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### 990-PF

**Return of Private Foundation** 

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

2009

OMB No 1545-0052

Qepartment of the Treasury Internal Revenue Service

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

Fo	r cale	endar year 2009, or tax	year beginning	, and ending					
G	Chec	k all that apply	Initial return	Initial return of a for	mer public chai	ity	☐ Final re	eturn	
		,	Amended return	Address change	· —	-	change		
	se the	RS Name of foundation		<u> </u>		-	Employer identification n	umber	
•	labe		and Caryl H Susman Four	ndation		l''	20-8068		
C	therv	vico	or PO box number if mail is not d		Room/suite	R	Telephone number (see pa		ctions)
	prin	t c/o Foundation S	Source, 501 Silverside Roa	,				_	00707
	or typ	, e.		<u>u</u>	1 123	┢	If exemption application is p		
	ee Spe	tions. Wilmington		DE	19809-1377	ı	Foreign organizations, ch	-	
	Cher	ck type of organization:	X Section 501(c)(3) exe		n	יין	Foreign organizations, cn     Foreign organizations me		, <b>-</b> _
Ī	Sect	tion 4947(a)(1) nonexer	npt charitable trust	Other taxable private	foundation		check here and attach co		" ▶□
	Fair	market value of all asse	ts at end J Accounting i	method. X Cash	Accrual	E	If private foundation status v		<u> </u>
·		ar (from Part II, col (c),			i Accidai	F	under section 507(b)(1)(A), of the foundation is in a 60-m		<b>-</b> L
	line 1	16) ▶ \$	812,376 (Part I, column (	d) must be on cash bas	is)		under section 507(b)(1)(B),		▶ 🔲
Pa	rt I	Analysis of Revenue	and Expenses (The total of	(a) Revenue and				(d) Disburser	ments
		amounts in columns (b), (c), a	and (d) may not necessarily equal		(b) Net investm	ent	1 ''	for charital	
		the amounts in column (a) (se	ee page 11 of the instructions) )	books	income		incomé	purposes (cash basis o	
	1	Contributions, gifts, grants, et	tc, received (attach schedule)	138,714					
	2	Check ▶ if the foundation	n is not required to attach Sch B						
	3	Interest on savings and to	emporary cash investments	132		13	32		
	4	Dividends and interest fro	om securities .	7,291	7	,29	91		
	5 a	Gross rents							
<u>a</u>		Net rental income or (loss	· ———						
Ĕ	_	Net gain or (loss) from sa		-188,560					
Revenue		Gross sales price for all asse					4.4		
~	7	Capital gain net income (			61	,21	11		
	8 9	Net short-term capital gai	n						
	_	Income modifications  Gross sales less returns and	CELLED						
		_ [						<del></del>	<del></del>
	C	Less Cost of go <del>ods sold</del> Gross profit or (loss) (atta Other income (attach sen	ich schedule) 40						
	11	Other income (attach sen	Panie) @ 5010	5,010					1
	12	Total. Add lines throug		-37,413	68	3,63	34		
	13	Compensation of officers	adirections trustees, etc.	0.,		,,,,,,			<del></del>
Expenses	14	Other employee salaries						·	
ē	15	Pension plans, employee							
×	16 a	Legal fees (attach schedu	ıle)						
Ve	b	Accounting fees (attach s	chedule)						
		Other professional fees (a	attach schedule)						
tra	17	Interest					_		
ij	18	Taxes (attach schedule) (see p	· -					ļ	
Administrat	19	Depreciation (attach sche	equie) and depletion				<del>  -</del>	<del></del>	
Ad	20 21	Occupancy Travel, conferences, and				_			
و	22	Printing and publications	meetings	<del></del>				· -	
and	23	Other expenses (attach s	chedule)	6,618		_	<del> </del>	<del> </del>	6,618
ū	24	Total operating and adn		3,310			<u> </u>	-	2,3.3
rati	i	Add lines 13 through 23		6,618			o		6,618
Operating	25	Contributions, gifts, grant	s paid .	13,550					13,550
ō	26		sements. Add lines 24 and 25	20,168			0		20,168
_	27	Subtract line 26 from line		20,100	<del></del>				
		Excess of revenue over exp		-57,581					'
	b	Net investment income	(if negative, enter -0-)		68	,63	34		
	С	Adjusted net income (if	negative, enter -0-) .					-	

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3 Other increases not included in line 2 (itemize)

5 Decreases not included in line 2 (itemize) ▶

6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30

4 Add lines 1, 2, and 3

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3

(a) List and describe the	Losses for Tax on Inve- kind(s) of property sold (e.g., real esta e, or common stock, 200 shs MLC Co	ate,	nt Incor	ne (b) How acquired P—Purchase D—Donation		Date acquired no , day, yr )	(d) Date sold (mo , day, yr )	
1a Publicly-traded Securities				P	Vario	us	Various	
b						<del></del>		
С			•					
_d								
<u>e</u>							_	
(e) Gross sales price			r other basis ense of sale		(h) Gain or (loss) (e) plus (f) minus (g)			
a 531,042			469,831	ļ		61,211		
<u>b</u>	·				<u> </u>			
<u>c</u> d					-		· -	
e				· · · ·				
<del></del>	ng gain in column (h) and owned	by the	e foundation	on on 12/31/69	<u> </u>	(I) Gaine (Ce	ol (h) gain minus	
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		(k) Exces	ss of col (i) (j), if any		col (k), but no	of (ii) gail fillings of less than -0-) or from col (h))	
a								
b								
C								
d	<del>-</del>							
Capital gain net income or (r	net capital loss) { If gain, al				2		61,211	
3 Net short-term capital gain of If gain, also enter in Part I, light instructions). If (loss), enter-	r (loss) as defined in sections ne 8, column (c) (see pages	s 1222	2(5) and (	6)	3		- 1,2 :	
Part V Qualification Under		duce	d Tay o	n Not Investme	_	.como		
(For optional use by domestic pill section 4940(d)(2) applies, lea Was the foundation liable for the If "Yes," the foundation does not a Enter the appropriate amounts.	ve this part blank section 4942 tax on the dist	ributa e) Do	ble amou	nt of any year in blete this part.	the ba	ase period?	Yes X No	
(a)	1	1	oo pago				(d)	
Base period years	(b) Adjusted qualifying distribution	ns	Net value o	(c) of nonchantable-use a	ssets	stribution ratio		
Calendar year (or tax year beginning in 2008	1	,772	·	<del></del>	1,628	(col (b)	divided by col (c)) 0 166134	
2007		,982	•		1,822		0.080071	
2006		0			1,633		0.000000	
2005					,		0 000000	
2004							0 000000	
2 Total of line 1, column (d)						2	0 246205	
3 Average distribution ratio for the number of years the four	the 5-year base period—divindation has been in existence				′    -	3	0.082068	
4 Enter the net value of nonch	aritable-use assets for 2009	from F	Part X, lın	e5	-	4	585,735	
5 Multiply line 4 by line 3						5	48,070	
6 Enter 1% of net investment i	ncome (1% of Part I, line 27b	o)	•		.	6 686		
<b>7</b> Add lines 5 and 6					.	7	48,756	
8 Enter qualifying distributions If line 8 is equal to or greater the Part VI instructions on pa	than line 7, check the box in			b, and complete	that p	8 art using a 1	20,168 % tax rate See	

P	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18	of the i	nstr	uctio	ons)				
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 instructions)								
	b Domestic foundations that meet the section 4940(e) requirements in Part V, check		1	,373					
	here 🕨 🗌 and enter 1% of Part I, line 27b								
	c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4%								
	of Part I, line 12, col (b)								
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			0					
3	<del>  -</del>		1,373						
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	1 272							
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-			<u>,373</u>	<del></del>				
6	Credits/Payments				Ιi				
	a 2009 estimated tax payments and 2008 overpayment credited to 2009  b Exempt foreign organizations—tax withheld at source  6b								
	c Tax paid with application for extension of time to file (Form 8868)  d Backup withholding erroneously withheld  6c  6d								
7	Total credits and payments Add lines 6a through 6d		2	,100	}				
8	Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached			<u>, 100</u> 0					
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			0	$\vdash$				
10	, , , , , , , , , , , , , , , , , , , ,			727					
	Enter the amount of line 10 to be Credited to 2010 estimated tax   727 Refunded   11			<u>· - ·</u>					
Pa	art VII-A Statements Regarding Activities	ŀ							
	a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it			Yes	No				
٠	participate or intervene in any political campaign?	<del> </del>	1a		X				
	b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 of the				<del>- ``</del>				
	instructions for definition)?	.	1b		x				
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials								
	published or distributed by the foundation in connection with the activities								
	c Did the foundation file Form 1120-POL for this year?								
	d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year	ľ							
	(1) On the foundation   \$ (2) On foundation managers   \$								
	e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed	ł							
_	on foundation managers   \$	1	<u>_</u> -						
2		⊢	2		X				
3	If "Yes," attach a detailed description of the activities  Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles				1 1				
J	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	-	3		$\mathbf{x}$				
4	a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		X				
Ī	b If "Yes," has it filed a tax return on Form 990-T for this year?	_	4b	N/A					
5			5		Х				
	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				ļ				
	<ul> <li>By state legislation that effectively amends the governing instrument so that no mandatory directions</li> </ul>				,				
_	that conflict with the state law remain in the governing instrument?	<u> </u>	<u>6</u>	X	<del> </del> -				
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part	<i>×</i> ν ⊢	7	Х	<del> </del> -				
8	a Enter the states to which the foundation reports or with which it is registered (see page 19 of the	·							
	instructions) ▶ DE  b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney				1				
	General (or designate) of each state as required by General Instruction G? If "No," attach explanation		вь	Х					
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3)	F							
•	or 4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV on page 27)?	- 1							
	If "Yes," complete Part XIV		9		<u>x</u>				
10	•	Γ							
	their names and addresses	<u>.   ·</u>	10		X				
			000	חר	(2000)				

Form	990-PF (2009) The Bernard M and Caryl H. Susman Foundation 20-806	8788	Р	age 5				
_	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 page 20 of the instructions)	11		х				
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before							
	August 17, 2008?	12		_X				
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X					
	Website address							
14	The books are in care of Foundation Source Telephone no	(800	1839	1/54				
45	Located at ► 501 Silverside Road, Suite 123, Wilmington, DE ZIP+4 ► 19809-1377 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here							
15	and enter the amount of tax-exempt interest received or accrued during the year							
Da	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required							
ı a	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No				
1a	During the year did the foundation (either directly or indirectly)		103	-110				
·u	(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?							
	(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?							
	(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"							
	ıf 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		 NI/A	J				
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)?  Organizations relying on a current notice regarding disaster assistance check here	1b	N/A					
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts,	l i						
	that were not corrected before the first day of the tax year beginning in 2009?	1c		_ X				
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private							
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))							
а	At the end of tax year 2009, did the foundation have any undistributed income (lines 6d							
	and 6e, Part XIII) for tax year(s) beginning before 2009?							
b	If "Yes," list the years 20, 20, 20, 20 Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2)							
b	(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 page 20 of the instructions )	2b	N/A					
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here							
	<b>▶</b> 20 , 20 , 20							
3a	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							
b	If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation							
	or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3)							
	the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine							
	if the foundation had excess business holdings in 2009 )	3b	N/A					
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		Х				
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its chantable							
	nurrose that had not been removed from leggardy before the first day of the tax year beginning in 2009?	4b		X				

Form **990-PF** (2009)

Forn	1990-PF (2009) The Bernard M. and Caryl H	Sus	man Foundation					20-806	8788	Pi	age 6
Pa	rt VII-B Statements Regarding Activit				720 May Be R	equ	ired (continued)				
	<ul> <li>During the year did the foundation pay or incur ar</li> <li>(1) Carry on propaganda, or otherwise attempt</li> <li>(2) Influence the outcome of any specific public on, directly or indirectly, any voter registration</li> </ul>	y am to inf elect	ount to luence legislation ( tion (see section 4	sec	tion 4945(e))?		Yes	X No			
	<ul><li>(3) Provide a grant to an individual for travel, st</li><li>(4) Provide a grant to an organization other that</li></ul>	udy, o n a cl	or other similar pur naritable, etc., orga	anıza	ation described		Yes Yes	X No			
	in section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see page 22 of the instructions) .							X No			
h	educational purposes, or for the prevention of cruelty to children or animals? Yes X No  b If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in										
U	Regulations section 53 4945 or in a current notice								5b	N/A	<u>-</u> _l
С	Organizations relying on a current notice regarding the answer is "Yes" to question 5a(4), does the tax because it maintained expenditure responsibility "Yes," attach the statement required by Regulation	g disa found ity for	aster assistance ch lation claim exemp the grant?	neck otion	here		. Yes	X No			
	Did the foundation, during the year, receive any for premiums on a personal benefit contract?	·	·				Yes	X No			
b	Did the foundation, during the year, pay premium: If "Yes" to 6b, file Form 8870	s, dire	ectly or indirectly, o	n a	personal benefit o	contr	act?	_	6b		<u> </u>
	At any time during the tax year, was the foundation	•	•				Yes	X No			
	If yes, did the foundation receive any proceeds or								7b	N/A	
Р	Information About Officers and Contractors	, Dir	ectors, Truste	es,	, Foundation	Maı	nagers, Highly i	Paid Em	ploy	ees,	
1	List all officers, directors, trustees, found	atio	n managers and	l th	eir compensat	ion	(see nage 22 of t	ne instru	ctions		
	(a) Name and address	(b)	Title, and average hours per week evoted to position	(0	c) Compensation f not paid, enter -0-)		(d) Contributions to employee benefit plans id deferred compensation	(e)	Expens	se accou	
SE	ATTACHMENT										
2	Compensation of five highest-paid emplor If none, enter "NONE."	yees	s (other than the	ose	included on li	ne 1	—see page 23 of	the instr	uctio	ns).	
(a	Name and address of each employee paid more than \$50	,000,	(b) Title, and avera hours per week devoted to position		(c) Compensation	on	(d) Contributions to employee benefit plans and deferred compensation	(e)		se accou	
NO	NE .								_		
										<u> </u>	
Tot	al number of other employees paid over \$50,	000							<b>⊳</b>	0-PF	(2009)
								1-0	55		(2000)

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Part VI	Information About Officers, Directors, Trustees and Contractors (continued)	s, Foundation Managers, Highly Pa	aid Employees,
3 Five I	nighest-paid independent contractors for professional services (s	see page 23 of the instructions). If none, er	nter "NONE."
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE			
Total num	ber of others receiving over \$50,000 for professional services	<u></u>	🕨
Part IX-	A Summary of Direct Charitable Activities		
	ndation's four largest direct chantable activities during the tax year. Include relevi of organizations and other beneficianes served, conferences convened, researc		Expenses
1 NONE			
2		•	
3		•	
4			
Part IX-	<b>Summary of Program-Related Investments</b> (see page 1)	ge 24 of the instructions)	
Describe the	e two largest program-related investments made by the foundation during the tax	year on lines 1 and 2	Amount
1 NONE			
2			
-	gram-related investments See page 24 of the instructions		
3			
Total. Add	l lines 1 through 3	<u> </u>	0

Pa	Minimum Investment Return (All domestic foundations must complete this part. Fore	eign foundation	ns,				
	see page 24 of the 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	538,980				
b	Average of monthly cash balances	1b	55,675				
C	Fair market value of all other assets (see page 24 of the instructions)	1c	0				
d	Total (add lines 1a, b, and c)	1d	594,655				
е	Reduction claimed for blockage or other factors reported on lines 1a and						
	1c (attach detailed explanation)						
2	Acquisition indebtedness applicable to line 1 assets .	2					
3	Subtract line 2 from line 1d	3	594,65 <u>5</u>				
4	Cash deemed held for charitable activities Enter 1½ % of line 3 (for greater amount, see page 25						
	of the instructions)	5	8,920 585.735				
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4						
6	Minimum investment return. Enter 5% of line 5	6	29,287				
Pai	t XI Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) priva						
	foundations and certain foreign organizations check here   And do not complete this part	t )					
1	Minimum investment return from Part X, line 6	1	29,287				
2a		,373					
b	Income tax for 2009 (This does not include the tax from Part VI)						
С	Add lines 2a and 2b .	2c	1,373				
3	Distributable amount before adjustments Subtract line 2c from line 1	3	27,914				
4	Recoveries of amounts treated as qualifying distributions	4	0				
5	Add lines 3 and 4	5	27,914				
6	Deduction from distributable amount (see page 25 of the instructions)	6					
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII,						
	line 1	7	27,914				
Dar	t XII Qualifying Distributions (see page 25 of the instructions)						
Гаг	Qualitying Distributions (see page 25 of the first detions)						
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes						
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	20,168				
þ	Program-related investments—total from Part IX-B	1b	0				
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,						
	purposes	2	0				
3	Amounts set aside for specific charitable projects that satisfy the						
а	Suitability test (prior IRS approval required)	3a					
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	20,168				
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment	_	_				
	income Enter 1% of Part I, line 27b (see page 26 of the instructions)	5	0				
6	Adjusted qualifying distributions. Subtract line 5 from line 4	. 6	20,168				
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the qualifies for the section 4940(e) reduction of tax in those years	foundation					

1	Distributable amount for 2009 fr	om Part XI,	(a) Corpus	(b) Years pnor to 2008	(c) 2008	(d) 2009
	line 7 .					27,914
2	Undistributed income, if any, as	of the end of 2009				
а	•				0	
b				0		
3	Excess distributions carryover,	ıf any, to 2009	·			
а	From 2004					
b	From 2005					
С	From 2006					
d	From 2007	20,039				
е	From 2008	76,695				
f	Total of lines 3a through e		96,734			
4	Qualifying distributions for 2009	from Part				
	XII, line 4 🕨 \$	20,168				
а	Applied to 2008, but not more th	nan line 2a .			0	
b	Applied to undistributed income	of prior years				
	(Election required—see page 26	6 of the instructions)		0		
С	Treated as distributions out of c	orpus (Election	_			
	required—see page 26 of the in	structions)				
d	Applied to 2009 distributable an	nount				20,168
е	Remaining amount distributed of	out of corpus	0			
5	Excess distributions carryover a	applied to 2009	7,746			7,746
	(If an amount appears in columi	``				
	same amount must be shown in	r column (a) )				
6	Enter the net total of each col	umn as				
	indicated below:					
а	Corpus Add lines 3f, 4c, and 4e	Subtract line 5	88,988			
b	Prior years' undistributed incom	e Subtract				
	line 4b from line 2b			0		
С	Enter the amount of prior years'	undistributed				
_	income for which a notice of def					
	been issued, or on which the se	· ·				
	tax has been previously assess	` '				
d	Subtract line 6c from line 6b Ta	1				***
_	amount—see page 27 of the ins			0		
е		i i				
·	4a from line 2a Taxable amoun					
	instructions	it—see page 27 of the			o	
f	Undistributed income for 2009	Subtract			- 4	
•	lines 4d and 5 from line 1. This					
		amount must				0
7	be distributed in 2010  Amounts treated as distributions	s out of				
•	corpus to satisfy requirements in					
	section 170(b)(1)(F) or 4942(g)(	, ,				
		(3) (See page 27 Oi				
8	the instructions) Excess distributions carryover fi	rom 2004	_			
0	not applied on line 5 or line 7 (si					
	• • • • • • • • • • • • • • • • • • • •	ee page 27 or the	0			
0	instructions) .		0			
9	Excess distributions carryove		00.000			
10	Subtract lines 7 and 8 from line	ра	88,988			
10	Analysis of line 9	ا				
a	Excess from 2005	0				
b	Excess from 2006	0				
C	Excess from 2007	12,293				
d	Excess from 2008	76,695				
е	Excess from 2009	i 0				

Forr	n 990-PF (2009) The Bernard M and Caryl H	. Susman Foundat	ion		20-8068	
Pa	rt XIV Private Operating Foundations (s	ee page 27 of th	e instructions ar	nd Part VII-A, qu	estion 9)	N/A
1 a	If the foundation has received a ruling or determination, and the ruling is effective for 2009, ent			. ▶		
b	Check box to indicate whether the foundation is a	private operating four	ndation described in	section	4942(j)(3) or	4942(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 each year listed	0	(0) 2000	(0) 2007	(,	0
ь	85% of line 2a	0	0	0	0	0
	Qualifying distributions from Part XII, line 4 for each year listed	0	Ŭ			0
d	Amounts included in line 2c not used directly for active conduct of exempt activities				-	0
е	Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c	0	0	0	0	0
3 a	Complete 3a, b, or c for the alternative test relied upon "Assets" alternative test—enter					
	(1) Value of all assets		<u></u>			0
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					0
b	"Endowment" alternative test—enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed	0				0
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)					0
	(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(III)					0
	(3) Largest amount of support from an exempt organization					0
	(4) Gross investment income					0
Pa	rt XV Supplementary Information (Cor		-		000 or more in	_
_	assets at any time during the ye		of the instruc	tions.)		
1 a NC	Information Regarding Foundation Manag List any managers of the foundation who have con before the close of any tax year (but only if they ha	tributed more than 2			the foundation	
b	List any managers of the foundation who own 10% ownership of a partnership or other entity) of which				ortion of the	
<u>NC</u> 2	NE Information Regarding Contribution, Gran	t Gift Loon Sah	olarchin ata D-	ograms:	<del></del>	
	Check here X if the foundation only makes unsolicited requests for funds. If the foundation maunder other conditions, complete items 2a, b, c, ar	contributions to pres ikes gifts, grants, etc	selected charitable o	organizations and do		ons
а	The name, address, and telephone number of the	person to whom app	lications should be	addressed		
b	The form in which applications should be submitted	d and information and	d materials they sho	ould include		
c	Any submission deadlines	· ·				
	Any restrictions or limitations on awards, such as t	by geographical area	s, charitable fields,	kınds of institutions,	or other	

Total

Form 990-PF (2009) The Bernard M. and Caryl H St			20-80	68788 Page 11
Part XV Supplementary Information (continu				
3 Grants and Contributions Paid During the		r Future Payı	ment	
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year SEE ATTACHMENT				
····			▶ 3a	13,550
b Approved for future payment  NONE				

**▶** 3b

Enter gross amounts unless otherwise indicated	Unrelated bus (a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income (See page 28 of
1 Program service revenue					the instructions)
a					
b					
c					
d					
e	. <u> </u>				
f					
g Fees and contracts from government agencies	ļ				
2 Membership dues and assessments				<u> </u>	
3 Interest on savings and temporary cash investments			14	132	
4 Dividends and interest from securities			14	7,291	
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			18	-188,560	
9 Net income or (loss) from special events				_	
10 Gross profit or (loss) from sales of inventory .					
11 Other revenue a Federal Tax Refund			01	5,010	
b					
c					
d			<del>                                     </del>		
d e					
d e  Subtotal Add columns (b), (d), and (e)		0		-176,127	
d e 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e)		0		-176,127 <b>13</b>	
d e 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions on page 28 to verify calc					
d e 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions on page 28 to venfy calc Part XVI-B Relationship of Activities to the Ac	complishment	of Exempt P	urposes	13	
d e  12 Subtotal Add columns (b), (d), and (e)  13 Total. Add line 12, columns (b), (d), and (e)  See worksheet in line 13 instructions on page 28 to verify calc  Part XVI-B Relationship of Activities to the Ac  Line No. Explain below how each activity for which income the accomplishment of the foundation's exempt	complishment e is reported in colu	of Exempt P	urposes VI-A contributed in	13nportantly to	0 -176,127
d e  12 Subtotal Add columns (b), (d), and (e)  13 Total. Add line 12, columns (b), (d), and (e)  See worksheet in line 13 instructions on page 28 to verify calc  Part XVI-B Relationship of Activities to the Ac  Line No.  Explain below how each activity for which incom the accomplishment of the foundation's exempt page 28 of the instructions)	complishment e is reported in colu	of Exempt P	urposes VI-A contributed in	13nportantly to	
d e  12 Subtotal Add columns (b), (d), and (e)  13 Total. Add line 12, columns (b), (d), and (e)  See worksheet in line 13 instructions on page 28 to verify calc  Part XVI-B Relationship of Activities to the Ac  Line No. Explain below how each activity for which income the accomplishment of the foundation's exempt	complishment e is reported in colu	of Exempt P	urposes VI-A contributed in	13nportantly to	
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d e  12 Subtotal Add columns (b), (d), and (e)  13 Total. Add line 12, columns (b), (d), and (e)  See worksheet in line 13 instructions on page 28 to verify calc  Part XVI-B Relationship of Activities to the Ac  Line No.  Explain below how each activity for which incom the accomplishment of the foundation's exempt page 28 of the instructions)	complishment e is reported in colu	of Exempt P	urposes VI-A contributed in	13nportantly to	
d e  12 Subtotal Add columns (b), (d), and (e)  13 Total. Add line 12, columns (b), (d), and (e)  See worksheet in line 13 instructions on page 28 to verify calc  Part XVI-B Relationship of Activities to the Ac  Line No.  Explain below how each activity for which incom the accomplishment of the foundation's exempt page 28 of the instructions)	complishment e is reported in colu	of Exempt P	urposes VI-A contributed in	13nportantly to	
d e  12 Subtotal Add columns (b), (d), and (e)  13 Total. Add line 12, columns (b), (d), and (e)  See worksheet in line 13 instructions on page 28 to verify calc  Part XVI-B Relationship of Activities to the Ac  Line No.  Explain below how each activity for which incom the accomplishment of the foundation's exempt page 28 of the instructions)	complishment e is reported in colu	of Exempt P	urposes VI-A contributed in	13nportantly to	
d e  12 Subtotal Add columns (b), (d), and (e)  13 Total. Add line 12, columns (b), (d), and (e)  See worksheet in line 13 instructions on page 28 to verify calc  Part XVI-B Relationship of Activities to the Ac  Line No.  Explain below how each activity for which income the accomplishment of the foundation's exempt page 28 of the instructions)	complishment e is reported in colu	of Exempt P	urposes VI-A contributed in	13nportantly to	
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Firm's name (or yours if self-employed), address, and ZIP code

FOUNDATION SOURCE

55 WALLS DRIVE, FAIRFIELD, CT 06824

	33U-FF	· · · · · · · · · · · · · · · · · · ·		i H. Susman Foun				20-80687		rag	H 1.
Pai	t XVII	_	_	sfers To and Tr	ansactions a	nd Re	lationships With N	loncharita	ıble		
٠	D: 4 (I	Exempt Organiza			. C. H		h			V1	
		e organization directly tion 501(c) of the Code								Yes	NO
		zations?	(Outer than s	ection 30 (c)(3) 0	iganizadons) o	1111 560	lion 327, relating to p	Unitical			
	-										
		fers from the reporting							4 ~ (4)		v
	(1) Ca	asn ther assets				•			1a(1)		X
<b>L</b>	• •	transactions:				٠			1a(2)		
		ales of assets to a none	charitable eve	mnt organization					1b(1)	1	Х
		archases of assets from							1b(2)		X
	(3) Re	ental of facilities, equip	ment or other	r assets				ſ	1b(3)		X
	(4) Re	eimbursement arrange	ments						1b(4)		Х
	(5) Lo	oans or loan guarantee	s						1b(5)		X
		erformance of services							1b(6)		Х
C	Sharin	ng of facilities, equipme	ent, mailing list	ts, other assets, o	r paid employee	es			1c		<u>X</u>
d	If the a	answer to any of the at	oove is "Yes,"	complete the follo	wing schedule.	Colum	n (b) should always:	show the fa	ir marl	ket	
	value	of the goods, other ass	sets, or service	es given by the rep	porting foundati	ion. If th	e foundation receive	d less than	fair m	arket	
	value	in any transaction or sl	naring arrange	ement, snow in col	iumn (a) the va	liue or t	ne goods, other asse	ts, or servic	es rec	eiveo	i.
(a) !	ine no	(b) Amount involved		of nonchantable exemp	t organization	(d) De:	scription of transfers, transa	actions, and sh	anng an	rangem	ents
	1		NONE								
					<del> </del>						
						-		· · · · · · · · · · · · · · · · · · ·			
			<del> </del>		<del></del>						
			<u> </u>		<del> </del>	<del> </del>		·····			
			<del>                                     </del>		<u>.                                    </u>	<del> </del>					
				<del></del>		<del>                                     </del>					
	-						· · · · · · · · · · · · · · · · · · ·				
						ļ					
		<u> </u>	<u> </u>			<u> </u>					
2a	Is the	foundation directly or in	ndirectly affilia	ated with, or related	d to, one or mo	re tax-e	exempt organizations	Пν	م احد	l Ma	
h		bed in section 501(c) o s," complete the followi		mer man section s		section	521!	٠ ـــا ٠	es X	INO	
	11 163	(a) Name of organization	ng schedule.	(h) Type	of organization		(c) Description	n of relationsh	n		
N/A		(a) Name of organization		(в) туре	Of Organization		(c) Description	il of relationshi	Ρ		
17/	<u> </u>							<del></del>			
		er penalties of perjury, I decla									
	belie	of it is true, correct, and comp	olete Declaration	of preparer (other than	taxpayer or fiduciar	y) ıs base	d on all information of whic	h preparer has	any kno	wledge	<del>)</del>
	1	Done AM	Jusin	an	1	5/5	5/10 0	, _			
<u>9</u>		nature of officer or trustee		. <del></del>	Da	J /	Title	eside	20		
Sign Here	F 319	mature of omicer of trustee					y ride				-
Ξ	<i>(A</i> )				Date		Check if	Preparer's id number (see			
ij	- E	Preparer's .Te	· · · · · · · · · · · · · · · · · · ·				-				
U)	Paid eparer's se Only	signature	<u></u>	Hasvett	04/02/2	010		<u> </u>			

Phone no. (800) 839-1754

EIN >

### 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 organizati	ion	Employer identification number
The Bernard M. an	d Caryl H. Susman Foundation	20 8068788
Organization type (che	eck one):	
Filers of:	Section:	
Form 990 or 990-EZ	☐ 501(c)( ) (enter number) organization	
	☐ 4947(a)(1) nonexempt charitable trust <b>not</b> treate	ed as a private foundation
	☐ 527 political organization	
Form 990-PF	■ 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated a	as a private foundation
	☐ 501(c)(3) taxable private foundation	
	tion is covered by the <b>General Rule</b> or a <b>Special Rule</b> . 01(c)(7), (8), or (10) organization can check boxes for both	ո the General Rule and a Special Rule. See
General Rule		
	ation filing Form 990, 990-EZ, or 990-PF that received, duri any one contributor. Complete Parts I and II	ing the year, \$5,000 or more (in money or
Special Rules		
sections 509(a)	01(c)(3) organization filing Form 990 or 990-EZ that met the (1) and 170(b)(1)(A)(vi), and received from any one contribu (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (i	utor, during the year, a contribution of the greater
the year, aggreg	01(c)(7), (8), or (10) organization filing Form 990 or 990-EZ to gate contributions of more than \$1,000 for use <i>exclusively</i> fo poses, or the prevention of cruelty to children or animals. Co	or religious, charitable, scientific, literary, or
the year, contribing aggregate to mo year for an exclusion applies to this or	or (c)(7), (8), or (10) organization filing Form 990 or 990-EZ the outions for use exclusively for religious, charitable, etc., purpose than \$1,000. If this box is checked, enter here the total considered yellogious, charitable, etc., purpose. Do not complete a reganization because it received nonexclusively religious, charitable.	oses, but these contributions did not ontributions that were received during the any of the parts unless the <b>General Rule</b> aritable, etc , contributions of \$5,000 or more
990-EZ, or 990-PF), but	on that is not covered by the General Rule and/or the Special tit <b>must</b> answer "No" on Part IV, line 2 of its Form 990, or cl	heck the box on line H of its Form 990-EZ,

		_		_
'age	1	of	1	of Part I

Schedule B	(Form 990, 990-EZ, or 990-PF) (2009)			Page <u>1</u> of <u>1</u> of <b>Pa</b> r	t
	organization			loyer identification number	-
	Bernard M. and Caryl H. Susman Foundation		20	8068788	_
Part I	Contributors (see instructions)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contribu	tions	(d) Type of contribution	
1	Bernard M. Susman Revocable Trust  c/o Bernard Susman, 707 Skokie Boulevard	\$ 138,7	14.00	Person	
	Northbrook, IL 60062			a noncash contribution )	
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contribu	tions	(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 contribu	tions	(d) Type of contribution	_
		\$		Person	
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contribu	tions	(d) Type of contribution	_
		\$		Person	
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contribu	tions	(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 contribu	tions	(d) Type of contribution	_
		\$		Person  Payroll  Noncash	

(Complete Part II if there is a noncash contribution )

Name of organization	Empl	oyer identification number
The Bernard M. and Caryl H. Susman Foundation	20	8068788

### Part 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
1	BIOSCRIP, INC. (BIOS), 7500 sh.		
		\$ 57,750.00	11/20/2009
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	CMNOVA SOLUTIONS INC (CMN), 15600 sh.		
		\$ 80,964.00	07/28/2009
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

The Bernard M. and Caryl H. Susman Foundation EIN: 20-8068788 Taxable Year Ending December 31, 2009

### Form 990-PF, Part I, Line 11 - Other Income

Asset Description	Line 11 - Column (a) Revenue and Expenses Per Books	Line 11 - Column (b) Net Investment Income
FEDERAL TAX REFUND	\$5,010.00	\$0.00
TOTAL OTHER INCOME	\$5,010,00	\$0.00

The Bernard M. and Caryl H. Susman Foundation EIN: 20-8068788 Taxable Year Ending December 31, 2009

## Form 990-PF, Part I, Line 23 - Other expenses

	(a) Expenses per Books	(b) Net Investment Income	(c) Adjusted Net Income	(d) Charitable Purpose
ADMINISTRATIVE FEES	\$6,618	0\$		\$6,618
TOTAL:	\$6,618	\$0		\$6,618

The Bernard M. and Caryl H. Susman Foundation EIN: 20-8068788 Taxable Year Ending December 31, 2009

Form 990-PF, Part II, Line 10b - Columns (b) & (c) - Investments: Corporate Stock

Shares	Description/Symbol	<u>.</u>	Line 10b - Column (b) Book Value	Line 10b - Column (c) Fair Market Value
2383	BUFFALO SMALL CAP FUND INC (BUFSX)		\$52.954.34	\$53.565 07
1971	CGM FOCUS FUND (CGMFX)		\$66,086.61	\$58,655 83
4781	EATON VANCE FLOATING RATE FUND ADVISERS CLASS (EABLX)		\$35,271.50	\$40,828.27
1773	FAIRHOLME FD (FAIRX)		\$39,269 78	\$53,354 96
1000	GENERAL GROWTH PPTYS INC (GGWPQ)		\$44,752 84	\$11,560 00
2104	HEARTLAND VALUE FUND (HRTVX)		\$91,952.13	\$76,116.82
6641	JANUS CONTRARIAN FUND (JSVAX)		\$62,835 63	\$87,597 84
4617	LOOMIS SAYLES BOND FUND RETAIL CLASS (LSBRX)		\$49,003 35	\$61,360.73
3668	OAKMARK EQUITY & INCOME FUND (OAKBX)		\$79,063 93	\$93,688.94
4784	VANGUARD CONVERTIBLE SECURITIES FD (VCVSX)		\$48,871.72	\$60,084.08
		TOTAL	\$570,062	\$596,813

The Bernard M. and Caryl H. Susman Foundation EIN: 20-8068788 Taxable Year Ending December 31, 2009

Form 990-PF, Part VIII, Line 1 - List all foundation officers, directors, trustees, foundation managers and their compensation

(a) Name and address		(b) Title, and average hours per week devoted to position	(c) Compensation (if not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
Bernard Susman c/o Foundation Source 501 Silverside Road Suite 123 Wilmington, DE 19809-1377	7	President / Director / Secretary hour(s) per week	00 0\$	\$0 O\$	\$0.00
Caryl Susman c/o Foundation Source 501 Silverside Road Suite 123 Wilmington, DE 19809-1377	₹	Vice President / Director hour(s) per week	00 0\$	\$0.00	<b>0</b> 0 <b>0</b> \$

The Bernard M. and Caryl H. Susman Foundation EIN: 20-8068788 Taxable Year Ending December 31, 2009

Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year

Recipient name and address (home or business)	If reciplent is an Individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
ANTI DEFAMATION LEAGUE FOUNDATION 605 THIRD AVENUE, NEW YORK, NY 10158-1015	N/A	509(a)(1)	GENERAL & UNRESTRICTED	\$500.00
ART INSTITUTE OF CHICAGO 111 SOUTH MICHIGAN AVENUE, CHICAGO, IL 60603-6492	N/A	509(a)(1)	SUSTAINING FELLOWS DIVISION	\$1,500 00
CHICAGO ACTION FOR SOVIET JEWRY 1630 OLD DEERFIELD RD STE 208, HIGHLAND PARK, IL 60035- 3033	N/A	509(a)(1)	GENERAL & UNRESTRICTED	\$1,000 00
CHICAGO CHILDRENS ADVOCACY CENTER 1240 S DAMEN AVE, CHICAGO, IL 60608-1122	N/A	509(a)(1)	GENERAL & UNRESTRICTED	\$500 00
CHICAGO SYMPHONY ORCHESTRA 220 SOUTH MICHIGAN AVE, CHICAGO, IL 60604-2596	N/A	509(a)(1)	GENERAL & UNRESTRICTED	\$1,000 00
CHILDRENS MEMORIAL HOSPITAL 2300 CHILDRENS PLAZA, BOX 4, CHICAGO, IL 60616	N/A	509(a)(1)	GENERAL & UNRESTRICTED	\$500 00
EVANS SCHOLARS FOUNDATION 1 BRIAR RD, GOLF, IL 60029-2000	N/A	509(a)(1)	GENERAL & UNRESTRICTED	\$200.00
GLENKIRK 3504 COMMERCIAL AVE, NORTHBROOK, IL 60062-1821	N/A	509(a)(1)	GENERAL & UNRESTRICTED	\$500 00

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The Bernard M. and Caryl H. Susman Foundation EIN: 20-8068788 Taxable Year Ending December 31, 2009

Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year

	If recipient is an individual,			
Recipient name and address (home or business)	show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
GREATER CHICAGO FOOD DEPOSITORY 4100 W ANN LURIE PLACE, CHICAGO, IL 60632-3920	N/A	509(a)(1)	GENERAL & UNRESTRICTED	\$300.00
ILLINOIS COUNCIL AGAINST HANDGUN VIOLENCE 223 W JACKSON BLVD STE 802, CHICAGO, IL 60606-6913	N/A	509(a)(1)	GENERAL & UNRESTRICTED	\$500 00
NATIONAL ALLIANCE FOR RESEARCH ON SCHIZOPHRENIA AND DEPRESSION	N/A	509(a)(2)	GENERAL & UNRESTRICTED	\$1,000.00
90 CULLERMILL RUSIE 404, GREAT NECK, NY 11021-3104 PEFISRAEL ENDOWMENT FUNDS INC 317 MADISON AVE SUITE 607, NEW YORK, NY 10017-5201	N/A	509(a)(1)	GENERAL & UNRESTRICTED	\$1,500 00
PARENTS TELEVISION COUNCIL INC 707 WILSHIRE BLVD STE 2075, LOS ANGELES, CA 90017-3505	N/A	509(a)(1)	GENERAL & UNRESTRICTED	\$300.00
SHALVA INC 1610 W HIGHLAND AVE. # 9, CHICAGO, IL 60660-1206	N/A	509(a)(1)	GENERAL & UNRESTRICTED	\$500.00
SMILE TRAIN INC 41 MADISON AVE FL 28, NEW YORK, NY 10010-2351	N/A	509(a)(1)	GENERAL & UNRESTRICTED	\$250 00
SOUTHERN POVERTY LAW CENTER INC 400 WASHINGTON AVENUE, MONTGOMERY, AL 36104	N/A	509(a)(1)	GENERAL & UNRESTRICTED	\$1,000 00

The Bernard M. and Caryl H. Susman Foundation EIN: 20-8068788 Taxable Year Ending December 31, 2009

# Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year

Recipient name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
THE ARK	N/A	509(a)(1)	GENERAL & UNRESTRICTED	\$250.00
6450 N CALIFORNIA AVE, CHICAGO, IL 60645-5209				
THE JOSSELYN CENTER NFP	N/A	509(a)(1)	GENERAL & UNRESTRICTED	\$250.00
405 CENTRAL AVE, NORTHFIELD, IL 60093-3006				
UNITED STATES HOLOCAUST MEMORIAL MUSEUM	N/A	509(a)(1)	GENERAL & UNRESTRICTED	\$500.00
100 RAOUL WALLENBERG PL SW, WASHINGTON, DC 20024- 2126				
YOUNG WOMENS LEADERSHIP CHARTER SCHOOL OF CHICAGO	N/A	509(a)(1)	GENERAL & UNRESTRICTED	\$1,500.00
2641 S CALUMET AVE, CHICAGO, IL 60616-2901				

\$13,550

TOTAL: