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Form **990-PF**

Department of the Treasury Internal Revenue Service

Return of Private Foundation

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

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

2009

OMB No 1545-0052

Fo	r cal	endar year 2009, or ta	x year beginning	, and ending						
G	Che	ck all that apply:	Initial return		Initial return of a former public charity			Final return		
į —	Amended return			Address char	Address change			Name change		
Ù	se th	e IRS Name of founda						number		
label. THE LYNN AND ROBER				ZIMMER FAMILY			00 0000444			
0	therv pri:		ION (FOR JOHN I			D/	20-6066441			
1	or ty		M SHORE ROAD	delivered to street address)		Room/suite	B Telephone number			
		1 DILLER	ate, and ZIP code							
Ins	struc	GREENWI					C If exemption application is p D_1. Foreign organizations	<u> </u>		
H	Che	ck type of organization;		exempt private foundation			2. Foreign organizations me check here and attach co	eting the 85% test,		
17	_	••	exempt charitable trust	Other taxable private found	ation		Ì			
<u>ا ا</u> کر		narket value of all asset		ting method: X Cash	Accru	al	E-If private foundation state under section 507(b)(1)			
(from	Part II, col. (c), line	16)	Other (specify)			F If the foundation is in a			
	▶\$	1,8	855,200 (Part I, col	umn (d) must be on cash	basis)		under section 507(b)(1)			
Р	arţ	Analysis of Revent (The total of amounts in necessarily equal the a	n columns (b), (c), and (d) may not	(a) Revenue and expenses per books	(b) Net inv		(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)		
_	1		grants, etc., received	0.				(Casil basis only)		
	2		undation is not required to attach Sch. B	- 0.						
	3	Interest on savings and		1'''			-			
	4	5	est from securities	73,060.	73	3,060.	73,060.	Statement 1		
-	5	a Gross rents								
		b Net rental income or (los	ss)			-				
4	ր 6		ale of assets not on line 10	<86,954.	>					
	2	b Gross sales price for all assets on line 6a	504,627.							
á	7	Capital gain net income	· · · ·			0.				
_	٥		•				N/A			
	9	Gross sales less returns								
	10									
	- 1	b Less Cost of goods solec Gross profit or (loss)								
_	11		,							
2010 2010	12		rough 11	<13,894.	> 73	3,060.	73,060.			
	13		s, directors, trustees, etc	0.	,,,	0.	0.	0.		
-e	14	Other employee sala	ries and wages							
● .	15	Pension plans, empl	oyee benefits							
	16	a Legal fees								
, ,	5	b Accounting fees				SUSIV				
	וַנ	c Other professional fe	ees		10 40	(1 (h) 6) 6	816 0			
	17				19 48	V 10) }} &	916 Š			
OCANAGED Ministrative Ext	18		-1-4							
	2 19 20		pietion		I OG	DEN				
	21	• •	and meetings		Carre Col					
Š	22	•	*			:				
Solution and Administrative extractive	2 23									
atir	24	· ·	administrative		7.7.					
ğ	5	expenses. Add lines		0.		0.	0.	0.		
C	25	Contributions, gifts,	grants paid	243,980.				243,980.		
	26	Total expenses and	disbursements.							
	╽.	Add lines 24 and 25		243,980.		0.	0.	243,980.		
	27	Subtract line 26 from	n line 12:							
	- 1		expenses and disbursements	<257,874.						
	ı.	b Net investment inco			73	3,060.	52.000			
923	501 02-10	C Adjusted net income		A A Nation and the last	<u>.</u>		73,060.	5 000 DE (0000)		
02-0	02-10	LMA FOT PTIVACY	Act and Paperwork Reduction	I ACT NOTICE, SEE THE INSTRUC	TIONS.	a	10	Form 990-PF (2009)		

- Fñ	rm 9	THE LYNN AND ROBERT ZIM 90-PF (2009) FOUNDATION (FOR JOHN DAL		20-4	5066441 Page 2
		Allested askedules and a more than the desired	Beginning of year	<u>20-6</u> End of	0000441 1ayez
Į F	<u>art</u>	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	(a) DOOK Value	(b) Dook Value	(C) I all IvialNet Value
		Savings and temporary cash investments			 .
		Accounts receivable			·
	"	Less: allowance for doubtful accounts			
	₄	Pledges receivable			
	•	Less: allowance for doubtful accounts			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other		1	
	•	disqualified persons			
	7	Other notes and loans receivable			
	'	Less: allowance for doubtful accounts			
S	8	Inventories for sale or use			
Assets	1 -	Prepaid expenses and deferred charges_			
As		Investments - U.S. and state government obligations			
	1	Investments - corporate stock	1,795,466.	1,537,592.	1,855,200.
	1	Investments - corporate bonds	1//33/1001	2/33//3320	1/033/2001
		Investments - land, buildings, and equipment basis			
	l''	Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other	-		
	14	Land, buildings, and equipment; basis ▶			
		Less accumulated depreciation			
	15	Other assets (describe ►			
	16	Total assets (to be completed by all filers)	1,795,466.	1,537,592.	1,855,200.
_	17	Accounts payable and accrued expenses			2700072000
	18	Grants payable			
S	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons		~	
abil	21	Mortgages and other notes payable			
	22	Other liabilities (describe)			
	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here			
		and complete lines 24 through 26 and lines 30 and 31			
Ses	24	Unrestricted			
<u>a</u>	25	Temporarily restricted			
Ba	26	Permanently restricted			
힡		Foundations that do not follow SFAS 117, check here		ï	
Ē		and complete lines 27 through 31			
8	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.	
Net Assets or Fund Balances	29	Retained earnings, accumulated income, endowment, or other funds	1,795,466.	1,537,592.	
Š	30	Total net assets or fund balances	1,795,466.	1,537,592.	
	31	Total liabilities and net assets/fund balances	1,795,466.	1,537,592.	
P	art	Analysis of Changes in Net Assets or Fund B	alances		
1	Tota	I net assets or fund balances at beginning of year - Part II, column (a), line	30		
		st agree with end-of-year figure reported on prior year's return)		1	1,795,466.
2	Ente	r amount from Part I, line 27a		2	<257,874.>
3	Othe	r ıncreases not ıncluded in line 2 (ıtemize)		3	0.
4	Add	4	1,537,592.		
5	Decr	eases not included in line 2 (itemize)		5	0.
6	Total	net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30	6	1,537,592.

	orm 990-PF (2009) FOUN	LYNN AND ROBERT DATION (FOR JOHN	N DALSH	EIM)				20	0-606	6441	Page 3
Ľ	(a) List and describ	nd Losses for Tax on li e the kind(s) of property sold (e.g house; or common stock, 200 sh	g., real estate,	tincome	(b)	How a - Purd - Don	cquired chase	(c) Date a (mo., da	cquired	(d) Da (mo., d	
-	CHARLES SCHWAB				<u> </u>	- DOII		06/05		02/2	
_	CHARLES SCHWAB							Vario		Vari	
				-			-	<u> </u>	<u> </u>	7411	<u> </u>
	d										
_					1						
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale			•		ın or (loss (f) mınus		
-	44,365.	· · · · · · · · · · · · · · · · · · ·		50,00	0.					<5	,635.
_	460,262.			541,58						<81	,319.
_	C			<u> </u>							7
	d	-									
	9		<u> </u>								
	Complete only for assets showing	gain in column (h) and owned by	the foundation	on 12/31/69			//\	Gains (Co	ol. (h) gaın	minus	
	Complete only for access cheving	(j) Adjusted basis		ccess of col. (1)					ot less tha		
	(i) F.M.V. as of 12/31/69	as of 12/31/69		col. (j), if any				Losses (from col.	(h))	
_		45 61 127 617 65					_			. F	62E
		· · ·	 								<u>,635.</u>
_	b		<u> </u>							<8⊥	,319.
_	C	· · · · · · · · · · · · · · · · · · ·	-								
_	d										
_	eL_										
2	Capital gain net income or (net capit	al loss) { If gain, also entering the loss of the loss			}	2				<86	,954.
3	Net short-term capital gain or (loss)	as defined in sections 1222(5) a	ınd (6):								
Ŭ	If gain, also enter in Part I, line 8, co		(5).		JI						
	If (loss), enter -0- in Part I, line 8					3				<5	,635.
F	Part V Qualification Un	der Section 4940(e) for	r Reduced	Tax on Net	Inv	estr	nent Inc	ome			
(F	or optional use by domestic private for	oundations subject to the section	4940(a) tax or	net investment in	ncom	e.)					
•			. ,			,					
lf	section 4940(d)(2) applies, leave this	part blank.									
w	as the foundation liable for the sectio	n 4942 tax on the distributable ar	mount of any v	ear in the base nei	rınd?					Yes	X No
	"Yes," the foundation does not qualify		, ,							100	110
<u>"</u>	Enter the appropriate amount in each				es.						
÷				I I I I I I I I I I I I I I I I I I I				T		(d)	
	(a) Base period years Calendar year (or tax year beginning	(b) Adjusted qualifying dis	stributions	Net value of no	(c) Incha	ı rıtable	-use assets	1 ,	Distri	(d) oution ratio vided by col	(0))
_				1101 14140 01 110					coi. (b) ai		
_	2008		<u>19,278.</u>				0				00000
_	2007		<u>41,764.</u>				0				00000
_	2006		03,251.				0				00000
_	2005		<u>54,029.</u>	<u> </u>			3,979				72433
_	2004		<u>59,857.</u>			<u>98</u>	<u>5,492</u>	•		<u>.0</u>	<u>60738</u>
								1			
2	Total of line 1, column (d)							2		1	<u>33171</u>
3	Average distribution ratio for the 5-y	vear base period - divide the total	on line 2 by 5,	or by the number	of ye	ars					
	the foundation has been in existence	e if less than 5 years						3		.0	26634
		•									
4	Enter the net value of noncharitable-	use assets for 2009 from Part X	. line 5					4			
Ċ			, 0								
5	Multiply line 4 by line 3							5			0.
J	Muniply line 4 by line 3							13			<u> </u>
_	Fator 19/ of anti-months and an	/10/ of Dood Live - 0753						1 _ \			721
6	Enter 1% of net investment income	(1% OT PAIT I, line 2/b)						6			731.
7	Add lines 5 and 6							7			731.
										<u>.</u>	
8	Enter qualifying distributions from F	Part XII, line 4						8		243	<u>,980.</u>
	If line 8 is equal to or greater than lii See the Part VI instructions.	ne 7, check the box in Part VI, line	e 1b, and com	plete that part usin	ng a 1	% tax	rate.				

Form	n 990-PF (2009) FOUNDATION (FOR JOHN DALSHEIM)	_	20-	6066	441	ŗ	age 4
	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e),						
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 X and enter 1%		1			7	31.
	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-)		2				0.
3	Add lines 1 and 2		3				<u>31.</u>
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		4				0.
	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5				<u>31.</u>
	Credits/Payments:						
	a 2009 estimated tax payments and 2008 overpayment credited to 2009						
	Exempt foreign organizations - tax withheld at source 6b	00		 .			
	Tax paid with application for extension of time to file (Form 8868) 6c 1,0	00.					
	Backup withholding erroneously withheld Gd Takel gradity and asymptote Add large Co through Cd					1	n-n
	Total credits and payments. Add lines 6a through 6d		7 8			1,0	22.
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		9				44.
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		10			2	47.
	Enter the amount of line 10 to be: Credited to 2010 estimated tax	4	11				47.
	art VII-A Statements Regarding Activities	u P					- / •
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or inf	ervene	ın			Yes	No
	any political campaign?				1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definit	on)?			1b		X
-	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials pu	-	d or				
	distributed by the foundation in connection with the activities						
c	Did the foundation file Form 1120-POL for this year?				1c		X
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:						
	(1) On the foundation. ▶ \$ O . (2) On foundation managers. ▶ \$	_ 0 .					
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation	1					
	managers. ▶ \$ 0 .						
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?				2		<u> </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 incorpor	ation, c	ır				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes				3_		<u> </u>
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?				4a		<u>X</u>
	of "Yes," has it filed a tax return on Form 990-T for this year?		N	/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?				5		<u>x</u>
	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 Product language in the governing instrument, or						
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the second to th	ie siale	aw				X
7	remain in the governing instrument?				<u>6</u> 7	Х	
′	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV					Α_	
0.	a Enter the states to which the foundation reports or with which it is registered (see instructions) None						
υď	THOS are series to which the regulation reports of with which it is registered (see histauchions)						
h	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)						
J	of each state as required by General Instruction G? If "No," attach explanation				8ь	$ \mathbf{x} $	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5)	for cale	ndar		 -		
-	year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," complete Part XIV		•		9	1	X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	i			10		X

Form	THE LYNN AND ROBERT ZIMMER FAMILY 1990-PF (2009) FOUNDATION (FOR JOHN DALSHEIM) 20-606	<i>C</i>		Page 5
	art VII-A Statements Regarding Activities (continued)	0441		ugo o
			т -	
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		<u>X</u>
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before		.]	
	August 17, 2008?	12		<u>X</u>
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13		<u>X</u>
	Website address ► N/A			
14	The books are in care of ► JOSEPH B. SPRUNG, CPA'S Telephone no. ►			
	Located at ► 444 MADISON AVENUE, FLOOR 22, NEW YORK, NY ZIP+4 ►1	<u>0022</u>		_
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	<u>N</u>	<u>/A</u>	
Pa	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	_Eile.Form_4720.if.any.item.is.checked in the "Yes" column, unless an exception applies.	-	Yes	<u>_No_</u> _
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? Yes. X No.	_		
	(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?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X 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)?			
	(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.)			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)? N/A	1b		
	Organizations relying on a current notice regarding disaster assistance check here			
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			
	before the first day of the tax year beginning in 2009?	1c		Х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			
	defined in section 4942(j)(3) or 4942(j)(5)):			
a	At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning		İ	
	before 2009?	İ		
	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	1		
	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.)	2b		
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
		1		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time	1		
	during the year?			
b	If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or disqualified persons after	1		
	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.)	3ь		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		<u>x</u>
	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 jeonardy before the first day of the tax year beginning in 2009	ah.		Y

Form 990-PF (2009) FOUNDATION (FOR JOHN DALS	HEIM)		20-60664	41	Page 6
Part VII-B Statements Regarding Activities for Which I		Required (contir			
5a During the year did the foundation pay or incur any amount to:		-			
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	` ''		es 🗶 No		
(2) Influence the outcome of any specific public election (see section 4955); o	or to carry on, directly or indir				
any voter registration drive?			es 🔀 No		
(3) Provide a grant to an individual for travel, study, or other similar purposes		Y	es 🗶 No		
(4) Provide a grant to an organization other than a charitable, etc., organizatio	n described in section				
509(a)(1), (2), or (3), or section 4940(d)(2)?			es 🗶 No		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or				
the prevention of cruelty to children or animals?			es X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify uni		ın Regulations			
section 53.4945 or in a current notice regarding disaster assistance (see instru	•	•	N/A	5b	
Organizations relying on a current notice regarding disaster assistance check h	•				
c_lf_the_answer_is "Yes" to question 5a(4),.does_the_foundation.claim.exemption.fl					<u> </u>
expenditure responsibility for the grant?		I/A L Y	es L 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	pay premiums on	—			- 1
a personal benefit contract?		Ye	es X No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?			6b	X
If "Yes" to 6b, file Form 8870.	. h alta- tua- a- a- a- a 0	,	77 A		
7a At any time during the tax year, was the foundation a party to a prohibited tax s		Ye	es X No	76	
b If yes, did the foundation receive any proceeds or have any net income attribut Part VIII Information About Officers, Directors, Trust		nagore Highli		7b	
Part VIII Paid Employees, and Contractors	ees, i oundation wie	mayers, riigin	y		
1 List all officers, directors, trustees, foundation managers and their	compensation.				
	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e)	Expense unt, other
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	and deferred compensation	acco allo	unt, other owances
		<u> </u>			
		<u> </u>			
2 Compensation of five highest-paid employees (other than those inc		enter "NONE."	(d) 0		
(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	acco	Expense unt, other
NONE	devoted to position	-	compensation	alic	owances
NONE					
		-			
		 		 	
				<u> </u>	
Total number of other employees paid over \$50,000	<u> </u>	.1		1 _	0

. THE LYNN AND ROBERT ZIMMER FAMILY	***	
Form 990-PF (2009) FOUNDATION (FOR JOHN DALSHEIM)		6066441 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	Managers, Hignly	
3 Five highest-paid independent contractors for professional services. If none, enter "NC	NE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
		
Total number of others receiving over \$50,000 for professional services		▶ 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical in		Expenses
number of organizations and other beneficiaries served, conferences convened, research papers produced,	etc.	Expelises
1N/A		
2		
3		
-		
4		
ID ANY DISCOURT		L
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines	1 and 2	Amount
1 N/A	i aliu z.	Amount
	···	
2		
All other program-related investments. See instructions.		
3		
	- · · ·	
Total. Add lines 1 through 3	<u> </u>	0.

For	m 990-PF (2009) FOUNDATION (FOR JOHN DALSHEIM)	20	-6066441 Page 8
P	art X Minimum Investment Return (All domestic foundations must complete this part Foreign foundations	ndations	s, see 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	0.
b	Average of monthly cash balances	1b	
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	0.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	0.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	
5_	_Net.value_of.noncharitable=use.assetsSubtract 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.
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.)	ıd ₋ certaın	<u></u>
1	Minimum investment return from Part X, line 6	1	0.
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	731.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	0.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	0.
6	Deduction from distributable amount (see instructions)	6	0.
<u>7</u>	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	0.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		0.40.000
	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	243,980.
	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:		
	Suitability test (prior IRS approval required)	3a	
	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	243,980.
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	731.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	243,249.
	Note The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	qualifies f	or the section

Form **990-PF** (2009)

4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI,		· · · · · · · · · · · · · · · · · ·		
line 7				0.
2 Undistributed income, if any, as of the end of 2009				
a Enter amount for 2008 only			0.	
ь Total for prior years:				
, , .		0.		
3 Excess distributions carryover, if any, to 2009:				
a From 2004 11,168.				
b From 2005 20,812.				
c From 2006 103,900.				
d From 2007 142,529.				
e From 2008 150,077.				
f Total of lines 3a through e	428,486.	-		
4 Qualifying distributions for 2009 from				
Part XII, line 4: ►\$ 243,980.				
a Applied to 2008, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2009 distributable amount				0.
e Remaining amount distributed out of corpus	243,980.			
5 Excess distributions carryover applied to 2009	0.			0.
(If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	672,466.			
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		<u>U.</u>		<u> </u>
amount - see instructions		0.		
e Undistributed income for 2008. Subtract line		0.		
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				
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	11,168.			
9 Excess distributions carryover to 2010.				
Subtract lines 7 and 8 from line 6a	661,298.			
10 Analysis of line 9:				
a Excess from 2005 20,812.				
b Excess from 2006 103, 900.		}		
c Excess from 2007 142,529.				
d Excess from 2008 150,077.				
e Excess from 2009 243, 980.				

	N AND ROBER		MILY	20-60	66 441 Page 10
Part XIV Private Operating F	oundations (see ins	structions and Part VII	-A, question 9)	N/A	OO441 Tage to
1 a If the foundation has received a ruling of	· · · · · · · · · · · · · · · · · · ·			21/22	
foundation, and the ruling is effective fo					
b Check box to indicate whether the found	d <u>ation is a private operatin</u>	g foundation described i	n section	4942(j)(3) or 49	42(_J)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total
investment return from Part X for	ļ				
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					
3 Complete 3a, b, or c for the					
alternative test relied upon: a "Assets" alternative test - enter:					
(1) Value of all assets					
(2) Value of assets qualifying					
under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter 2/3 of minimum investment return					
shown in Part X, line 6 for each year					
listed					
c "Support" alternative test - enter:					
(1) Total support other than gross investment income (interest,					
dividends, rents, payments on					
securities loans (section					
512(a)(5)), or royalties) (2) Support from general public					
and 5 or more exempt					
organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from	<u>-</u>	<u> </u>			
an exempt organization					
(4) Gross investment income					
Part XV Supplementary Info			if the foundation	had \$5,000 or mo	re in assets
at any time during t	the year-see the i	nstructions.)			
1 Information Regarding Foundation	=				
a List any managers of the foundation wh year (but only if they have contributed r			ributions received by the	foundation before the clos	e of any tax
	1101e tilali \$5,000). (See Se	schon 507(u)(2).)			
None	o own 10% or more of the	a stack of a corneration (or an aqually large ports	on of the ownership of a po	artaarahin ar
b List any managers of the foundation when other entity) of which the foundation has	s a 10% or greater interes	e stock of a corporation (L	or an equally large portion	on or the ownership of a pa	rmership or
None	·				
2 Information Regarding Contribut	ion, Grant, Gift, Loan.	Scholarship, etc., Pre	ograms:		•
	only makes contributions t			ot accept unsolicited regu	ests for funds. If
the foundation makes gifts, grants, etc.					
a The name, address, and telephone num	ber of the person to whon	n applications should be	addressed:		
Robert Zimmer					
75 Byram Shore Road,					
b The form in which applications should t		-			
Letter request with	description	or use of	runa		
c Any submission deadlines: None					
d Any restrictions or limitations on award	s, such as by geographica	l areas, charitable fields.	kınds of institutions, or o	other factors:	
None	,				

923601 02-02-10

FOUNDATION (FOR JOHN DALSHEIM) 20-6066441 Page 11 Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to any foundation manager or substantial contributor Recipient Purpose of grant or contribution Foundation Amount status of recipient Name and address (home or business) a Paid during the year See Statement 3 243,980. Total **▶** 3a **b** Approved for future payment None Total **▶** 3b 0.

THE LYNN AND ROBERT ZIMMER FAMILY

THE LYNN AND ROBERT ZIMMER FAMILY FOUNDATION (FOR JOHN DALSHEIM)

20-6066441 Page 12

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

Enter gross amounts unless otherwise indicated.	Unrelate	Unrelated business income		ded by section 512, 513, or 514	(e)	
·	(a) Business	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income	
1 Program service revenue:	code		Code			
a	- 					
b	- 		\vdash	-		
<u> </u>			-			
d	1					
e	- 					
1	- }- 		-	-		
g Fees and contracts from government agencies						
2_Membership_dues and assessments			-			
3 Interest on savings and temporary cash						
investments_		·	ļ			
4 Dividends and interest from securities					73,060.	
5 Net rental income or (loss) from real estate:	<u> </u>					
a Debt-financed property					<u></u>	
b Not debt-financed property						
6 Net rental income or (loss) from personal						
property		<u></u>				
7 Other investment income						
8 Gain or (loss) from sales of assets other						
than inventory	<u> </u>				<86 <u>,9</u> 54.	
9 Net income or (loss) from special events						
10 Gross profit or (loss) from sales of inventory		<u></u> -				
11 Other revenue:						
a						
b						
C	i I					
d						
е	_					
12 Subtotal. Add columns (b), (d), and (e)		0.		0.	<13,894.	
13 Total. Add line 12, columns (b), (d), and (e)				13	<13,894.	
(See worksheet in line 13 instructions to verify calculations.	1				120 / 00 21	
Part XVI-B Relationship of Activities	<u> </u>	omplishment of E	kemp	t Purposes		
· ·					nlighment of	
Explain below how each activity for which in the foundation's exempt purposes (other th	an by providing fu	nds for such purposes).	A COITH IL	rated importantly to the accom	pusument or	
	···					
						
						
						
		··				

I .						

THE LYNN AND ROBERT ZIMMER FAMILY Form 990-PF (2009) FOUNDATION (FOR JOHN DALSHEIM) 20-6066441 Page 13 Information Regarding Transfers To and Transactions and Relationships With Noncharitable Part XVII **Exempt Organizations** Yes No Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? a Transfers from the reporting foundation to a noncharitable exempt organization of: (1) Cash 1a(1) Х (2) Other assets 1a(2) **b** Other transactions: (1) Sales of assets to a noncharitable exempt organization 1b(1) (2) Purchases of assets from a noncharitable exempt organization (3) Rental of facilities, equipment, or other assets X 1b(3) (4) Reimbursement arrangements 1b(4) (5) Loans or loan quarantees 1b(5) X (6) Performance of services or membership or fundraising solicitations 1b(6) c_Sharing of facilities, equipment, mailing lists, other assets, or paid employees. d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements N/A 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described X No in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes b If "Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A

Under penalties of a re that I have examined this return, including accompanying schedules and statements, and to e best of my knowledge and belief, it is true, correct, and complete De or fiduciary) is based on all information of which preparer has any l Signature of officer or trustee Date Check if self10/28/10 employed
X Preparer's identifying numbe Preparer's signature Sprung, Joseph B. EIN ▶ Firm's name (or yours 444 Madison Avenue, 22nd FL if self-employed) address, and ZIP code New York, NY 10022 212-935-1555 Phone no. Form 990-PF (2009)

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

2009

Name of the organization

THE LYNN AND ROBERT ZIMMER FAMILY FOUNDATION (FOR JOHN DALSHEIM)

Employer identification number

20-6066441 Organization type (check one): Filers of: Section: Form 990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation _527_political_organization_ X 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. **Special Rules** For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1 Complete Parts I and II For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals Complete Parts I, II, and III. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively

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

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

religious, chantable, etc., contributions of \$5,000 or more during the year.

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

Schedule B	(Form 990,	990-EZ, 6	or 990-PF) (2009)

Page

1 of 1 of Part I

Name of organization

THE LYNN AND ROBERT ZIMMER FAMILY FOUNDATION (FOR JOHN DALSHEIM)

Employer identification number 20-6066441

Part I Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1		\$	Person X Payroll
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
2	ROBERT & LYNN ZIMMER	Nggi ogato coma ibationio	Person
	75 BYRAM SHORE ROAD BYRAM CONNECTICUT	\$	Payroll Noncash X (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$ 	Person Payroll Oncash Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)

Schedule	Þ	(Form	990	990-F7	or	990-PF	(2009	١
Scriedule	u	(1 Otto	000,	880-LZ,	9	880-11	1/2008	,

1 of 1 of Part II

Name of organization

Employer identification number

THE LYNN AND ROBERT ZIMMER FAMILY FOUNDATION(FOR JOHN DALSHEIM)

20-6066441

Part II Noncash Property (see instructions)

'arτ II	Noncash Property (see instructions)		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
2	MENS WAREHOUSE STOCK		
		\$	
(a) No. rom art I	(b) Description of noncash property given	FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. om art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_		\$	
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_		\$	
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
a) lo. om art l	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_			
53 02-01-		\$Sebadula B (Form 6	990, 990-EZ, or 990-PF) (2

THE LYNN AND ROBERT ZIMMER FAMILY FOUNDA 20-6066441				
Form 990-PF Dividends and	l Interest from	Securities	Statement 1	
Source	Gross Amount	Capital Gains Dividends	Column (A) Amount	
CHARLES SCHWAB & CO CHARLES SCHWAB & CO	14,410. 58,650.	0.	14,410. 58,650.	
Total to Fm 990-PF, Part I, ln 4	73,060.	0.	73,060.	

THE LYNN AND ROBERT ZIMMER FAMILY FOU	NDA 20-6066441
Form 990-PF Corpora	te Stock Statement 2
Description	Fair Market Book Value Value
	1,795,466. 1,855,200.
Total to Form 990-PF, Part II, line 10b	1,795,466. 1,855,200.

	ants and Contributions Paid During the Year			
Recipient Name and Address	Recipient Relationship and Purpose of Grant		Amount	
ALS ASSOCIATION	CHARITABLE	ORG	500.	
AMERICAN DIABETES ASSOCIATION	N CHARITABLE	ORG	250.	
AMERICAN INSTITUTE CANCER	CHARITABLE	ORG	100.	
AMERICAN JEWISH COMMITTEE	CHARITABLE	ORG	40,000.	
ANTI-DEFAMATION LEAGUE	CHARITABLE	ORG	500.	
ASPCA	CHARITABLE	ORG	350.	
BARBARA SINATRA CHILDRENS CEI	NTER CHARITABLE	ORG	2,000.	
BETTY FORD CENTER	CHARITABLE	ORG	15,000.	

THE LYNN AND ROBERT ZIMMER FAMI	LY FOUNDA	-	20-6066441
BIG BROTHERS & BIG SISTERS	CHARITABLE	ORG	450.
BOT SCOUTS OF AMERICA	CHARITABLE	ORG	600.
CANCER RESEARCH INSTITUTE	CHARITABLE	ORG	5,000.
CITY HARVEST	CHARITABLE	ORG	500.
CLEVELAND ANIMAL PROTECTIVE LEAGUE	CHARITABLE	ORG	200.
COLLEGE OF THE DESERT FOUNDATION	CHARITABLE	ORG	1,000.
CONNECTICUT FOOD BANK	CHARITABLE	ORG	200.
COVENANT HOUSE	CHARITABLE	ORG	100.
CROHNS & COLITIS FOUNDATION	CHARITABLE	ORG	3,500.
DAMON RUNYON CANCER FUND	CHARITABLE	ORG	500.

THE LYNN AND ROBERT ZIMMER FAM	ILY FOUNDA		20-6066441
GREENWICH BOY SCOUTS OF AMERICA	CHARITABLE	ORG	250.
GREENWICH HOSPITAL	CHARITABLE	ORG	5,000.
GUIDE DOGS OF THE DESERT	CHARITABLE	ORG	10,000.
GILDAS CLUB DESERT CITIES	CHARITABLE	ORG	200.
GREENWICH AMERICAN RED CROSS	CHARITABLE	ORG	250.
GREENWICH LAND TRUST	CHARITABLE	ORG	150.
GUIDING EYES FOR BLIND	CHARITABLE	ORG	300.
HARRISON PUBLIC LIBRARY	CHARITABLE	ORG	100.
JACOBS PILLOW DANCE	CHARITABLE	ORG	250.
JEWISH FEDERATION PALM SPRINGS	CHARITABLE	ORG	15,000.

THE LYNN AND ROBERT ZIMMER FAM	ILY FOUNDA		20-6066441
JEWISH GUILD FOR THE BLIND	CHARITABLE	ORG	1,000.
LET THERE BE LIGHT INC.	CHARITABLE	ORG	250.
LYMPHOMA RESEARCH FOUNDATION	CHARITABLE	ORG	2,500.
MAKE A WISH FOUNDATION	CHARITABLE	ORG	250.
MARCH OF DIMES	CHARITABLE	ORG	125.
MEALS ON WHEELS, GREENWICH	CHARITABLE	ORG	250.
METROPOLIS CC FOUNDATION	CHARITABLE	ORG	500.
NATIONAL FOUNDATION CANCER RESEARCH	CHARITABLE	ORG	100.
NATIONAL MULTIPLE SCLEROSIS	CHARITABLE	ORG	100.
NYC BALLET	CHARITABLE	ORG	25,000.

THE LYNN AND ROBERT ZIMMER	FAMILY FOUNDA	-	20-6066441
NYU LANGONE MEDICAL CENTER	CHARITABLE	ORG	500.
PALM SPRINGS ART MUSEUM	CHARITABLE	ORG	14,500.
PALM SPRINGS CHARITIES FOUNDATION	CHARITABLE	ORG	10,000.
PEAR TREE POINT SCHOOL	CHARITABLE	ORG	10,000.
PEDIATRIC CANCER FOUNDATION	CHARITABLE	ORG	1,000.
SCHOOL OF AMERICAN BALLET	CHARITABLE	ORG	5,000.
STUDENT SPONSOR PARTNERS	CHARITABLE	ORG	6,355.
TAMARISK U.J.C. GOLF	CHARITABLE	ORG	1,000.
TEMPLE EMANU-EL WESTCHESTER	CHARITABLE	ORG	3,500.
THE SALVATION ARMY	CHARITABLE	ORG	200.

THE LYNN AND ROBERT ZIMMER H	FAMILY_FOUNDA		20-6066441
THE FUND FOR PARK AVENUE	CHARITABLE	ORG	1,000.
THE HUMANE SOCIETY NY	CHARITABLE	ORG	250.
THE MCCALLUM THEATER	CHARITABLE	ORG	11,000.
THE DOE FUND	CHARITABLE	ORG	1,000.
TOOLS FOR TOMORROW	CHARITABLE	ORG	200.
UJA FEDERATION	CHARITABLE	ORG	15,500.
USA OLYMPIC TEAM	CHARITABLE	ORG	200.
WESTPORT COUNTRY PLAYHOUSE	CHARITABLE	ORG	20,000.
WHITEPLAINS MEDICAL CENTER	CHARITABLE	ORG	10,000.
THE BOWERY MISSION	CHARITABLE	ORG	450.
Total to Form 990-PF, Part XV,	line 3a		243,980.

Form 886	8 (Rev. 4-2009)		Page 2
Note. Or	are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this bo ily complete Part II if you have already been granted an automatic 3-month extension on a previously filed are filing for an Automatic 3-Month Extension, complete only Part I (on page 1).		▶ X
Part II		pies n	eeded)
Type or print	Name of Exempt Organization THE LYNN AND ROBERT ZIMMER FAMILY FOUNDATION (FOR JOHN DALSHEIM)	Empl	oyer identification number $0-6066441$
File by the extended due date for filing the return See instructions	City, town or post office, state, and ZIP code For a foreign address, see instructions.	For IF	RS use only
-E-Foi	rpe of return to be filed (File a separate application for each return): rm 990-	-	orm 5227 Form 8870 orm 6069
STOP! D	o not complete Part II if you were not already granted an automatic 3-month extension on a previous	sly file	d Form 8868.—————
Teleph If the If this box ▶ 4 I re 5 For 6 If the 7 Sta	JOSEPH B. SPRUNG, CPA'S cooks are in the care of 444 MADISON AVENUE, FLOOR 22 - NEW YORK from No FAX No. corganization 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) . If this If it is for part of the group, check this box quest an additional 3-month extension of time until realendar year 2009, or other tax year beginning , and ending instax year is for less than 12 months, check reason: initial return final return Statement 4	s is for	the whole group, check this
noi b if ti	nis application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any interfundable credits. See instructions nis application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated	8a	s 0.
pre	payments made. Include any prior year overpayment allowed as a credit and any amount paid eviously with Form 8868.	8b	\$ 0.
	lance Due. Subtract line 8b from line 8a Include your payment with this form, or, if required, deposit h FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions	8c	\$ 0.
	Signature and Verification		
it is true, c	alties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the orrect, and complete, and that I am authorized to prepare this form.		
<u>Signature</u>	Title	Date	<u> </u>

Form 8868 (Rev. 4-2009)

THE LYNN AND	ROBERT ZIMMER FAMILY FOUNDA	20-60664	41 —
Form 8688	Explanation for Extension	Statement	4

Explanation

TAXPAYER IS AWAITING THIRD PARTY INFORMATION TO FILE A COMPLETE AND ACCURATE RETURN. ADDITIONALLY THIS IS ONE OF 300 RETURNS THAT PREPARER MUST COMPLETE.

-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

• If you			
a If you	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)	▶ 🗓
•	complete Part II unless you have already been granted an automatic 3-month extension on a previously fil	-	
Part l	Automatic 3-Month Extension of Time. Only submit original (no copies needed).		
A corpo	ration required to file Form 990-T and requesting an automatic 6-month extension - check this box and com	plete	
Part I or	nly		- > -
	r corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an come tax returns.	exten	sion of time
Electro	nic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extensio	n of ti	me to file one of the returns
noted b	elow (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electroni omatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or coi	cally if	(1) you want the additional
you mus	ornatic) 3-month extension of (2) you life Forms 990-BL, 0009, or 0070, group returns, or a composite of const st_submit_the_fully_completed and signed page 2.(Part.II) of Form 8868. For more details on the electronic fill .gov/efile and click on e-file for Chanties & Nonprofits.		
Type or		Emp	loyer identification number
print	THE LYNN AND ROBERT ZIMMER FAMILY	-	•
	FOUNDATION(FOR JOHN DALSHEIM)	2	0-6066441
File by the due date for	or Number, street, and room or suite no. If a P.O. box, see instructions.		
filing your return See	75 BYRAM SHORE ROAD		<u> </u>
instruction			
Check 1	type of return to be filed (file a separate application for each return)		
☐ Fr	orm 990 Form 990-T (corporation) Form 47	20	
Fr	orm 990-BL Form 990-T (sec. 401(a) or 408(a) trust) Form 52	27	
F(orm 990-EZ Form 990-T (trust other than above) Form 60	69	
X F	orm 990-PF	70	
	JOSEPH B. SPRUNG, CPA'S cooks are in the care of 444 MADISON AVENUE, FLOOR 22 - NEW YORK chone No. FAX No. FAX No.	, N	Y 10022
If the	organization does not have an office or place of business in the United States, check this box	•••	▶ ∟
If theIf this	organization 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 is the content of the group.		
• If the box • If this sox • I	s 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 automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unto August 15, 2010, to file the exempt organization return for the organization named a for the organization's return for: X calendar year 2009 or	memb 	ers the extension will cover.
• If the box • If this sox • I	s 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 automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time untagust 15, 2010, to file the exempt organization return for the organization named a for the organization's return for:	memb 	ers the extension will cover.
If the lf this box	s 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 automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unto August 15, 2010, to file the exempt organization return for the organization named a for the organization's return for: X calendar year 2009 or	memb	ers the extension will cover.
If the If this box I I I I I I I I I I I I I I I I I I I	s is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this If it is for part of the group, check this box ▶ and attach a list with the names and EINs of all equest an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unt August 15, 2010, to file the exempt organization return for the organization named a for the organization's return for: X calendar year 2009 or tax year beginning, and ending this tax year is for less than 12 months, check reason: Initial return Final return this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any	memb	ers the extension will cover. The extension Change in accounting period
If the If this box I I I I I I I I I I I I I I I I I I I	s is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this If it is for part of the group, check this box ▶ and attach a list with the names and EINs of all equest an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unt August 15, 2010, to file the exempt organization return for the organization named a for the organization's return for:	memb	ers the extension will cover. The extension
If the If this box I I I I I I I I I I I I I I I I I I I	s is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this If this If it is for part of the group, check this box ▶ and attach a list with the names and EINs of all equest an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unt August If this equest an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unt August If this equest an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unt August If this equest an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unt August If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any correfundable credits. See instructions. This application is for Form 990-PF or 990-T, enter any refundable credits and estimated	memb	The extension Change in accounting period \$ 1,000
If the of this box the state of	s is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this If	memb	ers the extension will cover. The extension Change in accounting period
If the lifthis box 1	s is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this If	memb	The extension Change in accounting period \$ 1,000
• If the • If this box • 1 Ir Is 2 If 3a If b If c Ba do	s is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this If	memb	The extension Change in accounting period \$ 1,000

Form 8868 (Rev. 4-2009)			Page -2		
If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this both the second			<u> </u>		
Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed		B868			
If you are filing for an Automatic 3-Month Extension, complete only Part I (on page 1).					
Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no co	opies r	eeded)			
Name of Exempt Organization	Empl	oyer identification	n number		
THE LYNN AND ROBERT ZIMMER FAMILY					
FOUNDATION (FOR JOHN DALSHEIM)	20-6066441				
File by the extended Number, street, and room or suite no. If a P O. box, see instructions.	For IF	RS use only			
due date for 75 BYRAM SHORE ROAD					
return See City, town or post office, state, and ZIP code. For a foreign address, see instructions.					
GREENWICH, CT 06830					
Check type of return to be filed (File a separate application for each return):					
Form 990 Form 990-EZ Form 990-T (sec. 401(a) or 408(a) trust) Form 1041-A	Fo	m 5227	Form 8870		
Form 990-BL X Form 990-PF Form 990-T (trust other than above) Form 4720	Fc	rm 6069			
STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previous	sly-file	d Form 8868.			
JOSEPH B. SPRUNG, CPA'S		v 10000			
• The books are in the care of ▶ 444 MADISON AVENUE, FLOOR 22 - NEW YORK	., <u>N</u>	1 10022			
Telephone No. ► FAX No. ►	-				
If the organization does not have an office or place of business in the United States, check this box If the organization does not have an office or place of business in the United States, check this box If the organization does not have an office or place of business in the United States, check this box	.a.a.fa	the whole group	abook this		
• If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this box ▶ and attach a list with the names and EINs of all					
4 I request an additional 3-month extension of time until November 15, 2010.	пень	ers trie exterision	15 101		
5 For calendar year 2009, or other tax year beginning, and ending_					
	$\overline{\Box}$	Change in accoun	ting period		
7 State in detail why you need the extension					
See Statement 2					
bee beacement 2	-				
8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any					
nonrefundable credits. See instructions	8a	\$	0.		
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated	-				
tax payments made. Include any prior year overpayment allowed as a credit and any amount paid					
previously with Form 8868.	8b	\$	0.		
c Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit					
with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	8c	\$	0.		
Signature and Verification					
Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the	best of	my knowledge and	gelief,		
Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the it is true, correct and completes and that I am authorized to prepare this form.		10/08/	10		
Signature Signature Title	Date	√ (0/28/			
		Form 8868 ((Rev. 4-2009)		

THE LYNN AND ROBERT ZIMMER FAMILY FOUNDA		20-6066441		
Form 8688	Explanation for Extension	Statement	2	
Explanation				

TAXPAYER IS AWAITING THIRD PARTY INFORMATION TO FILE A COMPLETE AND ACCURATE RETURN. ADDITIONALLY THIS IS ONE OF 300 RETURNS THAT PREPARER MUST COMPLETE.