18.00	CHARITABLE CONTRIBUTION
CONG AABHD	18.00	CHARITABLE CONTRIBUTION
HANDS ON TZEDAKAH	36 00	CHARITABLE CONTRIBUTION
TEMPLE BETH EL	360.00	CHARITABLE CONTRIBUTION
MENS CLUB TEMPLE B	18.00	CHARITABLE CONTRIBUTION
B'NAI TORAH	360 00	CHARITABLE CONTRIBUTION
SPBC FED	65 00	CHARITABLE CONTRIBUTION
ANTI-DEFL	150.00	CHARITABLE CONTRIBUTION
MAZON	50.00	CHARITABLE CONTRIBUTION
PURCH BOND MAZEL	100 00	CHARITABLE CONTRIBUTION
JEWISH FED SPBC	180.00	CHARITABLE CONTRIBUTION
JARC	108.00	CHARITABLE CONTRIBUTION
B'NAI TORAH CONG	308.00	CHARITABLE CONTRIBUTION
ANSHEI EMUNA	475.00	CHARITABLE CONTRIBUTION
B'NAI TORAH	10,360.00	CHARITABLE CONTRIBUTION
AVENUE N JEWISH	36.00	CHARITABLE CONTRIBUTION
TEMPLE BETH EL	18.00	CHARITABLE CONTRIBUTION
ADLER APHASIA	1,500 00	CHARITABLE CONTRIBUTION
WORLD JEWISH CONG	18.00	CHARITABLE CONTRIBUTION
B'NAI TORAH	1,000.00	CHARITABLE CONTRIBUTION
HAND ON TZEDAKAH	360 00	CHARITABLE CONTRIBUTION
B'NAI TORAH	2,800.00	CHARITABLE CONTRIBUTION
B'NAI TORAH	45.00	CHARITABLE CONTRIBUTION
B'NAI TORAH	360.00	CHARITABLE CONTRIBUTION
B'NAI TORAH	250.00	CHARITABLE CONTRIBUTION
B'NAI TORAH	100 00	CHARITABLE CONTRIBUTION
HADASSAH	100.00	CHARITABLE CONTRIBUTION
JARC	500.00	CHARITABLE CONTRIBUTION
DEVELOPMENT CORP	250.00	CHARITABLE CONTRIBUTION
SPBC	545.00	CHARITABLE CONTRIBUTION
RALES FMLY SVC	1,800.00	CHARITABLE CONTRIBUTION
JARC ENDOWMENT FUND	2,700 00	CHARITABLE CONTRIBUTION

ABNER AND MILDRED LEVINE FAMILY FOUNDATION  
EIN 13-6172502  
FORM 990-PF/DECEMBER 31, 2009

PART XV, 3: CHARITABLE CONTRIBUTIONS PAID DURING THE YEAR

ORGANIZATION	AMOUNT	
KOSHER FOOD PANTRY	1,800 00	CHARITABLE CONTRIBUTION
NARSAD	180.00	CHARITABLE CONTRIBUTION
SPBC	50 00	CHARITABLE CONTRIBUTION
KESHER ZION SISTER	50 00	CHARITABLE CONTRIBUTION
SPBC	200.00	CHARITABLE CONTRIBUTION
HADASSAH	1,000 00	CHARITABLE CONTRIBUTION
B'NAI TORAH	108.00	CHARITABLE CONTRIBUTION
SYN INST NY	39.95	CHARITABLE CONTRIBUTION
ST OF ISRAEL BOND	250 00	CHARITABLE CONTRIBUTION
NORTON MUSEUM	70 00	CHARITABLE CONTRIBUTION
CHAUT INST	77.00	CHARITABLE CONTRIBUTION
CHAUT INST	1,535 87	CHARITABLE CONTRIBUTION
CHAUT INST	391.00	CHARITABLE CONTRIBUTION
FAU	2,500.00	CHARITABLE CONTRIBUTION
BOCA PHILAH	323.00	CHARITABLE CONTRIBUTION
FAU LIFELONG	54.00	CHARITABLE CONTRIBUTION
FAU LIFELONG	54.00	CHARITABLE CONTRIBUTION
BOCA PHILHARM	323.00	CHARITABLE CONTRIBUTION
VETERANS HELPING	1,800.00	CHARITABLE CONTRIBUTION
PLAY FOR PINK	100.00	CHARITABLE CONTRIBUTION
AMERICAN HEART	500.00	CHARITABLE CONTRIBUTION
BRCH	10,000.00	CHARITABLE CONTRIBUTION
AM LUNG ASSOC	18.00	CHARITABLE CONTRIBUTION
STARLIGHT	500.00	CHARITABLE CONTRIBUTION
FDN FIGHT BLIND	600.00	CHARITABLE CONTRIBUTION
FL ASSOC OF ST TRO	15 00	CHARITABLE CONTRIBUTION
WAXMANCANCER	6,500.00	CHARITABLE CONTRIBUTION
FL SHERIFF YOUTH	35 60	CHARITABLE CONTRIBUTION
LYMOGINA	360.00	CHARITABLE CONTRIBUTION
BRCH FDN	125.00	CHARITABLE CONTRIBUTION
FOOD FOR NEEDY	360.00	CHARITABLE CONTRIBUTION
NY LANDMARKS	2,000 00	CHARITABLE CONTRIBUTION
WAXMAN CANCER	1,000 00	CHARITABLE CONTRIBUTION
MASTER CHORAE	1,080.00	CHARITABLE CONTRIBUTION
WAXMAN CANCER RES	9,000 00	CHARITABLE CONTRIBUTION
DELRAY CITIZENS FO	400 00	CHARITABLE CONTRIBUTION
SOUP KITCHEN	108 00	CHARITABLE CONTRIBUTION
MDA	180.00	CHARITABLE CONTRIBUTION
LYMPHOMA SOCIETY	18.00	CHARITABLE CONTRIBUTION
ALVIN AILEY DANCE	150.00	CHARITABLE CONTRIBUTION
MT ST UNIV	1,000.00	CHARITABLE CONTRIBUTION
WVU	1,000.00	CHARITABLE CONTRIBUTION
CARNEGIE HALL	2,000 00	CHARITABLE CONTRIBUTION
WVU	1,000.00	CHARITABLE CONTRIBUTION
BLUEFIELD COLLEGE	1,000 00	CHARITABLE CONTRIBUTION

ABNER AND MILDRED LEVINE FAMILY FOUNDATION  
EIN 13-6172502  
FORM 990-PF/DECEMBER 31, 2009

PART XV, 3: CHARITABLE CONTRIBUTIONS PAID DURING THE YEAR

ORGANIZATION	AMOUNT	
TRILLIUM	500.00	CHARITABLE CONTRIBUTION
FIRST DAY	25 00	CHARITABLE CONTRIBUTION
FRIENDS OF LOWER G	25.00	CHARITABLE CONTRIBUTION
TOTAL CONTRIBUTIONS PAID	81,721 42	



Form **990-W****Estimated Tax on Unrelated Business Taxable  
Income for Tax-Exempt Organizations**

OMB No 1545-0976

(WORKSHEET)  
Department of the Treasury  
Internal Revenue Service(and on Investment Income for Private Foundations) FORM 990-T  
(Keep for your records. Do not send to the Internal Revenue Service.)**2010**

1	Unrelated business taxable income expected in the tax year	1	
2	Tax on the amount on line 1. See instructions for tax computation	2	
3	Alternative minimum tax (see instructions)	3	
4	Total Add lines 2 and 3	4	
5	Estimated tax credits (see instructions)	5	
6	Subtract line 5 from line 4	6	
7	Other taxes (see instructions)	7	
8	Total Add lines 6 and 7	8	
9	Credit for federal tax paid on fuels (see instructions)	9	
10a	Subtract line 9 from line 8 <b>Note.</b> If less than \$500, the organization is not required to make estimated tax payments. Private foundations, see instructions	10a	
b	Enter the tax shown on the 2009 return (see instructions) <b>Caution.</b> If zero or the tax year was for less than 12 months, skip this line and enter the amount from line 10a on line 10c	10b	
c	<b>2010 Estimated Tax.</b> Enter the smaller of line 10a or line 10b. If the organization is required to skip line 10b, enter the amount from line 10a on line 10c	10c	

	(a)	(b)	(c)	(d)
11 <b>Installment due dates</b> (see instructions)	11			
12 <b>Required installments.</b> Enter 25% of line 10c in columns (a) through (d) unless the organization uses the annualized income installment method, the adjusted seasonal installment method, or is a "large organization" (see instructions)	12			
13 <b>2009 Overpayment</b> (see instructions)	13			
14 <b>Payment due.</b> (Subtract line 13 from line 12)	14			

LHA For Paperwork Reduction Act Notice, see instructions.

Form **990-W** (2010)