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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

OMB No 1545-0052

2009

Ear a	alandar	V007 2000	or tax year beginning			2009	, and endi	_	rung rodanomonio	20	
			T T		Initial return					, 20	
G CN	eck an i	hat apply	Initial return	L		of a former p	nanic cusi			Final return	
		Name of f	Amended return		Addre	ss change		1	lame change		
• •		Name of fou	поацоп						A Employer identi	tication number	
	the IRS	I DEVOLUTE	DO DAMELY POLINDA	m T O N						2066326	
	bel.		rs family founda						22-3266735		
	erwise, rint	Number and	street (or P O box number if	mail is not o	delivered to street	t address)	Room/su	ıte	B Telephone number (se	ee page 10 of the instructions)	
•	type.	20 20 3							_		
	Specific		DELAIDE AVE						() –	
Instr	uctions.	City or town,	state, and ZIP code						C If exemption applic pending, check her	cation is	
									D 1 Foreign organiz	▶ 1	
		HIGHLAND	D PARK, NJ 08904						2 Foreign organiz		
<u>H</u> Ch	eck type	e of organiza	tion X Section 501(c)(3) exe	empt private f	foundation			85% test, check computation •	here and attach	
	Section 4	4947(a)(1) no	nexempt charitable trust	Oth	er taxable pr	rivate founda	tion		E If propte foundate	on status was terminated	
Fa	ır marke	et value of all	assets at end JAcco	unting m	ethod·X] C	ash L Acc	crual			(b)(1)(A), check here	
of	year (fro	m Part II, col		ther (spe						s in a 60-month termination	
16) ▶ \$	2,25	55,644. (Part I,	column (d) must be or	n cash basis.)				b)(1)(B), check here .	
Part	Analy	sis of Reve	nue and Expenses (The	(a) Pa	evenue and	(h) N-A			-> A alat!4	(d) Disbursements	
	total o	it amounts in co not necessarily	olumns (b), (c), and (d) equal the amounts in	èxpε	enses per	(b) Net inve		(c) Adjusted net income	for charitable purposes	
			e 11 of the instructions))	t	ooks					(cash basis only)	
1	Contribu	tion <u>s, gift</u> s, grants,	etc received (attach schedule) .		50,820.						
2	Check	If the f	oundation is not required to Sch B.		- -						
3	Interest		temporary cash investments						•		
4		_	st from securities		34,547.	. 3	34,547.			ATCH 1	
5 a											
			ss)							V-1 - 10-11	
l _			sale of assets not on line 10		51,977.						
Ž Š	Gross s	ales pnce for all									
enue 6 a l		on line 6a	me (from Part IV, line 2) .			7	4,479.				
ا ع		=	al gain								
9		•	S								
	Gross sa	ales less returns									
١,		owances • • • • ost of goods sold									
		-	(attach schedule)								
11			schedule)	-					·	-	
12			rough 11		137,344.	10	9,026.			- 	
13					0.		3,0201		·		
			rs, directors, trustees, etc ries and wages								
14										 	
15		in plans, emplo				 					
15 16 16 16 16 16 16 16 16 16 16 16 16 16	Legaii	ees (attach sc	CEMED CH 2	<u> </u>	3,100.	<u> </u>	1,550.		0	. 1,550	
	ACCOU	nung rees (ratt	actual records		J, 100		_, 550.			1,330	
2 2 17		` 11 L	es (attach schedule)().			 				 	
對 [[Interes		N 0 1 2010 1		205.					 	
18 19 20	Taxes (a	aπac n schedule)	(see page 14 of the instructions)		200						
19		ciation tattach	schedule) and depletion								
₹ 20	•	P	BDEM.UIJ.			1					
21			and meetings			ļ				 	
22			nons ATCH 4		166.		166.			 	
23			ch schedule) ATCH 4.		100.	•	100.				
24			administrative expenses.		2 471	1	1 716		^	3 550	
25		_	23		3,471.	•	1,716.		0		
25	Contrit	outions, gifts,	grants paid		136,436.	•	1 316			136,436	
26			sements Add lines 24 and 25		139,907.	•	1,716.		0	. 137,986	
27	Subtra	ct line 26 fron	n line 12								
:	a Excess o	of revenue over ex	penses and disbursements		- 2,563.						
	b Net inv	vestment inco	me (if negative, enter -0-)		· · · · · · · · · · · · · · · · · · ·	10	7,310.				
	c Adiust	ed net income	(if negative, enter -0-).				1		-0-	1	

For Privacy Act and Paperwork Reduction Act Notice, see page 30 of the instructions. $^{9E1410\ 1\ 000}$ 47004R F482 5/12/2010 3:10:58 PM V 09-6.1

ATCH 3

22-3266735

Part II Balance Sheets description column should be for end-of-year		Beginning of year	End of year		
	amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value	
1	Cash- non-interest-bearing	199,697.	63,000.	63,000	
2	Savings and temporary cash investments				
3					
	Less allowance for doubtful accounts ▶				
4	Pledges receivable ▶				
	Less allowance for doubtful accounts ▶				
5	Grants receivable				
6	Receivables due from officers, directors, trustees, and other				
	disqualified persons (attach schedule) (see page 16 of the instructions)		ľ		
7	Other notes and loans receivable (attach schedule)				
ŀ	Less allowance for doubtful accounts ▶				
رم 8 م	Inventories for sale or use				
Assets	Prepaid expenses and deferred charges				
10	a Investments - U S and state government obligations (attach schedule)				
	b Investments - corporate stock (attach schedule) ATCH 5	1,382,022.	1,515,190.	2,118,709	
	c Investments - corporate bonds (attach schedule) ATCH 6	48,353.	49,030.	49,030	
11	Investments - land, buildings,				
	and equipment basis Less accumulated depreciation				
1	(attach schedule)				
12	• • • • • • • • • • • • • • • • • • • •	· · · · · · · · · · · · · · · · · · ·			
13	Investments - other (attach schedule)				
' '	equipment basis Less accumulated depreciation				
İ	(attach schedule)	24,616.	24,905.	24,905	
15	, , , , , , , , , , , , , , , , , , , ,	24,616.	24,903.	24,905	
16	, , , , , , , , , , , , , , , , , , , ,	1 654 600	1 (50 105	2 255 644	
	instructions Also, see page 1, item l)	1,654,688.	1,652,125.	2,255,644.	
17					
18	Grants payable	·			
ဖွဲ့ 19	Deferred revenue				
Liabilities 50 21 20 21	Loans from officers, directors, trustees, and other disqualified persons				
<u>e</u> 21	Mortgages and other notes payable (attach schedule)				
ا 22	Other liabilities (describe				
23	Total liabilities (add lines 17 through 22)				
	Foundations that follow SFAS 117, check here ▶				
	and complete lines 24 through 26 and lines 30 and 31.				
S 24	Unrestricted	<u></u>			
25 26	Temporarily restricted				
R 26	Permanently restricted				
<u> </u>	Foundations that do not follow SFAS 117,				
Fund	check here and complete lines 27 through 31. ▶ X				
5 27	Capital stock, trust principal, or current funds	1,459,277.	1,459,277.		
	Paid-in or capital surplus, or land, bldg , and equipment fund				
Net Assets 30 82 83	Retained earnings, accumulated income, endowment, or other funds	195,411.	192,848.		
A 30	Total net assets or fund balances (see page 17 of the	, , , , , , , , , , , , , , , , , , , ,			
<u>=</u>	, . .	1,654,688.	1,652,125.		
31	Instructions) Total liabilities and net assets/fund balances (see page 17	2,001,0001	2,002,1201		
31		1,654,688.	1,652,125.		
Dow	of the instructions)		1,032,123.		
	tal net assets or fund balances at beginning of year - Part II,		- 1	1 654 600	
en	d-of-year figure reported on prior year's return)	• • • • • • • • • • • • • • • • • • • •		1,654,688 -2,563	
2 En	ter amount from Part I, line 27a		2	-2,363	
3 Ot	her increases not included in line 2 (itemize)		3	1 650 105	
4 Ad	d lines 1, 2, and 3			1,652,125	
	creases not included in line 2 (itemize)			1 650 100	
<u>6 To</u>	tal net assets or fund balances at end of year (line 4 minus l	ine 5) - Part II, column (b),	line 30 6	1,652,125	
				Form 990-PF (2009)	

' (a) List	ns and Losses for Tax on Inventor and describe the kind(s) of property sold (e g , real estate,	(b) How acquired	(c) Date	(d) Date sold
2-stor	P-Purchase D-Donation	(mo , day, yr)	(mo , day, yr)		
	HEDULE				
<u>b</u>			 		
d d			 		
е			 		 -
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) minu	
a					
<u>b</u>					
<u>c</u>			-		
_d			 		
Complete only for assets	s showing gain in column (h) and own	od by the foundation on 12/21/60			
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any		Gains (Col (h) g. (k), but not less t Losses (from co	han -0-) or
2		0.00.00.00, 0.1.9			
b			 		
C					
d			<u> </u>		
е					·
2 Capital gain net income	Or (not conital loce)	gain, also enter in Part I, line 7 (loss), enter -0- in Part I, line 7	2		74,479.
3 Net short-term capital g	 aın or (loss) as defined in sections 12	1	- -		•
	t I, line 8, column (c) (see pages 13 a				
If (loss), enter -0- in Part	I, line 8		3		
Part V Qualification	Under Section 4940(e) for Redu	iced Tax on Net Investment Inc	come		<u> </u>
	es, leave this part blank. or the section 4942 tax on the distrib es not qualify under section 4940(e)		ase period	^{ქ?}	Yes X No
· · · · · · · · · · · · · · · · · · ·	mount in each column for each year,		efore mak	ing any entries	
(a)	(b)	(c)	lore mak	(d)	
Base period years Calendar year (or tax year beginning in	ا بين 'فتينين سيم	Net value of nonchantable-use assets		Distribution re (col (b) divided by	
2008	155,898.	2,277,065.			0.068464
2007	72,929.	2,786,925.			0.026168
2006	252,525.	2,397,585.			0.105325
2005	74,159.	2,463,227.			0.030106
2004	67,984.	2,386,879.			0.028482
O T-4-1-251	(4)				0 050545
2 Total of line 1, column	`	Aba Adal and a color	2		0.258545
	io for the 5-year base period - divide undation has been in existence if less		3		0.051709
4 Enter the net value of n	oncharitable-use assets for 2009 from	m Part X, line 5	4	1,	869,730.
5 Multiply line 4 by line 3			5		96,682.
6 Enter 1% of net investr	nent income (1% of Part I, line 27b)		6		1,073.
			7		
					97,755.
8 Enter qualifying distribu	tions from Part XII, line 4				

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Par	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of the	e ins	tructio	ons)		
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 ruling letter if necessary - see instructions)					
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		1,0	73.		
	here X and enter 1% of Part I, line 27b					
С	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					
3	Add lines 1 and 2		1,0	73.		
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 4			0.		
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0		1,0	73.		
6	Credits/Payments					
а	2009 estimated tax payments and 2008 overpayment credited to 2009 6a 5, 199.					
b	Exchipt foreign organizations tax withheld at source					
C	tex pere with appropried extension of time to the (form coop),					
	Backup withholding erroneously withheld 6d 6d		E 1	0.0		
7	Total credits and payments Add lines 6a through 6d		ο, τ	99.		
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached					
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		4 1	26.		
10 11	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid Enter the amount of line 10 to be Credited to 2010 estimated tax ▶ 4,126. Refunded ▶ 11		4,1	20.		
	t VII-A Statements Regarding Activities					
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		V			
· a	participate or intervene in any political campaign?	1 a	Yes	No X		
h	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19	<u>'a</u>				
~	of the instructions for definition)?	16		Х		
	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					
С	Did the foundation file Farm 4420 DOI for this user?	1 c	ļ	Х		
d						
	(1) On the foundation ►\$ (2) On foundation managers ►\$		İ			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed					
	on foundation managers ►\$					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X		
	If "Yes," attach a detailed description of the activities					
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of					
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	_3		Χ		
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		Χ		
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		_X		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X		
	If "Yes," attach the statement required by General Instruction T					
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either					
	By language in the governing instrument, or					
	By state legislation that effectively amends the governing instrument so that no mandatory directions that		.,			
	conflict with the state law remain in the governing instrument?	6	X			
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	_7	X			
8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the instructions) \blacktriangleright $^{\rm NJ}$,					
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General					
	(or designate) of each state as required by General Instruction G? If "No," attach explanation ATTACHMENT 8	8ь		X		
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or					
	4942(J)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV on page		İ			
	27)? If "Yes," complete Part XIV	9		X		
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		Х		

	22 32 33		` '	⊬age ⊃
Par	t VII-A Statements Regarding Activities (continued)			
11,	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule (see 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		Х
13		13	X	
	Website address ► N/A			
14		7-95	55	
	The books are in care of ▶_IMRE_LEFROVITS Telephone no Located at ▶30 SO ADELAIDE AVE HIGHLAND PARK, NJ ZIP+4 ▶ 08904			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here			$\cdot \square$
	and enter the amount of tax-exempt interest received or accrued during the year			
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
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?			
	(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? Yes X No			
	(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) Yes X No			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			
	were not corrected before the first day of the tax year beginning in 2009?	1 c	ļ	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?			
	If "Yes," list the years			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)	1		
	to all years listed, answer "No" and attach statement - see page 20 of the instructions)	2b		<u> </u>
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	>			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business			
	enterprise at any time during the year?			
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)	3 b		X
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4 a		
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	1,		Y

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				
		0.,	0.	0
	-			
Total number of other employees and over \$50,000				NONE

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Part VIII	Information About Officers, Directors, Trustees, Foundation, and Contractors (continued)	n Managers, Highly Paid Empl	oyees,	
3 Five hig	nest-paid independent contractors for professional services (see pa	ge 23 of the instructions). If non-	e, enter "NONE."	
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation	,
NONE				
NONE		NONE		(
Total numb	per of others receiving over \$50,000 for professional services		⊳ NO	NE
Part IX-A	Summary of Direct Charitable Activities Industriant State of the stat	ical information such as the number		
	tions and other beneficianes served, conferences convened, research papers produced, etc		Expenses	
1 NOT	APPLICABLE			
2				
3			-	
4			-	
Part IX-B	Summary of Program-Related Investments (see page 23 of t	he instructions)		_
	e two largest program-related investments made by the foundation during the tax year on li		Amount	
1 _ NONE			-	
2			-	
All other pr	ogram-related investments See page 24 of the instructions		_	

Form **990-PF** (2009)

3 NONE

Pa	Minimum Investment Return (All domestic foundations must complete this part. Foreign see page 24 of the instructions.)	gn foundation	ns,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposès		
а	Average monthly fair market value of securities	1a	1,773,867.
b	Average of monthly cash balances	1b	99,431.
С	Fair market value of all other assets (see page 24 of the instructions)	1c	24,905.
d	Total (add lines 1a, b, and c)	1d	1,898,203.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	1,898,203.
4	Cash deemed held for charitable activities Enter 1 1/2 % of line 3 (for greater amount, see page 25		
	of the instructions)	4	28,473.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,869,730.
6	Minimum investment return. Enter 5% of line 5	6	93,487.
Pa	Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) privation foundations and certain foreign organizations check here ▶ and do not complete this privation foreign organizations.	ite operating part)	
1	Minimum investment return from Part X, line 6	1	93,487.
2 a	Tax on investment income for 2009 from Part VI, line 5		· · · · · · · · · · · · · · · · · · ·
ь	Income tax for 2009 (This does not include the tax from Part VI)	i	
С	Add lines 2a and 2b	2c	1,073.
3	Add lines 2a and 2b Distributable amount before adjustments. Subtract line 2c from line 1	3	1,073. 92,414.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	92,414.
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	92,414.
		1 - 1	
Ра	rt XII Qualifying Distributions (see page 25 of the instructions)		
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	137,986.
b	Program-related investments - total from Part IX-B	1b	0.
2	Program-related investments - total from Part IX-B 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	0.
b	Cash distribution test (attach the required schedule)	3b	0.
4	Cash distribution test (attach the required schedule) Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	137,986.
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	1,073.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	136,913.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating w		
	qualifies for the section 4940(e) reduction of tax in those years		

Pa	rt XIII Undistributed Income (see page	26 of the instruction	ns)		
		(a)	(b)	(c)	(d)
1	Distributable amount for 2009 from Part XI,	Corpus	Years prior to 2008	2008	2009
	line 7				92,414.
2	Undistributed income, if any, as of the end of 2009				
	Enter amount for 2008 only			39,048.	
b	Total for pnor years 20 07 ,20 06 ,20 05				
3	Excess distributions carryover, if any, to 2009				
	F 0004				
	From 2005				
٠	From 2006				
u	From 2007				
	From 2006	0.			
	Total of lines 3a through e	0.			
4	Qualifying distributions for 2009 from Part XII, line 4 > \$ 137,986.				
а	Applied to 2008, but not more than line 2a			39,048.	
b	Applied to undistributed income of prior years (Election				
	required - see page 26 of the instructions)				
С	Treated as distributions out of corpus (Election required - see page 26 of the instructions)			-	
ď	Applied to 2009 distributable amount				92,414.
	Remaining amount distributed out of corpus	6,524.			
5	Excess distributions carryover applied to 2009				
	(If an amount appears in column (d), the same			7,111	
6	amount must be shown in column (a)) Enter the net total of each column as				
•	indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e Subtract line 5	6,524.			
	Prior years' undistributed income Subtract				
D	line 4b from line 2b				
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				
a	Subtract line 6c from line 6b Taxable amount - see page 27 of the instructions				
е	Undistributed income for 2008 Subtract line				
	4a from line 2a Taxable amount - see page				
	27 of the instructions				
f	Undistributed income for 2009 Subtract lines				
	4d and 5 from line 1. This amount must be				
7	distributed in 2010				
•	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (see page 27 of the				
8	instructions)				
ŭ	applied on line 5 or line 7 (see page 27 of the				
	instructions)				
9	Excess distributions carryover to 2010.	6 504			
	Subtract lines 7 and 8 from line 6a	6,524.			
	Analysis of line 9				
	Excess from 2005				
	Excess from 2006				
	Excess from 2007				
	Excess from 2008				
е	Excess from 2009 6,524.				

Pa	rt XIV Private Oper	rating Foundations	(see page 27 of the	instructions and Pa	art VII-A, question 9)	NOT APPLICABI
1 a	if the foundation has				rating	
	foundation, and the ruling	g is effective for 2009, e	nter the date of the ruling		. ▶	
þ	Check box to indicate wh	<u></u>	private operating found		1 4942((j)(3) or 4942(j)(5)
2 a	Enter the lesser of the ad-	Tax year		Prior 3 years		(e) Total
	justed net income from Part I or the minimum investment	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(0) (0.11
	return from Part X for each					
	year listed				1	
Þ	85% of line 2a				 	
С	Qualifying distributions from Part XII, line 4 for each year listed .					
đ	Amounts included in line 2c not					
	used directly for active conduct of exempt activities					
е	Qualifying distributions made				1-7	
	directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the	1				
а	"Assets" alternative test - enter					
_	(1) Value of all assets					
	(2) Value of assets qualifying					
	under section 4942(j)(3)(B)(i)					
þ	"Endowment" alternative test- enter 2/3 of minimum invest-					
	ment return shown in Part X,					
	line 6 for each year listed					
С	"Support" alternative test - enter					
	(1) Total support other than gross investment income			1		
	(interest, dividends, rents, payments on securities					
	toans (section 512(a)(5))					
	or royalties)			 		
	public and 5 or more exempt organizations as					
	provided in section 4942					
	(j)(3)(B)(III) (3) Largest amount of sup-			1		
	port from an exempt organization					
	(4) Gross investment income.					
Pa	rt XV Supplement	ary Information (C	omplete this part	only if the found	lation had \$5,000	or more in assets
		during the year - se		structions.)		
1	Information Regarding	•		a than 20/ af the tate		
а	List any managers of before the close of any	tax year (but only if the	ney have contributed in or	nore than \$5,000). (S	See section 507(d)(2))
		HEL LEFKOVITS				
b	List any managers of ownership of a partner	the foundation who ship or other entity) o	own 10% or more o f which the foundation	f the stock of a corp n has a 10% or greate	oration (or an equally r interest.	y large portion of the
	N/A					
2	Information Regarding	g Contribution, Grant	, Gift, Loan, Scholarsl	nip, etc., Programs:		
	Check here ► X If t unsolicited requests forganizations under ot	or funds If the foun	dation makes gifts, g	grants, etc (see page	itable organizations a e 28 of the instruction	and does not accept ons) to individuals or
a	The name, address, a	<u></u>			oe addressed	
b	The form in which app	lications should be su	bmitted and information	on and materials they	should include.	
С	Any submission deadle	nes		· · · · · · · · · · · · · · · · · · ·		
d	Any restrictions or lifactors.	mitations on awards	such as by geogra	aphical areas, charita	able fields, kinds of	institutions, or other

Part XV Supplementary Information (co 3 Grants and Contributions Paid Duri	ontinued)	royad for E	uturo Baymont	1 290 11
Recipient	If recipient is an individual,			T
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
	or substantial contributor	recipient		
a Paid during the year				
ATTACHMENT 10		1		
ATTACHMENT TO				
		ļ		
		1		
		1		
		1		1
		İ		
				:
		}		
Total			▶ 3a	136,436.
b Approved for future payment				
				:
	ĺ			
Total	L	<u> </u>		
Total	<u> </u>	<u> </u>	▶ 3b	

nter gross	amounts unless otherwise indicated	Unrel	ated business income	Excluded by	section 512, 513, or 514	(e)
1 Program	n service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See page 28 of the instructions)
	<u>-</u>					
е						
f						
g Fees	and contracts from government agencies					
Member	ship dues and assessments					<u> </u>
3 Interest o	on savings and temporary cash investments					
Dividend	ds and interest from securities			14	34,547.	
Net rent	al income or (loss) from real estate					
	t-financed property					
b Not	debt-financed property					
	l income or (loss) from personal property					
	vestment income					
8 Gain or (I	loss) from sales of assets other than inventory			18	51,977.	
9 Net inco	me or (loss) from special events					
O Gross p	rofit or (loss) from sales of inventory			_		
1 Other re						
ь <u>Ехс</u>	CISE TAX REFUND			18		
c						
d						
е					0.5.504	
	Add columns (b), (d), and (e)				86,524.	0.5.50.
3 Total. Ad	dd line 12, columns (b), (d), and (e)				¹³	86,524
See worksi Part XVI-	B Relationship of Activities				· 	
Line No. ▼	Explain below how each activithe accomplishment of the fo	ity for whi	ch income is report	ed in column	(e) of Part XVI-A con	tributed importantly such purposes) (Se
	page 29 of the instructions.)					
	NOT	APPLIC	ABLE			
			·			
						·
					 	
					· · • • • • • • • • • • • • • • • • • •	
						
						
 .				_		
			.			- -

- orm	990-PF										00733				age 13
Pa	rt XVII		Information F Exempt Organ	tegarding nizations	g Trans	fers To	and T	ransa	ctions	and R	elationship	s With M	Nonc	harit	table
1	in se	ction !	ganization directly 501(c) of the Co	de (other t	han secti	on 501(c)(3	3) orga	nizations	or in	any othe section	er organization 527, relating t	described o political		Yes	No
а	organı Transi	izations fers fro	;? om the reporting fo	undation to	a nonchar	itable exempl	t organiz	ation of						ĺ	
			. .										1a(1)		Х
	(2) O	ther as	sets		. .								1a(2)		X
b	Other														
			assets to a nonch										1b(1)	<u> </u>	X
			es of assets from a										1b(2)	<u> </u>	X
			f facilities, equipme										1b(3)	<u> </u>	X
			sement arrangemer												$\frac{\Lambda}{X}$
			r loan guarantees .												$\frac{\lambda}{X}$
c		(6) Performance of services or membership or fundraising solicitations									\vdash	X			
ď		Sharing of facilities, equipment, mailing lists, other assets, or paid employees								fair i					
			e goods, other a									-			
			y transaction or												
								-					 .		
(a) l	Ine no	(b) N/	Amount involved	(c) Name	of nonchar	ritable exempt	organiza	tion	(d) De	scription o	f transfers, transac	tions, and shar	nng arra	ngeme	nts
		147	A						N/A						
		 													
												· · · · · · · · · · · · · · · · · · ·			
														**	
									<u> </u>						
		<u> </u>				~									
		 													
					 ·										
														-	
2a	Is the	found	dation directly or	ndirectly af	filiated wit	th, or relate	ed to, c	one or n	nore tax-	exempt c	organizations de	scribed in			
	section	n 501(c) of the Code (othe	er than secti	on 501(c)(3)) or in sect	tion 527	·?				[Y6	s []	No
b	If "Yes		plete the following	schedule											
		(a)	Name of organization			(b) Type	of organ	zation			(c) Descript	ion of relations	ship		
										- .					
					-			-							
															
	Under	penaltie	es of perjury, I decla	re that I have	e examined	this return, ir	ncluding	accompa	nying sche	edules and	statements, and	to the best o	f my ki	nowled	ge and
	beliet,	it is tru	e, correct, and comp	lete Declarati	on of prepa	arer (other tha	an taxpay	er or fidu	ıcıary) ıs b	pased on a	II information of w	hich prepare	r has ar	ıy knov	wledge
	_						/				_ 📐				
<u>e</u>	Sı	gnature	of officer or trustee	mar	e Le	MAN	MA.		Date 5	11211	Title !	RAGIA	46	25 %	
Sign Here						0	0 vQ	Date	7	Check	cuf	Preparer's number (Se			
티	ar's	Prepa	ırer's	1. /	/_					self-e	mployed ▶	page 30 of t	he instr	uctions)
တ	Paid epare se On	signa	ture	2/2		20110 0112			12/201	10		P00015			
	Paid Preparer's Use Only		s name (or yours if mployed), address,	$\frac{BRA1}{299}$		NENSCHIN WAY SUIT					EIN ▶	13-3382	567		
		1	mpioyea), address, IP code		YORK,	WAY SULT	ır p(0	1.0	007	Db	212-2	19-0	220	
- 1				£ A T → AA	TOWN	IA T			τ.	, , , , ,	i Phone no	, <u></u>	エシーひ	~ ~ U	

Phone no 212-219-0220

10007

NEW YORK,

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 LEFKOVITS FAMILY FOR	Employer identification number				
	UNDATION	22-3266735			
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 for	undation			
	527 political organization				
Form 990-PF	X 501(c)(3) exempt private foundation				
	4947(a)(1) nonexempt charitable trust treated as a private found	ation			
	501(c)(3) taxable private foundation				
-	covered by the General Rule or a Special Rule.), (8), or (10) organization can check boxes for both the General Rule and a	Special Rule See			
	filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 one contributor. Complete Parts I and II	or more (in money or			
Special Rules					
sections 509(a)(1) a	(3) organization filing Form 990 or 990-EZ that met the 331/3% support to and 170(b)(1)(A)(vi), and received from any one contributor, during the year 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1h or (iii) Form 990-EZ, line 1h or (iii) Form 990-EZ, line 1h or (iiii) Form 990-EZ, line 1h or (iiiiiiiii) Form 990-EZ, line 1h or (iiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii	ar, a contribution of the greater			
the year, aggregate)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from contributions of more than \$1,000 for use exclusively for religious, charitaes, or the prevention of cruelty to children or animals. Complete Parts I, II, a	ble, scientific, literary, or			
For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year.					
	is not covered by the General Rule and/or the Special Rules does not file:				
	st answer "No" on Part IV, line 2 of its Form 990, or check the box on line I F, to certify that it does not meet the filing requirements of Schedule B (Fo				
For Privacy Act and Paperwork Redu	action Act Notice, see the Instructions Schedule	B (Form 990, 990-EZ, or 990-PF) (2009)			

for Form 990, 990-EZ, or 990-PF.

Name of organization

LEFKOVITS FAMILY FOUNDATION

Employer identification number 22-3266735

(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
1	IMRE LEFKOVITS 30 S. ADELAIDE AVE HIGHLAND PARK, NJ 08904	\$	Person X X X X X X X X X X
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
		. . \$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
		. . \$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
		- \$ - \$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
		- - \$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a)	(b)	(c) Aggregate contributions	(d)
No.	Name, address, and ZIP + 4		Type of contribution
		- \$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

Page of Part II of

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

Name of organization LEFKOVITS FAMILY FOUNDATION

Employer identification number

22-3266735

Part !!	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	1300 SHARES CISCO SYSTEMS INC. 300 SHARES MEDCO HEALTH SOLUTIONS		12/14/2009
(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
		\ \\$ \	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received

JSA 9E1254 1 000

Schedule 8 (Form 990, 990-EZ, or 990-PF) (2009)

FORM 990PF, PART I - DIVIDENDS AND INTEREST FROM SECURITIES

LEFKOVITS FAMILY FOUNDATION

NET INVESTMENT INCOME	268. 32,693. 1,586.
REVENUE AND EXPENSES I PER BOOKS	268. 32,693. 1,586.
	TOTAL
DESCRIPTION	MERRILL LYNCH MERRILL LYNCH STATE OF ISRAEL BONDS

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FEES
- ACCOUNTING
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PART I
H

CHARITABLE PURPOSES	1,550.	1,550.
ADJUSTED NET INCOME		0.
NET INVESTMENT INCOME	1,550.	1,550.
REVENUE AND EXPENSES PER BOOKS	3,100.	3,100.
		TOTALS
DESCRIPTION	ACCOUNTING FEES	

FORM 990PF, PART I - TAXES

REVENUE AND EXPENSES

DESCRIPTION

PER BOOKS

FOREIGN TAXES WITHHELD

205.

TOTALS

205.

OTHER EXPENSES FORM 990PF, PART I -

EXPENSES PER BOOKS REVENUE AND

NET INVESTMENT

166. INCOME

166.

TOTALS

DESCRIPTION BANK CHARGES

166.

166.

CORPORATE STOCK PART II FORM 990PF,

LEFKOVITS FAMILY FOUNDATION

ENDING <u>FMV</u>	67,760. 294,462. 69,880. 102,000. 30,677. 27,405. 365,760. 15,704. 171,710. 47,060. 19,310. 19,310. 117,600. 38,552. 21,101. 7,123. 27,246.
ENDING BOOK VALUE	65,277. 160,369. 147,900. 190,681. 42,667. 21,940. 41,348. 36,400. 22,449. 18,850. 40,940. 64,150. 80,160. 19,656. 25,043. 35,394. 10,014.
DESCRIPTION	ADV. MICRO DEVICES 7000 JP MORGAN CHASE 1007 CISCO SYSTEMS INC 12300 EMC CORP MASS 4000 GENERAL ELECTRIC 8000 INTEL CORP. 5000 MEDCO 480 MEDCO 480 MICROSOFT CORP 12000 ALTRIA 800 ORACLE 7000 PROCTOR & GAMBLE 975 RED HAT INC 1000 SYMANTEC 843 NOKIA 2500 HALLIBURTON COMPANY CORNING 1000 FLUOR 2000 ARCHER DANIELS KRAFT 553 CENTENE CORP 3000 ELAN CORP 3000 PHILIP MORRIS INTL INC 800 COLUMBIA MARSICO 1301.406 EATON VANCE LARGE CAP 1704 FEDERATED KAUFMAN FD 4774.963 FIDELITY ADV LEVERAGED 267.938 HENDERSON INT'L 1427.929

ATTACHMENT

PAGE 22

STOCK	
CORPORATE	
1	
II	
PART	
990PF,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
FORM	

LEFKOVITS FAMILY FOUNDATION

ATTACHMENT 5 (CONT'D)	ENDING
ATTACH	ENDING BOOK VALUE
FORM 990PF, PART II - CORPORATE STOCK	DESCRIPTION

15,285. 47,950.

14,457. 72,000.

1,515,190.

TOTALS

JANUS ADVISER PERKINS 866.773 SECTOR FINANCIAL

2,118,709.

2

LEFKOVITS FAMILY FOUNDATION

- CORPORATE BONDS PART II FORM 990PF,

DESCRIPTION

STATE OF ISRAEL

ENDING ATTACHMENT BOOK VALUE ENDING

49,030.

49,030.

TOTALS

49,030.

49,030.

ATTACHMENT 6

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LEFKOVITS FAMILY FOUNDATION

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LOANS AND EXCHANGE OTHER RECEIVABLE DESCRIPTION

_	
LNEL	
A.I.T.ACHMEI	
4	

ENDING	FMV
ENDING	BOOK VALUE

000	409.	24.616.	

289. 24,616.

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24,905.

FORM 990PF, PART VII-A, LINE 8B - EXPLANATION OF NON-FILING

NJ DOES NOT REQUIRE THE FOUNDATION TO FILE A COPY OF 990-PF

5

ATTACHMENT

0

TRUSTEE

WESLEY HILLS, NY 10952

DEBBIE BERGER

8 SUHL LANE

0

TRUSTEE

11 FAIRHILL ROAD EDISON, NJ 08817

SUSAN WIESEL

GRAND TOTALS

0

TRUSTEE

HIGHLAND PARK, NJ 08904

RACHEL LEFKOVITS 30 SO ADELAIDE AVE

0

TRUSTEE

HIGHLAND PARK, NJ 08904

30 SO ADELAIDE AVE

IMRE LEFKOVITS

NAME AND ADDRESS

COMPENSATION

TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION

47004R F482 5/12/2010

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ATTACHMENT

FORM 990PE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

FORM 990FF, FARI AV - GRANIS AND CONTRIBUTIONS FAID DURING THE TEAK	ID DUKING THE TEAK		ATTACHMENT 10
	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		•
	AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
RARRI DAVCALH RAVMON VECHTUA	NON	CHARTTARLE	092
2 HARRISON STREET	CHARITY		
EDISON, NJ 08817			
CONG AHAVAS ACHIM	NONE	CHARITABLE	104,697
216 S FIRTST AVE	CHARITY		
HIGHLAND PARK, NJ 08904			
CONG OHR TORAH	ONE	CHARITABLE	750
48 EDGEMONT ROAD	EXEMPT		
EDISON NJ 08817			
RABBI JACOB JOSEPH YESHIVA	NONE	CHARITABLE	1,000
ONE PLAINFIELD AVE	EXEMPT		
EDISON, NJ 08817			
AIPAC	NONE	CHARITABLE	150
PHILADELPHIA, PA	CHARITABLE		
	1		
MISCELLANEOUS SMALL CONTRIBUTIONS	NONE	CHARITABLE	150
	EXEMPT		

ATTACHMENT 10 (CONT'D)

TION	1,000	1,000	75	300	180	200
PURPOSE OF GRANT OR CONTRIBUTION	CHARITABLE	CHARITABLE	CHARITABLE	CHARITABLE	CHARITABLE	CHRARITABLE
RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT	NONE	NONE	NONE	NONE	NONE	NONE
	EXEMPT	EXEMPT	EXEMPT	EXEMPT	EXEMPT	EXEMPT
RECIPIENT NAME AND ADDRESS	YESHIVA TIFERES YISROEL	RPRY	MESIFTA TIFERES JERUSALEM	ADL	MOSHE AARON YESHIVA HS	AMERICAN FRIENDS OF YAD ELIEZER
	1271 EAST 35 STREET	2 HARRISON STREET	145 EAST BROADWAY	605 3RD AVENUE	34 CHARLES STREET	1102 EAST 26 STREET
	BROOKLYN, NY 11230	EDISON, NJ 08817	NEW YORK, NY 10002	NEW YORK, NY 10158	SAND RIVER, NJ 08882	BROOKLYN, NY 11210

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ATTACHMENT 10 (CONT'D)

AMIT

ATTACHMENT 10 (CONT.D)

LEFKOVITS FAMILY FOUNDATION

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YEAR	
THE	
DURING	-
PAID	
GRANTS AND CONTRIBUTIONS PAID DURING THE	
AND	
GRANTS	
	1
⋧	1
PART XV	
FORM 990PE,	

AMOUNT	200	1,000	200	150	1,000	125
PURPOSE OF GRANT OR CONTRIBUTION	CHARITABLE	CHARITABLE	CHARITABLE	CHARITABLE	CHARITABLE	CHARITABLE
RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT	NONE EXEMPT	NONE EXEMPT	NONE EXEMPT	NONE EXEMPT	NONE EXEMPT	NONE EXEMPT
RECIPIENT NAME AND ADDRESS	CHABAD HOUSE LUBAVITCH 770 EASTERN PARKWAY BROOKLYN, NY	CONGREGATION BAIS JOSEPH OF LAKEWOOD LAKEWOOD, NJ 08701	CONG POILE ZEDEK 145 NELSON STREET NEW BRUNSWICK, NJ 08903	KUPATH RAMBAHN KOLLEL POLIN	TIFERET ISRAEL 7300 HART LANE AUSTIN, TX 78731	TZEDAKA VECHESED BROOKLYN, NY 11204

v 09-6 1

ATTACHMENT 10 (CONT, D)

AMOUNT	6.0	25	90	100	05	7.5
PURPOSE OF GRANT OR CONTRIBUTION	CHARITABLE	CHARITABLE	CHARITABLE	CHARITABLE	CHARITABLE	CHARITABLE
RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT	NONE EXEMPT	NONE EXEMPT	NONE EXEMPT	NONE EXEMPT	NONE EXEMPT	NONE EXEMPT
RECIPIENT NAME AND ADDRESS	MESORAH HERITAGE FUND 4401 2ND AVENUE BROOKLYN, NY	HIGHLAND PARK FIRST AID SQUAD HIGHLAND PARK, NJ	KOSSOFF MATZO FUND	KEREN OHR 350 7TH AVENUE NEW YORK, NY 10001	RWJ UNIV HOSP FOUNDATION ROUTE 1 COLLEGE RD PRINCETON, NJ 08543	GEN ISRAEL ORPHANS HOME 132 NASSAU STREET NEW YORK, NY 10038

ATTACHMENT 10 (CONT.D)

SHC

FOUNDATION	
FAMILY	
LEFKOVITS	

22-3266735

FORM 990PE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

ATTACHMENT 10 (CONT, D) AMOUNT PURPOSE OF GRANT OR CONTRIBUTION CHARITABLE CHARITABLE RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR FOUNDATION STATUS OF RECIPIENT EXEMPT EXEMPT NONE NONE UNIV OF PA BOARD OF TRUSTES RECIPIENT NAME AND ADDRESS YI OF MONSEY MONSEY, NY 10952

20,000

20

TOTAL CONTRIBUTIONS PAID

136,436

PAGE 34 ATTACHMENT 10

V 09-6 1

47004R F482 5/12/2010

SCHEDULE D (Form 1041)

Department of the Treasury Internal Revenue Service

Capital Gains and Losses

► Attach to Form 1041, Form 5227, or Form 990-T. See the instructions for Schedule D (Form 1041) (also for Form 5227 or Form 990-T, if applicable).

OMB No 1545-0092

2009

Employer identification number Name of estate or trust 22-3266735 LEFKOVITS FAMILY FOUNDATION Note: Form 5227 filers need to complete only Parts I and II Short-Term Capital Gains and Losses - Assets Held One Year or Less (e) Cost or other basis (f) Gain or (loss) for (b) Date acquired (a) Description of property (c) Date sold (d) Sales pnce (see page 4 of the the entire year Subtract (e) from (d) (Example 100 shares 7% preferred of "Z" Co) (mo . dav. vr) (mo , day, yr) instructions) 1a **b** Enter the short-term gain or (loss), if any, from Schedule D-1, line 1b 1b Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824 Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts 3 3 Short-term capital loss carryover Enter the amount, if any, from line 9 of the 2008 Capital Loss 4 Net short-term gain or (loss). Combine lines 1a through 4 in column (f) Enter here and on line 13, column (3) on the back. Long-Term Capital Gains and Losses - Assets Held More Than One Year Part II (e) Cost or other basis (f) Gain or (loss) for (a) Description of property (b) Date acquired (c) Date sold the entire year (d) Sales price (see page 4 of the (Example 100 shares 7% preferred of "Z" Co) (mo, day, yr) (mo, day, yr) Subtract (e) from (d) instructions) 6a 74,479. 6Ь Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824 7 Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts 8 9 Gain from Form 4797, Part I 10 10 Long-term capital loss carryover Enter the amount, if any, from line 14 of the 2008 Capital Loss 11 Net long-term gain or (loss). Combine lines 6a through 11 in column (f). Enter here and on line 14a, 74,479. column (3) on the back

JSA 9F1210 2 000

For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

Schedule D (Form 1041) 2009

Sche	dule D (Form 1041) 2009			Page 2
Pai	Summary of Parts I and II	(1) Beneficiaries'	(2) Estate's	
	Caution: Read the instructions before completing this part	(see page 5)	or trust's	(3) Total
13	Net short-term gain or (loss)			
14	Net long-term gain or (loss):			
а	Total for year14a		· · · · · · · · · · · · · · · · · · ·	74,479.
	Unrecaptured section 1250 gain (see line 18 of the wrksht) 14b			
С	28% rate gain			
	Total net gain or (loss). Combine lines 13 and 14a ▶ 15			74,479.
Note	e: If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4 (or Form 990- int V, and do not complete Part IV. If line 15, column (3), is a net loss, complete Part IV a	-T, Part I, line 4a) If line	s 14a and 15, column	(2), are net gains, go
		ind the Capital Loss Car	ryover vvorksneet, as r	necessary
	t IV Capital Loss Limitation			
16	Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, Part I, line 1040, and 104		1 1	,
a Note	The loss on line 15, column (3) or b \$3,000 If the loss on line 15, column (3), is more than \$3,000, or if Form 1041, page 1, line		70 34) is a loss comm)
Carry	over Worksheet on page 7 of the instructions to figure your capital loss carryover	e 22 (Oi i Oilli 990-1, II.	ne 54), is a loss, comp	nete the Capital Loss
Pai	Tax Computation Using Maximum Capital Gains Rates			<u></u>
	n 1041 filers. Complete this part only if both lines 14a and 15 in column (2		nount is entered in F	Part I or Part II and
	e is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is more than			
Cau	tion: Skip this part and complete the worksheet on page 8 of the instructions in ther line 14b, col. (2) or line 14c, col. (2) is more than zero, or	ıf		
	oth Form 1041, line 2b(1), and Form 4952, line 4g are more than zero			
	n 990-T trusts. Complete this part only if both lines 14a and 15 are gain	s, or qualified divide	ends are included in	n income in Part I
of F	orm 990-T, and Form 990-T, line 34, is more than zero. Skip this part and	complete the works	sheet on page 8 of	the instructions if
eithe	er line 14b, col (2) or line 14c, col. (2) is more than zero.			
17	Enter taxable income from Form 1041, line 22 (or Form 990-T, line 34)	17		
18	Enter the smaller of line 14a or 15 in column (2)			
	but not less than zero			
19	Enter the estate's or trust's qualified dividends			
	from Form 1041, line 2b(2) (or enter the qualified		1	
	dividends included in income in Part I of Form 990-T) 19			
20	Add lines 18 and 19			
21	If the estate or trust is filing Form 4952, enter the			
	amount from line 4g, otherwise, enter -0 ▶ 21	_		
22	Subtract line 21 from line 20. If zero or less, enter -0-	22		
23	Subtract line 22 from line 17 If zero or less, enter -0-	23		
24	Enter the smaller of the amount on line 17 or \$2,300	24		
25	Is the amount on line 23 equal to or more than the amount on line 24?			
	Yes. Skip lines 25 and 26; go to line 27 and check the "No" box.			
0.0	No. Enter the amount from line 23	25		
26 27	Subtract line 25 from line 24	26		
21	Yes. Skip lines 27 thru 30, go to line 31 No. Enter the smaller of line 17 or line 22	27		
	1 es. Skip lines 27 thru 30, go to line 31	27		
28	Enter the amount from line 26 (If line 26 is blank, enter -0-)	28		
	Territor the amount from the 20 (if the 20 is blank, the 1-0-)	20		
29	Subtract line 28 from line 27	29		
30	Multiply line 29 by 15% (15)		30	
31	Figure the tax on the amount on line 23 Use the 2009 Tax Rate Sche	d Trusts		
	(see the Schedule Ginstructions in the instructions for Form 1041)			
		• • • • • • • • • • • •	· · · · · - · - 	
32	Add lines 30 and 31		32	
33	Figure the tax on the amount on line 17 Use the 2009 Tax Rate Sche	edule for Estates an	d Trusts	
	(see the Schedule Ginstructions in the instructions for Form 1041)		33	<u></u>
34	Tax on all taxable income. Enter the smaller of line 32 or line 33 here a	nd on Form 1041, §	Schedule	
	G. line 1a (or Form 990-T. line 36)		34	

	estate or trust as shown on Form 1041 Do not enter name and employer identification number if shown on the other side FKOVITS FAMILY FOUNDATION				Employer identification number 22-3266735		
Part II Long-Term Capital Gains an		s Held More Tha	n One Year	32 32337.			
(a) Description of property (Example 100 sh 7% preferred of "Z" Co)	(b) Date acquired (mo , day, yr)	(c) Date sold (mo , day, уг)	(d) Sales price (see page 4 of the instructions)	(e) Cost or other basis (see page 4 of the instructions)	(f) Gain or (loss) Subtract (e) from (d)		
FLUOR CORP 1000SH	07/25/2001	08/26/2009	55,800.	18,439.	37,361		
MICROSOFT 2000SH	07/21/1995	08/26/2009	48,659.	11,541.	37,118		
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		••	-				
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				<u> </u>			
				<u> </u>			
	-						
	-						
							
				.			
6b Total. Combine the amounts in colum	nn (f) Enter here a	nd on Schedule D,	line 6b	<u></u>	74,479		

LEFKOVITS FAMILY FOUNDATION

FORM 990-PF - PART IV

CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME								
Kind of 8			Desc	ription		or Date D acquired		Date sold
Gròss sale price less expenses of sale	Depreciation allowed/ allowable	Cost or other basis	FMV as of 12/31/69	Adj basis as of 12/31/69	Excess of FMV over adj basis		Gain or (loss)	
		FLUOR CORP		,, ,, ,		D		08/26/200
F.F. 000		PROPERTY TY		TIES				00/20/200
55,800.		18,439.					37,361.	
		MICROSOFT 2 PROPERTY TY		TIES		D	07/21/1995	08/26/200
48,659.		11,541.					37,118.	
\mai\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	000							
TAL GAIN(L	OSS)		· · · · · · · · · · · · · · · · · · ·	• • • • • • • • • • • • • • • • • • • •	• • • • • • •		74,479.	
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