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# Form **990-PF**

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

OMB No 1545-0052

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

_				ax year beginning				, and ending			<del> </del>
	<b>G</b> Che	ck al	I that apply	= -	] Initia	l R	eturn of a former p	· · ·			il return
_		— <sub>F</sub>	Name of foundation	Amended return			Address	nange ivar	_	change Employer (dentification num	
	Use th	ie							A		nper
	IRS lab			IILY FOUNDATI		leliv	ered to street address)	Room/suite	В	20-2550588 Telephone number (see the	instructions)
	print	:	,				,	1.00	٦	(386) 736-004	•
	or typ See Spe		City or town	GROVE DRIVE	<u> </u>		State	ZIP code	С	If exemption application is	
	Instructi		DELAND				ET.	32724	ı	1 Foreign organizations, chec	· -
-	H C		type of organiza	ation: X Section	5010	c)C	B) exempt private for		1	2 Foreign organizations meet	
	9	_	,	nonexempt charitat				private foundation	l	here and attach computatio	n
7	I Fa		ket value of all asse				ing method. X C		E	If private foundation status under section 507(b)(1)(A),	
	(fi	rom Pa	rt II, column (c), lin	e 16)			(specify)	<u></u>	F	If the foundation is in a 60-	
	▶\$		1,780	,028. <i>(P.</i>	art I, d	colu	ımn (d) must be or	cash basis )	<u>l'</u>	under section 507(b)(1)(B),	check here
[	Part I	A	nalysis of Re	evenue and			a) Revenue and	(b) Net investme	nt	(c) Adjusted net	(d) Disbursements
_		E:	xpenses (The	total of amounts in			penses per books	income		income	for charitable
		CC Sa	numns (b), (c), a erily equal the ai	and (d) may not nec mounts ın column (a	es-						purposes (cash basıs only)
			ee the instruction								(cash basis only)
_		1		, grants, etc, received (att	· -		· · · · · · · · · · · · · · · · · · ·				
		2	_	foundn is <b>not</b> req to att Sci						ļ	
		3	Interest on sav	rings and temporary							
		4		erest from securities			52,642.	52,64	12	52,642.	
			Gross rents	wood from oddarfilloo	r		02,0120			0-,0	· · · · · · · · · · · · · · · · · · ·
		t	Net rental income or (loss)		Γ		*%,*	L-6a Stmt			
	R	6 <i>a</i>	Net gain/(loss) from	n sale of assets not on line	10		-89,053.				
	EV	t	Gross sales price for assets on line 6a	or all 200,00	00.						
	E N U E	7		come (from Part IV, line 2)	L						
		8	Net short-term		L						
		9	Income modific	cations	⊦						
		102	Gross sales less returns and allowances		-		2 -				
2010		t	Less Cost of goods sold		$\neg$			\$			
7			Gross profit/(loss)	(att sch)				*			
D			, , ,	(attach schedule)	r						
$\ominus$											
∝_		12	Total. Add line	s 1 through 11			-36,411.	52,64	12.	52,642.	
APR -		13		fficers, directors, trustees,	etc						
		14	Other employee_sa								
		15	Pension plans	, eम्लिक्किक्किम् <mark>ला</mark> ह्य	ן,כ		0.070	0.05			
Ž	A		- 1	schedule) I = 16a St	int	o	2,870.	2,87	<i>,</i> 0 .		0.
ANNED	M	k	Accounting fees (a	ittach sch) itach NoANR 12-1262 (Sch	<u>~</u> _⊦	9	5,417.	5,41	7	5,417.	0.
3	ON		Interest	machedd) / 170- 510 C10 h	unc	긺	5,417.	- 5,41	L / ,	J, 411.	
SC	PS	17 18	-	(annualty) 2000 19 PVC		RS	410.	<del></del>	0.	0.	0.
	E TRA	19	Depreciation (	attack DEN, EX	<b>7</b> ^}	$\dashv$	410.			<u> </u>	
	ŢŤ	-	sch) and deple	etion		ᆜ				<del> </del>	
	N V	20	Occupancy		_		10 404	10.40	7 A		
		21	Travel, conference Printing and	ences, and meetings	·		10,424.	10,42	4.	-	0.
	A E N X D P	22 23		es (attach schedule)	-						_
	E		Janor expense	- (allasii solloudio)							
	N S	24	Total operatin	g and administrative	e		<del></del>				
	E S		expenses. Add	d lines 13 through 23	3 [		19,121.	18,71	11	5,417.	0.
			Contributions, gift	-	Ĺ	_	150,500.				150,500.
		26		es and disbursemen	ts.		169,621.	18,71	11	5,417.	150,500.
-		27	Add lines 24 a Subtract line 2		-+			10,7.		3,411.	100,000.
				enue over expenses	,			1			
		`	and disburser	nents	Ĺ		-206,032 <u>.</u>			<u> </u>	
		1	Net investment in	come (if negative, enter -0-	-) <u> </u>			33,93	<u>31</u>		
		•	C Adjusted net inco	me (if negative, enter -0-)	[					47,225.	

Parl	- 11	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	Er	d of year
ran		(See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing .	3,380.		
	2	Savings and temporary cash investments	214,655.	101,86	9. 101,869.
	3	Accounts receivable .			
		Less¹ allowance for doubtful accounts ▶			
	4	Pledges receivable		_	
		Less <sup>1</sup> allowance for doubtful accounts ▶			
	5	Grants receivable .			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see the instructions)			
	7	Other notes and loans receivable (attach sch)		-	
S		Less allowance for doubtful accounts ▶			
A S E T	8	Inventories for sale or use			
Ť	9	Prepaid expenses and deferred charges			
S	10	a Investments – U S and state government obligations (attach schedule)		·· <del>····</del>	
		b Investments — corporate stock (attach schedule) L−10b Stmt	1,229,560.	1,192,39	1,096,054.
	İ .	c Investments — corporate bonds (attach schedule) —L=10c Stmt	593 <u>,0</u> 42.	<u> </u>	5. 582,105.
	11	Investments — land, buildings, and equipment basis			,
		Less accumulated depreciation (attach schedule)			
	12	Investments – mortgage loans			
	13	Investments – other (attach schedule)			
	14	Land, buildings, and equipment basis ▶			
		Less accumulated depreciation (attach schedule)			
		Other assets (describe			
	16	Total assets (to be completed by all filers — see instructions. Also, see page 1, item !)	2,040,637.	1,834,60	5. 1,780,028.
Ļ	17	Accounts payable and accrued expenses		<del></del>	
À	18	Grants payable			
B	19	Deferred revenue			
Ļ	20	1			
ť	1	Mortgages and other notes payable (attach schedule)			
į	22	Other liabilities (describe			
E S	23	Total liabilities (add lines 17 through 22)			
		Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.		<del></del>	
NF	24	Unrestricted	2,040, <u>6</u> 37.	1,834,60	5.
EU	25	Temporarily restricted			
D	26	Permanently restricted			
A S B S A		Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.		· ·	
E L T A	27	Capital stock, trust principal, or current funds			
SŅ	28	Paid-in or capital surplus, or land, building, and equipment fund			
OE	29	Retained earnings, accumulated income, endowment, or other funds			
ŔŠ	30	Total net assets or fund balances (see the instructions)	2,040,637.	1,834,60	5.
	31	Total liabilities and net assets/fund balances (see the instructions)	2,040,637.	1,834,60	5.
Part	III	Analysis of Changes in Net Assets or Fund Balanc	es		
1	Tota	I net assets or fund balances at beginning of year - Part II, colum	nn (a), line 30 (must agr	ee with	1 2 040 637
2		of-year figure reported on prior year's return) er amount from Part I, line 27a		<del></del>	1 2,040,637. 2 -206,032.
2 3		er amount from Part I, line 27a Increases not included in line 2 (itemize)		<b>├</b> ─	3
4		lines 1, 2, and 3			4 1,834,605.
5		ases not included in line 2 (itemize)	•	<b></b>	5
-		I net assets or fund balances at end of year (line 4 minus line 5)	Part II, column (b), lin	e 30	6 1,834,605.

Form 990-PF (2009)

Par	(a) List and describ	Losses for Tax on Investmen e the kınd(s) of property sold (e.g , r se, or common stock, 200 shares ML	eal estate,	(b) How acquired P — Purchase D — Donation	(c) Date acquired (month, day, year)	(d) Date sold (month, day, year)
1 a						
b						
С						
d						
е						
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other bas plus expense of sal		(h) Gain or (e) plus (f) m	
a						
<u>b</u>	<del></del>					
<u>c</u>						
<u>d</u>						
е					<del></del>	
	(i) Fair Market Value as of 12/31/69	ing gain in column (h) and owned by  (j) Adjusted basis as of 12/31/69	(k) Excess of column over column (j), if an		(I) Gains (Colugain minus column (P gain minus column (P han -0-) <b>o</b> r Losses (fr	(), but not less
а						
b						
С		2. 2				
d						=
е					<del></del>	
-	If gain, also enter in Part I, line in Part I, line 8	loss) as defined in sections 1222(5) as 8, column (c) (see the instructions).	If (loss), enter -0-	3		
If 'Yes	s, the foundation does not qual	tion 4942 tax on the distributable amify under section 4940(e). Do not connected to each column for each year, see the	nplete this part	•	Yes	X No
	(a)  Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use ass		(d) Distribution Iumn (b) divided	
	2008	194,873.	·			-
	2007	152,639.				
	2006	158,642.				
	2005	42,500.	2,020	0,612.		0.021033
	2004	<u>                                     </u>			<del>_</del>	
2	Total of line 1, column (d)			2		0.021033
3	Average distribution ratio for th number of years the foundation	e 5-year base period—_divide the total has been in existence if less than 5	al on line 2 by 5, or by the years	3		0.021033
4	Enter the net value of nonchar	table-use assets for 2009 from Part >	K, line 5	_ 4		0.
5	Multiply line 4 by line 3			. 5		0.
6	Enter 1% of net investment inc	ome (1% of Part I, line 27b)		- 6		339.
7	Add lines 5 and 6	~		7		339.
	Enter qualifying distributions from		و الما المعالمين الما الما الما الما الما الما الما الم	8	tay rata Saa th	150,500.
BAA	If line 8 is equal to or greater to Part VI instructions	han line 7, check the box-in Part VI,	line 1b, and complete that p	eart using a 1%		n <b>990-PF</b> (2009)

Form	990-PF (2009) LERNER FAMILY FOUNDATION . 2	0-2550	1588		<u> </u>	age 4
Part		ee the in	structio	ns)		
1 a	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 instr.)					
b	Domestic foundations that meet the section 4940(e) requirements in Part V,	1			3	339.
	check here ► X and enter 1% of Part I, line 27b					
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, column (b)					•
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable			-		_
	foundations only Others enter -0-)	2	<del> </del>			0.
3	Add lines 1 and 2	3	<u> </u>			339.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	4				0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	-			339.
6	Credits/Payments*					1
	2009 estimated tax pmts and 2008 overpayment credited to 2009					j
	Exempt foreign organizations — tax withheld at source 6b	_				
	Tax paid with application for extension of time to file (Form 8868)  6c					!
	Backup withholding erroneously withheld 6d	_		-	~	
7	Total credits and payments Add lines 6a through 6d	7				
8	Enter any <b>penalty</b> for underpayment of estimated tax <u>Check here</u> if Form 2220 is attached	8	<del>-</del>			
9	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed	9	<del> </del>			339.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	1			0.
11	Enter the amount of line 10 to be Credited to 2010 estimated tax -1.5 Refunded	▶ 11	<u> </u>			
	VII-A Statements Regarding Activities		· ·		Yes	No
1 a	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?			1 a	165	X
2 b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?	-		1ь		x
	If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any materials per distributed by the foundation in connection with the activities	oublished	_			
	Did the foundation file Form 1120-POL for this year?			1 c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:  (1) On the foundation   (2) On foundation managers					4
٠ ۾	(1) On the foundation \$ (2) On foundation managers \$ Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed	lon		٠ ا		*
Ū	foundation managers >\$					<u> </u>
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		L	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, article	es				
,	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articl of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes		L	3		<u> </u>
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		X
b	If 'Yes,' has it filed a tax return on Form 990-T for this year?			4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		X
	If 'Yes,' attach the statement required by General Instruction T.		-			^
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either					
	By language in the governing instrument, or					
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that with the state law remain in the governing instrument?	conflict	-			
			-	6	<u>X</u>	├─
7	Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV	_	-	7	<u>X</u> _	ļ
8a	Enter the states to which the foundation reports or with which it is registered (see the instructions)		_			'
	FL - Florida					
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		-	8ь	Х_	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3)	or 4 <u>9</u> 42(j)	)(5)  -			
	for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If 'Yes,' compl	ete Part )	×/ <i>V</i>	9		X
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their	names	Ì	,,	v	
DAA	and addresses			<u>10</u> ກ 99	0-PF	(2009)
BAA	•		1 01	33	2-1 F	(2003)

	990-PF (2009) LERNER FAMILY FOUNDATION 20-25505	38	F	age 5
Par	t 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	,	Х
	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?	12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address . N/A		. <b>_</b>	
14	The books are in care of DONALD LERNER 1elephone no (386)	<u>736</u>	<u>-004</u>	12
	Located at ► 925 ISLAND GROVE DR, DELAND, FL ZIP + 4 ► 32724			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here		<b>&gt;</b>	
	and enter the amount of tax-exempt interest received or accrued during the year			
Par	t 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
1 a	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?  Yes X No			İ
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?  Yes X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?  Yes X 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 )  Yes   Yes			
ŀ	If any answer is 'Yes' to 1a(1)-(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see the instructions)?	1 b		X
	Organizations relying on a current notice regarding disaster assistance check here			
•	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?	1 c		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))			
á	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 ▶ 20, 20, 20			ļ
	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2)			
•	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			/
	all years listed, answer 'No' and attach statement - see the instructions )	2b		
•	: If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	► 20, 20, 20			
3	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?  Yes X No			
ı	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 4/20, to	3ь		
	determine if the foundation had excess business holdings in 2009)	30		-
48	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		х
4	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		l <del></del>	
	the tax year beginning in 2009?	4b	0.05	(2000)
BAA	,	orm <b>99</b>	U-rr	(2009)

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Part VII-B   Statements Regarding Activit	ies for Which Forn	n 4720 May Be Req	uired (continued)		
5a During the year did the foundation pay or incur	any amount to:			1 1	
(1) Carry on propaganda, or otherwise attemp	t to influence legislation	(section 4945(e))?	Yes X	No	
(2) Influence the outcome of any specific publ on, directly or indirectly, any voter registra		4955); or to carry	Yes X	No	
(3) Provide a grant to an individual for travel,	study, or other similar p	ourposes?	Yes X	No	
(4) Provide a grant to an organization other th in section 509(a)(1), (2), or (3), or section	an a charitable, etc, org 4940(d)(2)? (see instru	ganization described ctions)	Yes X	No	
(5) Provide for any purpose other than religious educational purposes, or for the prevention			Yes X	No	
b If any answer is 'Yes' to 5a(1)-(5), did any of t described in Regulations section 53 4945 or in (see instructions)?	he transactions fail to q a current notice regard	ualify under the exception ing disaster assistance	ons	5b	ļ
Organizations relying on a current notice regar	ding disaster assistance	e check here	► []		
c If the answer is 'Yes' to question 5a(4), does the tax because it maintained expenditure response	ne foundation claim exe ability for the grant?	mption from the	Yes	No	
If 'Yes,' attach the statement required by Regu	lations section 53 4945	-5(d).			
6a Did the foundation, during the year; receive an on a personal benefit contract? .			Yes X	No	
<b>b</b> Did the foundation, during the year, pay premit	ums, directly or indirectl	ly, on a personal benefit	contract?	6b	X
'If 'Yes' to 6b, file Form 8870.  7a At any time during the tax year, was the found.	ation a party to a prohib	oited tax shelter transact	ion? Yes X	No	
<b>b</b> If yes, did the foundation receive any proceeds				7b	
Part VIII Information About Officers, D					
and Contractors					
1 List all officers, directors, trustees, foundation	n managers and their co		ictions).		
(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 other allow	
DONALD LERNER, 925 ISLAND					
GROVE DR,	DIRECTOR	,			
DELAND, FL 32724	3.00	0.	0.	:	3,127.
SHARON SHOEMAKER, 925 ISLAND					
GROVE DR,	DIRECTOR		,		
DELAND, FL 32724	3.00	0.	0.		3,127.
BRITTNEY BEZIRGAN, 2955 N RACINE,	DIRECTOR			-	
CHICAGO, IL 60657	3.00	0.	0.		1,042.
See Information about Officers, Directors, Trustees, Etc	<u></u>				
;			,		
2 (2	- (-1) 1) 1 1 - 1	0.	0.		3,126.
2 Compensation of five highest-paid employee					
(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 other allow	
N/A	, , , , , , , , , , , , , , , , , , ,	-	Compensation		
	———		<u>-</u> -		
0	CTC.				
,	<b>.</b>			_	
0					
·	2 '				
0		-	<del></del>		
	] _C7			}	
0			-		
Total number of other employees paid over \$50,000	L	1	<b>•</b>		None
BAA -	*** TEEA0306 0	07/06/09		Form <b>990</b> -	

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and Contractors (continued)		
3 Five highest-paid independent contractors for professional services — (see instructions). enter 'NONE.'	If none,	
(a) Name and address of each person paid more than \$50,000 (b)	Type of service	(c) Compensation
N/A		
	İ	
		-
·['		
	<del></del>	
Total number of others receiving over \$50,000 for professional services	<u> </u>	None
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 suc	h as the number of	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information suc organizations and other beneficiaries served, conferences convened, research papers produced, etc.		Expenses
1 <u>N/A</u>		
	·	0
2		0.
		<u> </u>
3	- <del>-</del>	
·		
4	<del></del>	<del>-</del>
· *	-=	
Part IX-B Summary of Program-Related Investments (see instructions)		
	ur on lines 1 and 2	Amount
Describe the two largest program-related investments made by the foundation during the tax year 1 N/A		Amount
N/A		
		0.
2		
All other program-related investments See instructions.		
3	·	
		37 -
Total. Add_lines 1 through 3	<u></u> <u>▶</u>	None Form <b>990-PF</b> (2009)
<b>BAA</b>		1 OIIII 330-FF (2003)

Pa	Minimum Investment Return (All domestic foundations must complete this part see instructions.)	. Foreign fou	ındatıons,
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	1 a	
1	<b>b</b> Average of monthly cash balances .	1 b	
•	c Fair market value of all other assets (see instructions)	1 c	
(	d Total (add lines 1a, b, and c)	1 d	
•	e 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	
3	Subtract line 2 from line 1d	3	0.
4	Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	0.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	. 5	0.
6	Minimum investment return. Enter 5% of line 5	6	0.
Pa	nt XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private of and certain foreign organizations check here ► ☐ and do not complete this		ndations
1	Minimum investment return from Part X, line 6	1	0.
	a Tax on investment income for 2009 from Part VI, line 5 2 2 3 3 5 b Income tax for 2009 (This does not include the tax from Part VI.)	39.	
3 (	c Add lines 2a and 2b	2c	339.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	0.
4	Recoveries of amounts treated as qualifying distributions	4 /	
5	Add lines 3 and 4	5	0.
6	Deduction from distributable amount (see instructions)	6 1	
	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	0.
Pa	rt 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	150,500.
ı	<b>b</b> Program-related investments — total from Part IX-B	1Ь	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 as Suitability test (prior IRS approval required)	3a	
1	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	150,500.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions)	5	339.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	150,161.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating when qualifies for the section 4940(e) reduction of tax in those years	ether the found	lation
BAA		F	orm <b>990-PF</b> (2009)
·		-	
	11		

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

		(a) Corpus	(b) Years prior to 2008	<b>(c)</b> 2008	<b>(d)</b> 2009
Distributable amount for 20 line 7	09 from Part XI,	·····			0.
2 Undistributed income, if any, as of					
a Enter amount for 2008 only				0.	
<b>b</b> Total for prior years 20, 2	<b>—</b>	***************************************			
3 Excess distributions carryover, if a					
a From 2004	0.				
<b>b</b> From 2005	42,500.				
<b>c</b> From 2006	159,650.				
<b>d</b> From 2007	154,783.				
e From 2008	195,283.				
f Total of lines 3a through e		552,216.			
4 Qualifying distributions for 2	2009 from Part		<del>.</del>		
XII, <u>line 4</u> ► \$	150,500.			1	
a Applied to 2008, but not mo					
<b>b</b> Applied to undistributed inc (Election required — see in:			_	,	
- Treated as distributions out	of corpus				
<ul> <li>c Treated as distributions out</li> <li>(Election required – see insection)</li> </ul>					
d Applied to 2009 distributable	e amount				
e Remaining amount distribut	ted out of corpus	150,500.			
5 Excess distributions carryover appl					
(If an amount appears in co same amount must be show		*** *			
6 Enter the net total of each	column ac				
indicated below:	Column as	*	*		
a Corpus Add lines 3f, 4c, and 4e S	Subtract line 5	702,716.	*	**	
<b>b</b> Prior years' undistributed in	ncome. Subtract	-	0.	<b>*</b>	
c Enter the amount of prior y	ears' undistribut	ɔ .,	<u> </u>		
ed income for which a notice	ce of deficiency	÷			
has been issued, or on white 4942(a) tax has been previous	ch the section			*	
.,			<del> </del>		·· <del></del> ···
d Subtract line 6c from line 6 amount — see instructions	b Taxable		0.		
e Undistributed income for 2008 Su , line 2a. Taxable amount — see ins				0.[	
7 IIIO Ed. Taxable allibant 500 Inc					
f Undistributed income for 20					
4d and 5 from line 1. This a distributed in 2010.	amount must be			}	0.
7 Amounts treated as distribu	utions out of				
corpus to satisfy requireme	nts imposed				
by section 170(b)(1)(F) or 4 (see instructions)	<sup>1942</sup> (g)(3)				
,	vor from 2004 554				<del></del>
8 Excess distributions carryon applied on line 5 or line 7 (		0.	-		
9 Excess distributions carry Subtract lines 7 and 8 from		702,716.			
10 Analysis of line 9			•	:	
a Excess from 2005	42,500.				
<b>b</b> Excess from 2006	159,650.				
c Excess from 2007	154,783.				
d Excess from 2008	195,283.				
e Excess from 2009	150,500.			<u> </u>	Form <b>990-PF</b> (2009)

Form 990-PF (2009) LERNER FAMILY FO		tions and Part \	/II A guestion (	20-255058	
1a If the foundation has received a ruling or d					N/A
is effective for 2009, enter the date of the	ruling				14040()(5)
<b>b</b> Check box to indicate whether the foundation		iting foundation des		4942(j)(3) or	4942())(5)
2a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year (a) 2009	<b>(b)</b> 2008	Prior 3 years (c) 2007	(d) 2006	(e) Total
investment return from Part X for each year listed	(a) 2003	(3) 2000	(6) 2007	(d) 2000	(c) Total
<b>b</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					
Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon					
a 'Assets' alternative test - enter					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)	. '				
b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed	1 2				
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)	•	<del>.</del> .	-		
41.			<del> <u>-</u></del>		
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(jX3)(BXIII)		<del>-</del>		_	
(3) Largest amount of support from an exempt organization	-				
(4) Gross investment income					
Part XV Supplementary Information	(Complete this	part only if the	organization ha	d \$5,000 or moi	e in
assets at any time during the		structions.)			
1 ' Information Regarding Foundation Managa List any managers of the foundation who had	ave contributed more	e than 2% of the tot	al contributions rece	eived by the foundat	on before the
close of any tax year (but only if they have	contributed more th	an \$5,000). (See se	ection 507(d)(2).)		
DONALD LERNER - NO GOODS	OR SERVICES W	VERE RECEIVE	D BY THE DON	OR.	
<b>b</b> List any managers of the foundation who co	wn 10% or more of	the stock of a corpor	ration (or an equally	large portion of the	ownership of
a partnership or other entity) of which the	foundation has a 109	% or greater interest	t	, ter go portion at an	
N/A					
	. 010 1	<del></del>			<del></del>
2 Information Regarding Contribution, Gran					unnalisated
Check here \( \breve{X} \) if the foundation only neguests for funds of the foundation makes complete items 2a, b, c, and d.	s gifts, grants, etc, (s	see instructions) to i	ndividuals or organi	zations under other	conditions, -
a The name, address, and telephone number	r of the person to wh	om applications sho	ould be addressed:		
f training, againstic, and telephone training	—-	арриовионо они	- <del></del> -	-	
			-		
<b>b</b> The form in which applications should be s	submitted and inform	ation and materials	they should include		
	. ~ .		-		
c Any submission deadlines:		·			
· ·					
d Any restrictions or limitations on awards,	such as by geograph	ical areas, charitable	e fields, kinds of ins	stitutions, or other fa	ictors.
BAA	TE	EA0310 07/06/09	<del></del>	F	Form <b>990-PF</b> (2009)

Page 11

Part XV | Supplementary Information (continued)

3 Grants and Contributions Paid During the Yea	r or Approved for Futu	re Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager or	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	substantial contributor	recipient		
a Paid during the year		İ		
BEECH BROOK			MENTAL HEALTH	
3737 Lander Rd.		501		
CLEVELAND, OH 44124	1		FOSTER CHILDREN & OTHERS	10,000.
CAMP BOGGY CREEK			AID FOR SERIOUSLY	
30500 BRANTLEY BRANCH RD		501		
EUSTIS, FL 32736		(C) (3)	ILL CHILDREN	10,000.
CASA CENTRAL SOCIAL SERVICES CORP			FOSTER CARE	
1343 N CALIFORNIA AVE		501		
CHICAGO IL 60622		(C) (3)	HISPANIC COMMUNITY	10,000.
CLEVELAND CHRISTIAN HOME			CHILDRENS CARE	
2202 PRAME AVE		501		
CLEVELAND, OH 44109	<del>-</del>	(C) (3)	EMERGENCY_NEEDS	10,000.
BOY'S TOWN OF CENTRAL FLORIDA	- **		YOUTH CARE	
37 ALAFAYA WOODS BLVD	- 1 - 1	501		
OVIEDO, FL 32765		(C) (3)		10,000.
HEPHZIBAH CHILDRENS ASSO.			SIBLING CAMP	
946 NORTH BOULEVARD		501		40.000
OAK PARK, IL 60301		C) (3)	PROGRAM	10,000.
LUTHERAN CHILD & FAMILY SERVICES			FOSTER PARENT	
7620 MADISON ·		501		40.000
RIVER FOREST, IL 60305		(C) (3)	RECRUITMENT	10,000.
MARYHURST, INC.			CHILD CARE	
1015 DORSEY LAND		501		
LOUISVILLE KY 40223	İ	(C) (3)	THERAPY PROGRAMS	10,000.
NEIGHBOR TO FAMILY			FOSTER PARENT	
220 S RIDGEWOOD #260	İ	501		
DAYTONA BEACH FL 32114		(C) (3)	RECRUITMENT	10,000.
See Line 3a statement			·	
•				CO 500
,			··· · · · · · · ·	60,500.
j			, ,	
1				
Total	<u> </u>	<u></u>	. ► 3a	150,500.
b Approved for future payment	T		32	130,300.
b Approved for factore payment				
,				
-				
1)				
,				
1				
',			:	
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			ļ	
1				
Total			► 3b	
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#### Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelated	business incom <u>e</u>	Excluded by	section 512, 513, or 514	
• B	(a) Business code	<b>(b)</b> Amount	(c) Exclu- sion	<b>(d)</b> Amount	(e) Related or exempt function income
1 Program service revenue		<del></del>	code		(see the instructions)
a N/A	<del> </del>		<del></del>		
b	<del> </del>				
c	<del></del>	<del></del>	+		
d	<del>                                     </del>		<del></del>	<del></del>	<u> </u>
e				· · · · · · · · · · · · · · · · · · ·	
f	<del></del>				<u> </u>
g Fees and contracts from government agencies	ļ ļ .				
2 Membership dues and assessments	ļ				
3 Interest on savings and temporary cash investments		<u></u>			<u> </u>
4 Dividends and interest from securities					52,642.
5 Net rental income or (loss) from real estate					
a Debt-financed property	,				
<b>b</b> Not debt-financed property					
6 Net rental income or (loss) from personal property	, '				
7 Other investment income	_				
8 Gain or (loss) from sales of assets other than inventory	(a)				-89,053.
9 Net income or (loss) from special events	3	•	-		
10 Gross profit or (loss) from sales of inventory	30				
11 Other revenue	7	<del></del>	*		
a					
b					
С	· · · · · · · · · · · · · · · · · · ·				
d			=	<del>-v</del>	
e					
12 Subtotal Add columns (b), (d), and (e)		*			-36,411.
13 Total. Add line 12, columns (b), (d), and (e)	\			13	-36,411.
(See worksheet in the instructions for line 13 to verify of	calculations )				
Part XVI-B Relationship of Activities to the	e Accomplisi	nment of Exem	pt Purpos	es	
Line No. Explain below how each activity for which accomplishment of the foundation's exemp	income is reporte	ed in column (e) of r than by providing	Part XVI-A co	ontributed importantl th purposes). (See the	y to the ne instructions)
1 N/A					
				-	· · · · · · · · · · · · · · · · · · ·
-					
	<del></del>				<del></del>
1				<del></del>	· <del>-</del>
				<del></del>	
		·· <del>···</del> ····			
·		<del>.</del>			

BAA TEEA0502 07/06/09 Form 990-PF (2009)

# Form 990-PF (2009) LERNER FAMILY FOUNDATION 20-2550588 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

						Yes	No
descr	1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?						
	•		oncharitable exempt organiza	tion of			
<b>(1)</b> C	ash		, <u>-</u>		1a(1)		х
• •	Other assets				1 a (2)		Х
	transactions						,
<b>(1)</b> S	ales of assets to a nonc	haritable exempt	organization		1 b (1)		Х
<b>(2)</b> P	urchases of assets from	a noncharitable	exempt organization		1b(2)		Х
<b>(3)</b> R	Rental of facilities, equipr	ment, or other as	sets		1 b (3)		X
(4) R	Reimbursement arrangen	nents			1b (4)		X
<b>(5)</b> Lo	(5) Loans or loan guarantees .						Х
<b>(6)</b> P	erformance of services	or membership o	r fundraising solicitations		1b (6)		Х
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees .							X
	3				·		
the ac	oods, other assets, or se	ervices aiven by t	he-reporting-foundation If the	Column (b) should always show the fair e foundation received less than fair mark e goods, other assets, or services receiv	et value in	of	
(a) Line no.	(b) Amount involved		incharitable_exempt organization	(d) Description of transfers, transactions,		igement	
		· · · · · · · · · · · · · · · · · · ·					
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descr	foundation directly or in tibed in section 501(c) of s,' complete the followin	f the Code (other	with, or related to, one or methan section 501(c)(3)) or in	ore tax-exempt organizations section 527?	Yes	X	No
Dil 16:	(a) Name of organization	<del></del>	(b) Type of organization	(c) Description of	relationship	_	
	( <u>-)</u>				_		
		-	·				
•							
Under pena	alties of perjury   declare that !	eve examined this re	turn, including accompanying schedul	es and statements, and to the best of my knowledge	and belief, it is tru	e, corre	ct, and
complete	Degraration of preparer (other tr	tan taxpayer or liquicia	ry) is based on all information of whice	in preparer has any knowledge			
		/ )		B 12.10	-al a	0	
<b>-</b>			<del></del>	Date Title	820	<del>(</del> —	
Signa	ature of officer of trustee	$\widetilde{n}$		<del></del>	Preparer's Identify	ייים מוויים	
D	Preparer's	$V$ . $\mathbf{N}$	1	Check if	(See Signature in		
Paid Pre-	signature 75/10	JA JA	w	3-5-/O self-employed			
parer's	Firm's name (or GASS	ND LEWIS	LTD.	EIN ►	<del></del> -		
Use Only	yours if self- employed),	WASHINGTO	N ST STE 855				
<u> </u>	address, and ZIP code CHICA	AGO	<del></del>	IL 60602-2799   Phone no ▶			
BAA '			a start		Form <b>99</b>	0-PF (	(2009)

TEEA0503 07/06/09

## Form 990-PF Part I, Line 6a

Name

## **Net Gain or Loss From Sale of Assets**

2009

Employer Identification Number

LERNER FAMILY FOUN	DATION	20-2550588
Asset Information:		
Description of Property	INVESTMENT SECURITIES	
Date Acquired	How Acquired	
Date Sold	Name of Buyer	
Sales Price	200,000. Cost or other basis (do not reduce by depreciation	n) 289,053.
Sales Expense	Valuation Method:	
Total Gain (Loss):	-89,053. Accumulation Depreciation.	
Description of Property.		
Date Acquired	How Acquired	
Date Sold	Name of Buyer	
Sales Price	Cost or other basis (do not reduce by depreciation	n)
Sales Expense	Valuation Method:	
Total Gain (Loss)	Accumulation Depreciation.	
Description of Property:		
Date Acquired:	How Acquired	•
· — — — — — — — — — — — — — — — — — — —		
Sales Price	Cost or other basis (do not reduce by depreciation	
Sales Expense	Valuation Method:	, <u> </u>
Total Gain (Loss)	Accumulation Depreciation	
Description of Property	2000,	
Date Acquired	How Assured	-
Date Sold	Name of Buyer	
Sales Price	Cost or other basis (do not reduce by depreciation	n) :
Sales Expense	Valuation Method	
Total Gain (Loss)	Accumulation Depreciation:	
Description of Property:		
Date Acquired	11 A a support	
Date Sold	Name of Buyéř	-
	Cost or other basis (do not reduce by depreciation	n)
Sales Expense	Valuation Method	· -
Total Gaın (Loss)	Accumulation Depreciation	·
Description of Property:	<u> </u>	
Date Acquired	How Acquired:	
Date Sold·	Name of Buyer	
Sales Price	Cost or other basis (do not reduce by depreciation	n)
Sales Expense	Valuation Method	
Total Gain (Loss)	Accumulâtion Depreciation	
Description of Property:		
Date Acquired	How Acquired:	<u> </u>
Date Sold	Name of Buyer	
Sales Price	Cost or other basis (do not reduce by depreciation	n)
Sales Expense	Valuation Method <sup>.</sup>	
Total Gain (Loss)	Accumulation Depreciation	
Description of Property		
Date Acquired:	How Acquired	_ <del></del>
Date Sold <sup>,</sup>	Name of Buyer	
Sales Price	Cost or other basis (do not reduce by depreciation	n)
Sales Expense	Valuation Method	
Total Gain (Loss):	Accumulation Depreciation	

Form 990-PF, Page 6, Part VIII, Line 1 Information about Officers, Directors, Trustees, Etc.

(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
Person X Business				
YASIR BEZIRGAN, 2955 N RACINE,	DIRECTOR			
CHICAGO, IL 60657	3.00	0.	0.	1,042.
Person X Business				
MICHAEL LERNER				
665 EAST HOMSTED DR	DIRECTOR		_	
Person X Business	3.00	0.	0:-	1,042.
JULIE JACOBS -	. Tustec. ⊥ .			
390 RIVERSIDE DR #12AC	DIRECTOR			
NEW YORK NY 10025	35,00	0.	· 0.	1,042.
	. 55= -			
Total	5 We .		-	
	** -		-	
	CStor		<u> </u>	3,126.

Form 990-PF, Page 11, Part XV, line 3a

Line 3a statement

tine 3a Statement	<u>-:</u>		· · · · · · · · · · · · · · · · · · ·	
Recipient	If recipient is	Foun-	Purpose of	Person or
	an individual,	dation	grant or contribution	Business
Name and address	show <u>'</u> any	status		Checkbox
(home or business)	relationship to	of re-	-	
•	any foundation	cipient		Amount
_	manager or			
<u>.</u>	substantial			
-	contributor			
a Paid during the year				S
OUR CHILDREN'S HOMESTEAD	<b></b>		EDUCATION FOR	Person or
387 SHUMAN BLVD,		501		Business
NAPERVILLE, IL 60563		C) (3)	FOSTER CHILDREN	10,000.
CHILDREN'S AID SOCIETY				Person or
105 E 22ND ST		501 -		*Business* - [
NEW YORK NY 10010		C3	FOSTER CARE	10,000.
FLORIDA UNITED METHODIST CHILDREN'S HOME				Person or
51 MAIN ST		501		Business
ENTERPRISE FL 32725	ec p.	C3	YOUTH TRAINING	10,000.
EDWIN GOULD ACADEMY	nd de		AID TO FORMER FOSTER	Person or
55 EAST 110TH ST	·		CARE CHILDREN	Business
NEW YORK NY 10029	. :	501C3		10,000.
FOSTER PARENTS ASSOCIATION OF WASHINGTON	v tva		FOR FOSTER CARE	Person or
PO BOX 1638	ายยู		CONFERENCES	Business
OLYMPIA WA 98507	ngt	501C3		10,000.
PATHWAY CARING FOR CHILDREN	: : : : : : _ : _ :		TO RECRUIT NEW	Person or
6370 WISE AVENUE NW			FOSTER_CARE	Business
NORTH CANTON OH 44720		501C3	GIVERS	10,500.

Form 990-PF, Page 11, Part XV, line 3a

Line 3a statement

Continued

Recipient  Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foun- dation status of re- cipient	Purpose of grant or contribution	Person or Business Checkbox Amount
a Paid during the year				

Total

60,500.

Form-990-PF, Page 1, Part I

Line 16a - Legal Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
GASS AND LEWIS LTD	LEGAL SERVICES	-2,870.			

Total

2,870.

Form 990-PF, Page 1, Part I

**Line 16c - Other Professional Fees** 

	ame of rovider <sup></sup>	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EVENSE	Y AND KATZ	INVESTMENT ADVISORY SE	5,417.			L.

Total

°-5,417.

'nc 10

Form 990-PF, Page 2, Part II, Line 10b

'L-10b-Stmt

	End of	End of Year		
Line 10b - Investments - Corporate Stock:	Value	Fair Market Value		
BARCLAYS PLC IPATH ETN	32,920.	40,316.		
ISHARES TR MSCI EMERGING	25,212.	41,989.		
ISHARES TR RUSSELL 3000	367,445.	345,703.		
ISHARES TR S&P MIDCAP 400	58,764.	62,617.		
STOCK MUTUAL FUNDS	708,050.	605,429.		

Total

1,192,391.

1,096,054.

Form 990-PF, Page 2, Part II, Line 10c

L- 10c Stmt

	End of Year		
Line 10c - Investments - Corporate Bonds:	Book Value	Fair Market Value	
JP MORGAN CHASE MTN LINKED TO 1/24/10 ZERO	36,000.	47,092.	
BOND FUNDS	504,345.	535,013.	
Total	540,345.	582,105.	

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