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Return of Private Foundation

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

OMB No 1545-0052

For statedary year 2009, or tax year beginning 6 Check all that apply: India return India return of a former public charry Institution of a former public charry Institution India return of a former public charry Institution India return of a former public charry Institution Institu			of the Treasury enue Service Note.	ı The foundation may t .		a copy of this			rtıng reguirements.	2009
G. Check all that apply. Indust return Indust return Anderes change Same change										-
Use the IRS Name of foundation A Employer Identification aumber 20 - 0.279.384						rmer public o				
Set Specific Copy of the Statist, and 2 iP code Instructions Copy of the Statist, and 2 iP code Instructions Copy of the Statist, and 2 iP code Instructions Copy of the Statist Co	lat	el.	RS Name of foundation				ge		A Employer identification	number
See Specific City of trawin, salet, and ZP code MEST PALM BEACH, FL 33401 H Check type of organization: X Section 501(c)(3) exempt private foundation Section 5947(e)(1) nonexempt charitable trust Other teaching private foundation Ear imarket value of all sasets at end of year Accounting method: X Cash Accounting combined in the section 507(e)(1)(4), check here 1. Foreign organizations, check here 1. Foreign organizations 1. Foreign organizations	pr	int	Number and street (or P O bo	ox number if mail is not de				Room/suite	• · · · · · · · · · · · · · · · · · · ·	21
Section 4947(a) (1) nonexempt charable trust	See S Instru	pec ctic	cific City or town, state, and Z	IP code EACH, FL					C If exemption application is per D 1. Foreign organizations,	nding, check here Check here
Fair market value of all assets at end of year Accounting method: Exist Accrual Informer Part II, cold (c), line 16 Section 507(b)(1)(A), check here Informer Part II, cold (c), line 16 Section 507(b)(1)(B), check here Informer Part II Analysis of Revenue and Expenses It is feet (undation as in a 64-month terms to cold (c), cold (c)			- · · · -	· ' 			tion			
Part I Analysis of Revenue and Expenses (s) Revenue and expenses (s) Revenue and expenses (s) Revenue and expenses (s) Revenue and expenses per books (some expenses pe	(froi	m F	Part II, col (c), line 16)	Ot	her (specify)			ual	under section 507(b)(1)(F If the foundation is in a 6	A), check here
1 Contributions, gifts, grants, etc., received 500. N/A			Analysis of Revenue and Ex	kpenses (b), (c), and (d) may not	(a) Reve	nue and	(b) Net in		(c) Adjusted net	(d) Disbursements for charitable purposes
Interest on savings and temporary convenients 14,362. 14,362. STATEMENT 1		-	Contributions, gifts, grants, e	tc., received		<u>'</u>				(cash dasis only)
Sa Gross rents		_					1			STATEMENT 1
Description Not rental income or (loss) Section		•	_	securities		2,804.		2,804.	\$	STATEMENT 2
		b	b Net rental income or (loss)			7 965				
Selection modifications Consequence and discussions Consequence Consequence and discussions Consequence Conseq	eune		Gross sales price for all assets on line 6a	47,072.		7,003.				
Gross sales less returns and lowances be Less Cost of goods sold Coross profit or (loss) 1.1 Other income	Re			IV, line 2)				0.		
Less Cost of goods sold C Gross profit or (loss) 11 Other income 12 Total. Add lines 1 through 11 9,801. 17,166. 3 Compensation of officers, directors, trustees, etc 10. 0. 0. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10. 0. 10.	Ut of	<u>9</u> ()	Gross sales less returns							
11 Other income 12 Total. Add lines 1 through 11 9 , 801 . 17 , 166 . 3 Compensation of offices, directors, trustees, etc 0 . 0 . 0 . 0 . 3 Compensation of offices, directors, trustees, etc 0 . 0 . 0 . 4 Other employee salaries and wages 0 5 Pension plans, employee benefits 0 5 Pension plans, employee benefits 0 6 Compensation plans, employee benefits 0 7 Interest 0 0 8 Taxes STMT 3 2 , 575 . 0 0 9 Compensation and depletion 0 18 Taxes STMT 4 1 , 974 . 0 0 19 Depreciation and depletion 0 19 Depreciation and depletion 0 20 Cocupancy 2 Travel, conferences, and meetings 2 21 Travel, conferences, and meetings 0 22 Printing and publications 0 23 Other expenses STMT 5 4 , 308 . 0 0 24 Total operating and administrative 0 0 25 Total expenses Total expenses and disbursements 0 0 26 Total expenses Total expenses 0 0 0 27 Subtractory 26 from Into 2 2 0 0 28 Excess of reviews over openses are disbursements 0 0 0 29 Subtractory 26 from Into 2 2 0 0 20 Compensation 0 0 0 0 21 Total operating and administrative 0 0 0 0 22 Coffo 0 0 0 0 0 24 Total operating and administrative 0 0 0 0 0 25 Total expenses and disbursements 0 0 0 0 0 0 0 26 Total expenses and disbursements 0 0 0 0 0 0 0 0 0	æ	þ								
Compensation of officers, directors, trustees, etc Other employee salaries and wages Pension plans, employee benefits Ba Legal fees C Other professional fees The Interest The	1	1.1	Other income			0 001	1	7 166		
Total expenses and disbursements. Add Inter2pt and 26 no. 24, 7333. Total expenses and disbursements. Add Inter2pt and 26 no. 24, 7333. Total expenses and disbursements. Add Inter2pt and 26 no. 24, 7333. Total expenses and disbursements. Add Inter2pt and 26 no. 22, 6550. Total expenses and disbursements. Add Inter2pt and 26 no. 22, 6550. Total expenses and disbursements. Add Inter2pt and 26 no. 22, 6550. Total expenses and disbursements. Add Inter2pt and 26 no. 22, 6550. Total expenses and disbursements. Add Inter2pt and 26 no. 22, 6550. Total expenses and disbursements. Add Inter2pt and 26 no. 22, 6550. Total expenses and disbursements. Add Inter2pt and 26 no. 22, 6550. Total expenses and disbursements. Add Inter2pt and 26 no. 22, 6550. Total expenses and disbursements. Add Inter2pt and 26 no. 22, 6550. Total expenses and disbursements. Add Inter2pt and 26 no. 22, 6550. Total expenses and disbursements. Add Inter2pt and 26 no. 22, 6550. Total expenses and disbursements. Add Inter2pt and 26 no. 22, 6550. Total expenses and disbursements. Add Inter2pt and 26 no. 22, 6550. Total expenses and disbursements. Add Inter2pt and 26 no. 22, 6550. Total expenses and disbursements. Add Inter2pt and 26 no. 22, 6550. Total expenses and disbursements. Add Inter2pt and 26 no. 22, 6550. Total expenses and disbursements. Add Inter2pt and 26 no. 22, 6550. Total expenses and disbursements. Add Inter2pt and 26 no. 22, 6550. Total expenses and disbursements. Add Inter2pt and 26 no. 22, 6550. Total expenses and disbursements. Add Inter2pt and 26 no. 22, 6550. Total expenses and disbursements. Add Inter2pt and 26 no. 22, 6550. Total expenses and disbursements. Add Inter2pt and 26 no. 22, 6550. Total expenses and disbursements. Add Inter2pt and 26 no. 22, 6550. Total expenses and disbursements. Add Inter2pt and 26 no. 22, 6550. Total expenses and disbursements. Add Inter2pt and 26 no. 22, 6550. Total expenses and disbursements. Add Inter2pt and 26 no. 22, 6550. Total expenses a		_			-		1			0.
The continue of the continue	j	4	Other employee salaries and	wages						
25 Contributions, girst-grants.paid 22, 850. 26 Total expenses and disbursements. Add line 22 and 25 . 27 Subtractive 26 from line 12. 2010 (c) a Excess of revenue over expenses and disbursements. b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) N/A		6a	Legal fees	letits						
25 Contributions, girst-grants.paid 22, 850. 26 Total expenses and disbursements. Add line 22 and 25 . 27 Subtractive 26 from line 12. 2010 (c) a Excess of revenue over expenses and disbursements. b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) N/A	x ben	Ĵb Øc	Accounting fees Other professional fees	STMT 3		2,575.		0.		0.
25 Contributions, girst-grants.paid 22, 850. 26 Total expenses and disbursements. Add line 22 and 25 . 27 Subtractive 26 from line 12. 2010 (c) a Excess of revenue over expenses and disbursements. b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) N/A	<u>9</u> 1	17				27.		0.		0.
25 Contributions, girst-grants.paid 22, 850. 26 Total expenses and disbursements. Add line 22 and 25 . 27 Subtractive 26 from line 12. 2010 (c) a Excess of revenue over expenses and disbursements. b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) N/A	strati			STMT 4		1,974.		0.		0.
25 Contributions, girst-grants.paid 22, 850. 26 Total expenses and disbursements. Add line 22 and 25 . 27 Subtractive 26 from line 12. 2010 (c) a Excess of revenue over expenses and disbursements. b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) N/A										
25 Contributions, girst-grants.paid 22, 850. 26 Total expenses and disbursements. Add line 22 and 25 . 27 Subtractive 26 from line 12. 2010 (c) a Excess of revenue over expenses and disbursements. b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) N/A	A P			etings						
25 Contributions, girst-grants.paid 22, 850. 26 Total expenses and disbursements. Add line 22 and 25 . 27 Subtractive 26 from line 12. 2010 (c) a Excess of revenue over expenses and disbursements. b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) N/A	u au		= :	OMM F		4 200				
25 Contributions, girst-grants.paid 22, 850. 26 Total expenses and disbursements. Add line 22 and 25 . 27 Subtractive 26 from line 12. 2010 (c) a Excess of revenue over expenses and disbursements. b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) N/A	ating		•			4,308.		<u> </u>		<u> </u>
26 Total expenses and disbursements. Add line 22 and 26	Opera			19h-23	2	8,884. 2,650.		0.		22,650.
27 Subtractive 26 from line 12. 2010 (c) a Excess of revenue over expenses and disbursements b Net investment income (consequed enter -0-) c Adjusted net income (consequed enter -0-) N/A	2	26	Total expenses and disburse	ements.						
C Adjusted net income (if negative, enter -0-)	2	27	Subtracking 26 from line 12	ZUIU (A)				υ.		<u> </u>
C Adjusted net income (if negative, enter -0-)		a b	Net investment income	and dispursements appe anter -0-)	<2	1,733.		7,166.		
	923501	C	Adjusted net income (if negati	ve, enter -0-)						- 000 PE

Fo	rm 99	0-PF(2009) JOYCE JAY RAYMOND FOUND			0279384 Page 2
F	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	
Ξ	T .		(a) Book Value	(b) Book Value	(c) Fair Market Value
	1		<1.>	21 052	21 052
		Savings and temporary cash investments	875,476.	31,253.	31,253.
	3	Accounts receivable >			
	١.	Less: allowance for doubtful accounts			
	4	Pledges receivable -			
	_ ا	Less: allowance for doubtful accounts			
	٥	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
	١.	disqualified persons		-	
	′	Other notes and loans receivable			
		Less: allowance for doubtful accounts			
Assets	8	Inventories for sale or use			
Ass	1	Prepaid expenses and deferred charges			
•	1	Investments - U.S. and state government obligations		640 766	CCO 407
	1	Investments - corporate stock STMT 6	0.	649,766.	669,497.
	1	Investments - corporate bonds STMT 7	0.	172,723.	170,338.
	11				
	40	Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other			
	14	Land, buildings, and equipment: basis Less accumulated depreciation		•	
	4.5				
_	15	Other assets (describe ▶)			
	10	Total assets (to be completed by all filers)	075 475	052 742	071 000
-		Total assets (to be completed by all filers) Associate payable and convert expenses	875,475.	853,742.	871,088.
	18	Accounts payable and accrued expenses Grants payable			
	19	Deferred revenue			
Liabilities	20	<u></u>			
į	21	Loans from officers, directors, trustees, and other disqualified persons Mortgages and other notes payable			
Ë	1	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.			
Ses	24	Unrestricted			
auc	25	Temporarily restricted			
Bal	26	Permanently restricted			
Б		Foundations that do not follow SFAS 117, check here			
Ē		and complete lines 27 through 31.			
Net Assets or Fund Balances	27	Capital stock, trust principal, or current funds	0.	0.	
set	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
As	29	Retained earnings, accumulated income, endowment, or other funds	875,475.	853,742.	
Vet	30	Total net assets or fund balances	875,475.	853,742.	
_			<u> </u>	<u> </u>	
	31	Total liabilities and net assets/fund balances	875,475.	853,742.	
	art	III Analysis of Changes in Net Assets or Fund Ba			
<u>-</u>	art				
1		net assets or fund balances at beginning of year - Part II, column (a), line 3	30		
		st agree with end-of-year figure reported on prior year's return)		1	875,475.
		amount from Part I, line 27a		2	<21,733.>
		r increases not included in line 2 (itemize)		3	0.
		lines 1, 2, and 3		4	853,742.
		eases not included in line 2 (itemize)		5	0.
6	Tota	net assets or fund balances at end of year (line 4 minus line 5) - Part II, col	lumn (b), line 30	6	<u>853,742.</u>
					Form 990-PF (2009)

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		<u>0279</u>			age 4
_	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 -	see ir	nstru	ction	<u>15)</u>
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 letter if necessary-see instructions)				
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%			3	43.
	of Part I, line 27b				
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)				0.
3	Add lines 1 and 2			3	43.
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-			<u>3</u>	<u>43.</u>
6	Credits/Payments;				
a	2009 estimated tax payments and 2008 overpayment credited to 2009 6a 6a				
b	Exempt foreign organizations - tax withheld at source				
C	Tax paid with application for extension of time to file (Form 8868)				
d	Backup withholding erroneously withheld 6d 6d				
7	Total credits and payments. Add lines 6a through 6d				0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8				
	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed SEE STATEMENT 8 9			3	<u>43.</u>
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid				
	Enter the amount of line 10 to be: Credited to 2010 estimated tax				
	rt VII-A Statements Regarding Activities			1.0	
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in	-		Yes	
	any political campaign?		1a		<u>X</u>
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?		1b		<u>X</u>
-	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.				
	Did the foundation file Form 1120-POL for this year?		1c		<u>X</u>
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:				
	(1) On the foundation. ▶ \$ 0 . (2) On foundation managers. ▶ \$				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation				
	managers. ► \$0.				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		<u>X</u>
	If "Yes," attach a detailed description of the activities				
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or				37
4.	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3_		$\frac{x}{x}$
	Did the foundation have unrelated business gross income of \$1,000 or more during the year? If "Yes," has it filed a tax return on Form 990-T for this year?	/A	4a		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	/ A	4b 5		<u> </u>
3	If "Yes," attach the statement required by General Instruction T	ŀ			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:				
Ü	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?		6	х	
7	Did the foundation have at least \$5,000 in assets at any time during the year?	ŀ	7	X	
•	If "Yes," complete Part II, col. (c), and Part XV.	ŀ		- 11	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) NONE				
	210412	—			
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 SEE STATEMENT	9	8b		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)? 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		X

orm	990-PF (2009) JOYCE JAY RAYMOND FOUNDATION, INC 20-0	279384	Page 5
Pa	rt 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?	'A 13	
	Website address ► NONE		
14	The books are in care of ▶ JOYCE JAY RAYMOND Telephone no. ▶ (56	1) 274	-4431
	Located at ▶ 2400 MEDINA WAY, WEST PALM BEACH, FL ZIP+4	≥ 33401	
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	N	/A
Pa	art 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?	No	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)		
	a disqualified person?	No	
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	No	
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	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)?	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.)	No	
_b	lf_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)?	A 1b	
	Organizations relying on a current notice regarding disaster assistance check here		1
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)):	Ì]]
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?	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) to all years listed, answer "No" and attach		
	statement - see instructions.)	'A <u>2b</u>	
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.		ļ ļ
)		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time		
	during the year?	No	
b	of "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.)	'A 3b	
	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)

orm 990-PF (2009) JOYCE JAY RAYMOND FOUNDA			<u> 20-027938</u>	<u>34 Page 6</u>
Part VII-B Statements Regarding Activities for Which I	Form 4720 May Be F	Required (contin	ued)	
5a During the year did the foundation pay or incur any amount to:				
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	Ye	s X No	
(2) Influence the outcome of any specific public election (see section 4955); of	or to carry on, directly or indire]
any voter registration drive?			s X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	Ye	s X No	
(4) Provide a grant to an organization other than a charitable, etc., organizatio	n described in section			1
509(a)(1), (2), or (3), or section 4940(d)(2)?		Ye	s X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f	for		
the prevention of cruelty to children or animals?			s X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify unit	der the exceptions described i	n Regulations		
section 53.4945 or in a current notice regarding disaster assistance (see instru		Ü	N/A 5	ь
Organizations relying on a current notice regarding disaster assistance check h				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fi		ined		1 1
expenditure responsibility for the grant?		//A □ Y€	s No	
If "Yes," attach the statement required by Regulations section 53.494		.,		
6a Did the foundation, during the year, receive any funds, directly or indirectly, to				
a personal benefit contract?	pay promissing on	□ v ₄	es X No	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	parennal hanafit contract?			b X
If "Yes" to 6b, file Form 8870	oci sonai Denenii Contiacti		<u> </u>	- A
,	shalter transportion?		s X No	<u> </u>
7a At any time during the tax year, was the foundation a party to a prohibited tax s		T6		_ - -
b If yes, did the foundation receive any proceeds or have any net income attribut Part VIII Information About Officers, Directors, Trust		nagara Highl		0
Part VIII Paid Employees, and Contractors	ees, roundation wa	magers, migni	,	
List all officers, directors, trustees, foundation managers and their	compensation.			
		(c) Compensation	(d) Contributions to	(e) Expense
(a) Name and address	(b) Title, and average hours per week devoted	(If not paid,	(d) Contributions to employee benefit plans and deferred	account, other allowances
JOYCE J RAYMOND	PRESIDENT	enter -0-)	compensation	allowalices
2400 MEDINA WAY	FKESIDENI			
VEST PALM BEACH, FL 33401	0.00	_	ا م ا	0
	VICE PRESIDEN	0.	0.	0.
	AICE LKESIDEN	Į.		
L200 NORTH FEDERAL HWY BOCA RATON, FL 33432	0 00			•
	0.00	0.	0.	0.
	SECRETARY			
1200 NORTH FEDERAL HWY				•
BOCA RATON, FL 33432	0.00	0.	0.	<u> </u>
JOHN J. RAYMOND, JR.	DIRECTOR		1	
			_	
Commonation of fire binds at a side and a side at the state of	0.00	0.	0.	<u> </u>
2 Compensation of five highest-paid employees (other than those inc		enter "NONE."	(d) Contributions to	(-) Evpansa
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
	devoted to position	(-, ,	compensation	allowances
NONE				
			T	
otal number of other employees paid over \$50,000			>	0
			_	

Form 990-PF (2009) JOYCE JAY RAYMOND FOUNDATION, INC		<u>279384</u> Pa	age 7
Part VIII Information About Officers, Directors, Trustees, Foundation M Paid Employees, and Contractors (continued)	lanagers, Highly		
3 Five highest-paid independent contractors for professional services. If none, enter "NONE			
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compens	ation
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 infor number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	mation such as the	Expenses	
1 THE FOUNDATION IS A NONOPERATING (DISTRIBUTING)			
FOUNDATION ITS SOLE ACTIVITY IS MAKING CONTRIBU			
SECTION 501(C)(3) ORGANIZATIONS.	TIOND TO		0.
2			<u> </u>
3			
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 at	nd 2.	Amount	
1 <u>N/A</u>			
	- -		
2			
All other program-related investments. See instructions.		. ==	
3			
Total Add lines 1 through 3	>		Λ

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations, se	e instructions)
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	151,984.
b	Average of monthly cash balances	1b	151,984. 815,056.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	967,040.
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	Subtract line 2 from line 1d	3	967,040.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	14,506.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	952,534.
6	Minimum investment return. Enter 5% of line 5	6	47,627.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part.)	nd certain	
1	Minimum investment return from Part X, line 6	1	47,627.
2a	Tax on investment income for 2009 from Part VI, line 5		
b	Income tax for 2009. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	343.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	47,284.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	47,284.
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	47,284.
P	art XII Qualifying Distributions (see instructions)	· · · · · · · · · · · · · · · · · · ·	•
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		00.650
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	22,650.
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	22,650.
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	22,650.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	qualifies for th	

4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI,	:			
line 7				47,284.
2 Undistributed income, if any, as of the end of 2009				
a Enter amount for 2008 only			0.	
b Total for prior years:				
,,		0.		
3 Excess distributions carryover, if any, to 2009:				
a From 2004				
b From 2005 9, 414.				
c From 2006 16,440.				
d From 2007 9,630.				
e From 2008 7,750.				
f Total of lines 3a through e	43,234.		- ·	
4 Qualifying distributions for 2009 from				
Part XII, line 4: ► \$ 22,650.			•	
a Applied to 2008, but not more than line 2a			0.	
b Applied to undistributed income of prior		•		
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus	.			
(Election required - see instructions)	0.			00.650
d Applied to 2009 distributable amount				22,650.
e Remaining amount distributed out of corpus	0. 24,634.			24,634.
5 Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a))	24,634.			24,634.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	18,600.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2008. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2009. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2010				0.
7 Amounts treated as distributions out of	i			
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2004	_			
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2010.	10 600			
Subtract lines 7 and 8 from line 6a	18,600.			
10 Analysis of line 9:				
a Excess from 2005 b Excess from 2006 1, 220.				
c Excess from 2007 9,630.				
d Excess from 2008 7,750.		-		
e Excess from 2009	}			
6 EX0033 HOTH 2003				5 000 DE (0000)

Part XIV Private Operating F	AY RAYMOND		A question 9)		279384 Page 10
			-A, question s)	N/A	
1 a If the foundation has received a ruling o					
foundation, and the ruling is effective fo				4040(1)(2) or []	1040/3/5)
b Check box to indicate whether the found		ng roundation described	Prior 3 years	J 4942(j)(3) or	1942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year (a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total
income from Part I or the minimum	(8) 2005	(8) 2000	(0) 2007	(0) 2000	(c) rotar
investment return from Part X for					
each year listed					
b 85% of line 2a		-			
c Qualifying distributions from Part XII,					
line 4 for each year listed d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly		-		-	
for active conduct of exempt activities.					
Subtract line 2d from line 2c					İ
3 Complete 3a, b, or c for the			-	-	
alternative test relied upon:					
 a "Assets" alternative test - enter: (1) Value of all assets 			1		
()					+
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter 2/3 of minimum investment return					
shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:					
(1) Total support other than gross					
investment income (interest, dividends, rents, payments on					
securities loans (section					
512(a)(5)), or royalties)					
(2) Support from general public					
and 5 or more exempt organizations as provided in					
section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income		<u> </u>			<u> </u>
Part XV Supplementary Info			if the foundation	n had \$5,000 or m	ore in assets
at any time during t		instructions.)			
1 Information Regarding Foundation	-				
a List any managers of the foundation wh year (but only if they have contributed n	D have contributed more	than 2% of the total cont	ributions received by th	e foundation before the cl	ose of any tax
NONE	10.10 than \$6,000). (600 t	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
b List any managers of the foundation wh	o own 10% or more of th	ne stock of a corporation	or an equally large port	ion of the ownership of a	partnership or
other entity) of which the foundation has					·
NONE					
2 Information Regarding Contributi					
Check here X if the foundation o	nly makes contributions	to preselected charitable	organizations and does	not accept unsolicited req	uests for funds. If
the foundation makes gifts, grants, etc.	(see instructions) to indiv	viduals or organizations u	nder other conditions, o	complete items 2a, b, c, ar	ıd d.
a The name, address, and telephone num	per of the person to who	m applications should be	addressed:		
b The form in which applications should b	e submitted and informa	tion and materials they sl	nould include:		
c Any submission deadlines:					
	 -	<u> </u>			
d Any restrictions or limitations on awards	, such as by geographic	ai areas, charitable fields,	kinds of institutions, or	other factors:	

923611 02-02-10

Total

Form **990-PF** (2009)

0.

≥ 3b

Part XVI-A **Analysis of Income-Producing Activities**

Enter gross amounts unless otherwise indicated.	Unrelated	business income		ed by section 512, 513, or 514	(e)
•	(a)	(b)	(c) Exclu-	(d)	Related or exempt
1 Program service revenue:	Business code	Amount	sion	Amount	function income
a					
b	_				
C					
d					
е					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments			14	14,362.	
4 Dividends and interest from securities			14	14,362. 2,804.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal					<u> </u>
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory			1		<7,865.>
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory	-				
11 Other revenue:					
a	_ L				
b					
C					
d	1				
e					
12 Subtotal. Add columns (b), (d), and (e)		().	17,166.	<7,865.>
13 Total. Add line 12, columns (b), (d), and (e)				13	9,301.
(See worksheet in line 13 instructions to verify calculations.)				

Part	XVI-B	Relationship	of Activities to	the Ac	ccomplishment (of Exemi	pt Purposes
------	-------	--------------	------------------	--------	-----------------	----------	-------------

Line No. ▼									
8	SALE	OF	MARKETABLE	SECURITIES	TO	CONTINUE	CHARITABLE	CONTRIBUTIONS.	
•	ļ								
									
	 								
	 						···· -		
							•		
									
		-							
						. =			

923621 02-02-10

Preparer's identifying number

P00277936

954-571-2020

EIN > 650228636

Sign Here

Signature of officer of trustee

Preparer's

Firm's name (or yours if self-employed),

address, and ZIP code

signature

CPA

Date

Check if

Phone no.

08/05/10 selfemployed ► [

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 tax payer or fiduciary) is based on all information of which preparer has any knowledge.

33441

ARUSO AND COMPANY,

BERFYELD BEACH

MILLSBORO BLVD.

JOYCE JAY RAYMOND FOUNDATION, 20-0279384 PAGE OF Part IV | Capital Gains and Losses for Tax on Investment Income (b) How acquired P - Purchase D - Donation (c) Date acquired (a) List and describe the kind(s) of property sold, e.g., real estate, (d) Date sold 2-story brick warehouse; or common stock, 200 shs. MLC Co. (mo., day, yr.) (mo., day, yr.) 10/13/0910/16/09 1a WYETH MERGRER WITH PFIZER 10/13/0910/16/09 b PFIZER INC 10/13/0910/28/09 c MARINER ENERGY INC 10/13/09|10/28/09 d MARINER ENERGY INC 10/13/0910/28/09 e MARINER ENERGY 10/13/0911/02/09 f NUCOR CORP 10/13/0911/17/09 g CVS CAREMARK CORP 10/13/0911/17/09 h CITRIX SYSTEMS INC 10/13/0911/17/09 3 COMMUNICATIONS HLDGS INC AOL INC |12/01/09|12/10/09 k m n 0 (g) Cost or other basis (f) Depreciation allowed (h) Gain or (loss) (e) Gross sales price (or allowable) plus expense of sale (e) plus (f) minus (g) 7,689 11,453 <3,764.> а 9 9, 0. b 999. 1,110. <111.> C 1,368. 1,520. <152.> d 5,398. 4,858 <540.> е 9,871 11,414. <1,543.> 6,566. 8,020. <1,454.> g 7,323 8,010. <687.> h 8,372 384. 7,988. 17 15. k m П 0 Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Losses (from col. (h)) Gains (excess of col. (h) gain over col. (k), (j) Adjusted basis (k) Excess of col. (i) (i) F.M.V. as of 12/31/69 but not less than "-0-") as of 12/31/69 over col. (j), if any <3,764.> a 0. b <111.> C d <152.> <540.> е <1,543.> f <1,454.> g <687.> h 384. k m n

If gain, also enter in Part I, line 7 2 Capital gain net income or (net capital loss) If (loss), enter "-0-" in Part I, line 7

Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter "-0-" in Part I, line 8

N/A

<u><7,865.</u>>

0

FORM 990-PF INTEREST ON SAVI	NGS AND TEM	PORARY CA	ASH IN	WESTMENTS	STATEMENT	1
SOURCE					AMOUNT	
COLONIAL BANK HARRIS BANK PERSHING PERSHING - ACCRUED INTEREST PA	AID ON PURC	HASES			3,5 11,6 1,7 <2,5	97. 15.
TOTAL TO FORM 990-PF, PART I,	LINE 3, CO	LUMN A			14,3	
FORM 990-PF DIVIDENDS	S AND INTER	EST FROM	SECUE	RITIES	STATEMENT	2
SOURCE	GROSS	AMOUNT		TAL GAINS	COLUMN (A AMOUNT)
MORGANSTANLEY SMITHBARNEY PERSHING		1,245. 1,559.		0.	1,2 1,5	
TOTAL TO FM 990-PF, PART I, L	N 4	2,804.		0.	2,8	04.
FORM 990-PF	ACCOUNTI	NG FEES			STATEMENT	3
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVI MENT INC		(C) ADJUSTED NET INCOM		
ACCOUNTING FEES	2,575.		0.			0.
TO FORM 990-PF, PG 1, LN 16B	2,575.		0.			0.
FORM 990-PF	TAX	ES			STATEMENT	<u> </u>
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVE MENT INC		(C) ADJUSTED NET INCOM		
FEDERAL EXCISE TAX	1,974.		0.			0.
TO FORM 990-PF, PG 1, LN 18	1,974.		0.			0.

FORM 990-PF	OTHER E	XPENSES	<u></u>		STATEMENT	5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVE MENT INC				
BANK CHARGES PENALTIES OFFICE EXPENSES	1,945. 106. 2,257.		0. 0. 0.			0.
TO FORM 990-PF, PG 1, LN 23	4,308.		0.			0.
FORM 990-PF	CORPORAT	E STOCK			STATEMENT	6
DESCRIPTION			вос	OK VALUE	FAIR MARKE VALUE	T
CORPORATE STOCK CORPORATE STOCK		•		649,766.	669,4	0. 97.
TOTAL TŌ FORM 990-PF, PART I	I, LINE 10B		-	649,766.	669,4	97.
FORM 990-PF	CORPORAT	E BONDS			STATEMENT	7
DESCRIPTION			вос	OK VALUE	FAIR MARKE VALUE	Т
CORPORATE BONDS CORPORATE BONDS		•		172,723.	170,3	0. 38.
TOTAL TO FORM 990-PF, PART I	I, LINE 10C	:		172,723.	170,3	38.
FORM 990-PF IN	TEREST AND P	ENALTIES			STATEMENT	8
TAX DUE FROM FORM 990-PF, PA LATE PAYMENT INTEREST LATE PAYMENT PENALTY	ART VI				3	43. 4. 7.
TOTAL AMOUNT DUE					3	54.

FORM 990-PF	EXPLANATION	CONCERNING	PART VII-A,	LINE 8B	STAT	EMENT	9
EXPLANATION							
THE STATE OF REQUIREMENT I					PF. THE	ONLY	
FORM 990-PF		LATE PA	YMENT PENALT	Y	STAT	EMENT	10
DESCRIPTION		DATE	AMOUNT	BALANCE	MONTHS	PENAL'	ΓY
TAX DUE DATE FILED		05/15/10 08/16/10	343.	343. 343.	4		7.

FORM 990-PF	LA	LATE PAYMENT INTEREST STAT			EMENT 11	
DESCRIPTION	DATE	AMOUNT	BALANCE	RATE	DAYS	INTERES
TAX DUE DATE FILED	05/15/10 08/16/10	343.	343. 347.	.0400	93	4
TOTAL LATE PAYMENT	INTEREST					4

FORM 990-PF

12

STATEMENT

			
RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT		AMOUNT
JOHN VOLK FOUNDATION 207 PHIPPS PLAZA PALM BEACH, FL 33480	NONE FURTHER EDUCATIONAL PURPOSES	NONPROFIT 501(C)(3)	2,000.
1713 QUAIL DRIVE WEST PALM	NONE FURTHER EDUCATIONAL PURPOSES	NONPROFIT 501(C)(3)	5,000.
AVON WALK FOR BREAST CANCER ONE AVON PLAZA RYE, NY 10580	NONE FURTHER EDUCATIONAL PURPOSES	NONPROFIT 501(C)(3)	600.
FEEDING SOUTH FLORIDA 426 CLAREMORE DRIVE WEST PALM BEACH, FL 33401	NONE FURTHER EDUCATIONAL PURPOSES	NONPROFIT 501(C)(3)	₋ 500.
3825 WISCONSIN AVENUE N.W.	NONE FURTHER EDUCATIONAL PURPOSES	NONPROFIT 501(C)(3)	2,000.
ST. MARKS EPISCOPAL CHURCH 3395 BURNS ROAD PALM BEACH GARDENS, FL 33410	NONE FURTHER EDUCATIONAL PURPOSES	NONPROFIT 501(C)(3)	100.
FRIENDS OF HOLLY HILL 190 JERUSALEM ROAD COHASSET, MA 02025	NONE FURTHER EDUCATIONAL PURPOSES	NONPROFIT 501(C)(3)	6,000.
KIDNEY FOUNDATION 700 BROADWAY SEATTLE, WA 98122	NONE FURTHER EDUCATIONAL PURPOSES	NONPROFIT 501(C)(3)	100.

GRANTS AND CONTRIBUTIONS

PAID DURING THE YEAR

JOYCE JAY RAYMOND FOUNDATION, I	INC		20-0279384
ST. DOMINIC OUTREACH CENTER 4835 LINCOLN DETROIT, MI 48208	NONE FURTHER EDUCATIONAL PURPOSES	NONPROFIT 501(C)(3)	2,000.
ST. PATRICK FOOD PANTRY 58 PARSONS STREET DETROIT, MI 48201	NONE FURTHER EDUCATIONAL PURPOSES	NONPROFIT 501(C)(3)	2,000.
ST. VINCENT MISSION ROUTE 404 DAVID, KY 41616	NONE FURTHER EDUCATIONAL PURPOSES	NONPROFIT 501(C)(3)	1,000.
OUR LADY OF REDEMPTION 8525 COLE WARREN, MI 48093	NONE FURTHER EDUCATIONAL PURPOSES	NONPROFIT 501(C)(3)	100.
CHARITY OF WEST PALM BEACH P.O. BOX 2529 PALM BEACH, FL 33480	NONE FURTHER EDUCATIONAL PURPOSES	NONPROFIT 501(C)(3)	250.
PALM BEACH SYMPHONY 426 CLAREMORE DRIVE PALM BEACH, FL 33480	NONE FURTHER EDUCATIONAL PURPOSES	NONPROFIT 501(C)(3)	1,000.

TOTAL TO FORM 990-PF, PART XV, LINE 3A

22,650.

Form **8868**

(Rev April 2009)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return.

OMB No 1545-1709

- II YUU i	are filing for an Automatic 3-Month Extension, complete only Part I and check this box are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this	form)	▶ X
	omplete Part II unless you have already been granted an automatic 3-month extension on a previously fi		rm 8868
Part I	Automatic 3-Month Extension of Time. Only submit original (no copies needed).	-	
A corpor:	ation required to file Form 990-T and requesting an automatic 6-month extension - check this box and com	nolete	
Part I onl	· · ·		▶ □
	corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request ar ome tax returns.	exter	sion of time
noted be (not auto you must	ic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronic matic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or cost submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic file gov/efile and click on e-file for Charities & Nonprofits	ically if	(1) you want the additional ated Form 990-T. Instead,
Type or	Name of Exempt Organization	Emp	loyer identification number
print	JOYCE JAY RAYMOND FOUNDATION, INC	,	0-0279384
File by the due date for filing your	Number street and see a K. D.O. h.		0 027304
return See instructions	City, town or post office, state, and ZIP code. For a foreign address, see instructions. WEST PALM BEACH, FL 33401		
Check ty	rpe of return to be filed (file a separate application for each return)		
For	rm 990	227 069	
● Thah	JOYCE JAY RAYMOND cooks are in the care of ► 2400 MEDINA WAY, WEST PALM BEACH, FL - cone No. ► (561) 274-4431 FAX No ►	33	401
Teleph If the c	organization does not have an office or place of business in the United States, check this box		r the whole group, check this ers the extension will cover
Teleph If the company to the compan	organization does not have an office or place of business in the United States, check this box is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)	memb	ers the extension will cover
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• If you	are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this bo	x	>	X
	nly complete Part II if you have already been granted an automatic 3-month extension on a previously filed	Form 886	88	
	are filing for an Automatic 3-Month Extension, complete only Part I (on page 1)			
Part I	Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no co	pies nee	ded)	
Type or	Name of Exempt Organization	Employ	er identification	number
print	JOYCE JAY RAYMOND FOUNDATION, INC	20-	-0279384	
File by the extended due date for	Number, street, and room or suite no If a P.O. box, see instructions.	For IRS	use only	
filing the return See instruction	City, town or post office, state, and ZIP code. For a foreign address, see instructions.			
Check 1	type of return to be filed (File a separate application for each return):			
F	orm 990	=	5227	orm 8870
STOP!	Oo not complete Part II if you were not already granted an automatic 3-month extension on a previous	sly filed l	orm 8868.	
Telep If the If this box 4 Ir 5 Fo 6 If 7 Si B 8a If	cooks are in the care of ▶ 2400 MEDINA WAY, WEST PALM BEACH, FL — shone No ▶ (561) 274–4431 FAX No ▶ corganization does not have an office or place of business in the United States, check this box is is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for part of the group, check this box ▶ and attach a list with the names and EINs of all request an additional 3-month extension of time until NOVEMBER 15, 2010. For calendar year 2009, or other tax year beginning , and ending this tax year is for less than 12 months, check reason. Initial return Final return tate in detail why you need the extension NFORMATION NEEDED TO PREPARE A COMPLETE AND ACCURATE EEN RECEIVED. This application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any prographicable credits. See instructions	s is for the members Ch	e whole group, cl the extension is ange in accounting	ng period
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	x payments made. Include any prior year overpayment allowed as a credit and any amount paid	<u> </u>		^
	reviously with Form 8868	8b 5	3	0.
	alance Due. Subtract line 8b from line 8a Include your payment with this form, or, if required, deposit			•
w	th FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	8c 9	<u> </u>	0.
Under pe it is true,	Signature and Verification nalties of perjury. I deplace that I have examined this form, including accompanying schedules and statements, and to the correct, and complete and that I am authorized to prepare this form.	best of m	y knowledge and be	elief,
Signature	Title > CO4	Date >	8/1/10	
			Form 8868 (R	ev. 4-2009)