

### See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



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

		0101100 00		TOTO: THE TOURIGHT			30 to 50 p. j. c.				Ting requirement		
				or tax year beg	inning			<del></del>	and end	<u> </u>			, 20
G	Che	ck all t	hat apply	Initial retui	'n	<u> </u>	nitial return	of a former p	ublic chai	rity	į	] [	Final return
		_		Amended	return		Addre	ss change		1	Name change		
			Name of for	undation							A Employer iden	tificat	on number
į	Jse ti	ne IRS	THE MYR	ON AND ELAI	NE AD	LER PR	IVATE FO	OUNDATION					
	lat	el.	PRIVATE	FOUNDATION	INC.						22	2-3	516532
(	Other	wise,	Number and	street (or P O box	number if	mail is not de	elivered to street	t address)	Room/su	ııte	B Telephone number	(see pa	ge 10 of the instructions)
	pr	int	C/O ELA	INE ADLER,	MYRON	MANUF.	ACTURING	CORP.					
	or t	ype.	<b>S</b>	WOOD AVENUE							(:	201	) 843-6464
		pecific	L	, state, and ZIP co					<del></del>		C If exemption app		<del></del>
lı	nstru	ctions.	Oily or town	, state, and En Co	<b>.</b>						pending, check h	ere .	· · · · · · · . [
			MAVMOOD	, NJ 07607							D 1 Foreign organ		
_				· ,			<del></del>				2 Foreign organ 85% test, ched		
ᆫ	_	• •	_	ation X Secti							computation		
1				nexempt charitable				ivate founda			E If private founds	ation sta	atus was terminated
I				l assets at end		_		ash Acc	rual		under section 50	7(b)(1)	(A), check here . >
	-	-	m Part II, co			ther (spec					F If the foundation	าเรเกิ	a 60-month termination
	<u> </u>	▶ \$		69,535.	<del></del>	column (a	i) must be or	cash basis )			under section 50	7(b)(1)	(B) check here . >
Ŀ	art	Analy	sis of Reve	enue and Expens	es (The	(a) Rev	enue and	(b) \$104			(a) Advisad and		(d) Disbursements
				columns (b), (c), an equal the amount		exper	nses per	(b) Net inve		۱ (	c) Adjusted net income		for charitable purposes
				ge 11 of the instruc		bo	ooks						(cash basis only)
	1	Contribu	tions, gifts, grants	etc , received (attach sci	hedule) .		256,100.	• • • • • • • • • • • • • • • • • • • •				-	
i	2	Check I	If the	foundation is not req	urred to		······································	,		,			
	3		attach	Sch B			22.		22.			1	ATCH 1
	-		•	est from securities			71,558	<del></del>	1,558.		<del> </del>		ATCH 2
1	4							<u> </u>				$\dashv$	711 011 . 2
												+	
			-	oss)			-68,690						
eune	6a b	Net gan	n or (loss) from ales price for all	sale of assets not on	ine 10		00,000	<del> </del>		-			
/er		assets o	on line 6a		<del></del>	<del></del>	<del></del>		1,878.	ļ	<del></del>		<del></del>
Ke	7	-	-	ome (from Part IV,	line 2) .	<del></del>		<del></del>	1,070.		<del></del>	-	<del></del>
	8	Net sh	ort-term capit	algaın	اسند					<u> </u>			<del> </del>
	9	Income	e modification ales less retums	IS . i	··· 1						<del></del>		
	TV a	and allo	wances	FIVEL	اں۔			ļ					
	b	Less C	ost of goods sold	RECEIVED	_/\&\		. <u>.</u>			L		_ -	
	¢				10.							_	
	11	Other	income (attac	u equequije) 📜 🏣	/a	<u> </u>							
	12	Total.	Add lines Ath	rough 11			258,990		3,458.				
	13	Compe	nsation of office	ers directors ituatièes	ete		0	ł					
	14	Other	employee sala	aries and wages .									
ses	15			loyee benefits				]		1			
٥			ees (attach so										
Expenses	b	Accou	nting fees (at	tach schedule) ATC	н 3		4,000		0.			0.	4,000
				ees (attach schedu			6,606		6,606.		<del> </del>	1	
at i	17			CHMENT 5	,		232	1	232.		· · · · · · · · · · · · · · · · · · ·		<del></del>
SIL	 -1Ω			) (see page 14 of the ins	* * *		8,063	· ·	1,344.	$\vdash$		十	
š	17 8 9 0 1 2 3 4 5 6 7 a	-						<u> </u>	,	-		+	<del></del>
\$	אל בנד	•	•	n schedule) and de	•			<del> </del>		<del>                                     </del>	<del></del>		<del></del>
فر	20	•	•				- <del></del>	<del> </del>					
Ē.	21			, and meetings				<del> </del>		-	<del></del>		
D, EV	22		•	itions				<del> </del>		-	<del> </del>		<del></del>
5	23		. ,	ach schedule)				<del> </del>				-	
Ę,	24		-	d administrative ex	•		10 001	(	0 100			,	4 000
Ś	Ĭ	Add lir	es 13 throug	h 23		ļ <u>.</u>	18,901	<b>!</b>	8,182.			0.	4,000
Ź	25	Contril	outions, gifts,	grants paid $\dots$			271,400	<u> </u>	0 10-	Ļ		ᆚ-	271,400
7	26	Total exp	enses and disbu	rsements Add lines 2	4 and 25	ļ <u>.</u>	290,301	<u> </u>	8,182.	<u> </u>		0.	275,400
è	37	Subtra	ct line 26 froi	m line 12								1	
Ü	a	Excess	of revenue over ex	xpenses and disbursem	ents		-31,311	<u>}</u>					
	b	Net in	estment inc	ome (if negative, ei	nter -0-)			1	5,276.			$_{\perp}T$	
				e (if negative, ente							-0	-	

D	art II	Ralance Sheets	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End o	f year
_		Dalance Offeets	amounts only (See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
7	1	Cash - non-interest-bear	ing	-46,183.	97,375.	97,375.
1			cash investments			
	3	Accounts receivable				
1		Less allowance for dou	ubtful accounts			
	4					
1		Less allowance for dou	ubtful accounts	j	I	
İ	5			h		
- }	6		officers, directors, trustees, and other			ATCH 7
			ach schedule) (see page 16 of the instructions)	3,152.	2,200.	2,200.
	7		receivable (attach schedule)		<del></del>	
- {	•		ibtful accounts			
	8					
Assets			se			
88			te government obligations (attach schedule)			
٩			e stock (attach schedule) ATCH 8		4,126,029.	3,669,960.
			e bonds (attach schedule)		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	3,003,7500.
	11	Investments - land, building and equipment basis Less accumulated deprecia	s, <b>&gt;</b>			
	12	(attach schedule)	loans		<del></del>	<del></del>
ļ	12	Investments other (att	ach schodula)			<del></del>
	14	equipment basis Less accumulated deprecia	<b>&gt;</b>		-	
	15	(attach schedule)	<b>&gt;</b> );			
-[	16		npleted by all filers - see the		<del></del>	
	10	•	page 1, item ()	4,256,243.	4,225,604.	3,769,535.
$\dashv$	17		accrued expenses	<del></del>		0,,,000
	18					
<sub>s</sub>	19					
Liabilities	20		ors, trustees, and other disqualified persons		<del></del>	
Ē	21		otes payable (attach schedule)			
밀	22		e >)			
	22	Other habilities (describ	•/	<del></del>	· · · · · · · · · · · · · · · · · · ·	
	23	Total liabilities (add line	es 17 through 22)			
$\exists$			llow SFAS 117, check here ▶			
			24 through 26 and lines 30 and 31.			
တ္တ		·	_			,
2	24				<del></del>	· ·
aga	25	•		<del></del>		
8	26	· ·		<del>  -</del>		
5			not follow SFAS 117, nplete lines 27 through 31. ► X			
4	24 25 26			4,256,243.	4,225,604.	
S	28		ncipal, or current funds	1,230,213.	1/225/001.	
Net Assets	29	•	ulated income, endowment, or other funds	0.	0.	
As	30	• • • • • • • • • • • • • • • • • • • •	d balances (see page 17 of the		<del></del>	
let	30		· · ·	4,256,243.	4,225,604.	
~	31		t assets/fund balances (see page 17	1,230,213.	1,223,001.	
	31		t assets/fulld balances (see page 17	4,256,243.	4,225,604.	
	o et II		anges in Net Assets or Fund	<del></del>	4,223,004.	
	_				t caree with	<del></del>
1			alances at beginning of year - Part II	• • •		1 256 242
_	_			<i></i>		4,256,243.
2	Ente	r amount from Part I,	line 27a ded in line 2 (itemize) ► ATTACH	······································	2	-31,311.
			ted in line 2 (itemize) $\blacktriangleright$ $A'''''ACF$	imeni 9		672.
		lines 1, 2, and 3			4	4,225,604.
5	Decr	eases not included in	alances at end of year (line 4 minus		5	
<u>6</u>	Tota	net assets or fund b	alances at end of year (line 4 minus	iine 5) - Part II, column (b	), line 30 6	4,225,604.

Ρ		s and Losses for Tax on Inv d describe the kind(s) of property sold (		(b) How	(c) Date	(d) Date sold
	• •	prick warehouse, or common stock, 200	<del>-</del>	P-Purchase D-Donation	(mo , day, yr )	(mo, day, yr)
1a	SEE PART IV SCHE	EDULE				
b	)					
_c	<u> </u>			<u> </u>		
d	<u> </u>			ļ	ļ	<del> </del>
<u>_e</u>				<b></b>	l	<u> </u>
_	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (le (e) plus (f) min	
_a				<del> </del>		<del></del>
				<del> </del>		<del>_</del>
_0				<del> </del>		
e				<del> </del>		
		showing gain in column (h) and own	ned by the foundation on 12/31/69	(1)	Gains (Col (h) (	nam minue
	(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	<b>⊣</b> \'7	(k), but not less Losses (from c	than -0-) or
a	l			<u> </u>		
t						
	;					
d	<u> </u>					
<u>e</u>	<u> </u>			ļ	<del></del>	
2	Capital gain net income or	r (not canital loce)	gain, also enter in Part I, line 7 (loss), enter -0- in Part I, line 7	2		-68,690.
3	•	n or (loss) as defined in sections 12				
	•	, line 8, column (c) (see pages 13	' '			
		nder Section 4940(e) for Redu		3	<del></del>	
W		the section 4942 tax on the distrib		ase perio	d? [	Yes X No
_		not qualify under section 4940(e) ount in each column for each year		oforo mol	una esv estres	
	(a)			elore mar	(d)	
(	Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of nonchantable-use assets	1	Distribution (col (b) divided b	
	2008	217,396.	3,864,330.	†	(00. (0) 000_0	0.056257
	2007	657,769.	3,294,567.	1		0.199653
	2006	153,332.	2,710,829.			0.056563
_	2005	0.	1,786,215.			0.000000
_	2004	26,642.	1,749,470.	ļ		0.015229
	Total of line 1, column (d			2		0.327702
3	_	for the 5-year base period - divide idation has been in existence if less	• •	3	<del>.</del>	0.065540
4	Enter the net value of no	ncharitable-use assets for 2009 fro	om Part X, line 5	4	3	,188,202.
5	Multiply line 4 by line 3			5_		208,955.
6		ent income (1% of Part I, line 27b)		6_	_	653.
				7		209,608.
8				8		
_	If line 8 is equal to or gr Part VI instructions on page	ons from Part XII, line 4	in Part VI, line 1b, and complete	that part	using a 1% ta	x rate See th

Par	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of the	e inst	tructio	ns)
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		6	53.
	here ► X and enter 1% of Part I, line 27b			
c	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4%			
	of Part I, line 12, 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		6	53.
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		6	53.
6	Credits/Payments '			
а	2009 estimated tax payments and 2008 overpayment credited to 2009 6a 4, 240.			
b				-
c	Tax paid with application for extension of time to file (Form 8868) 6c 0.			
đ	Backup withholding erroneously withheld			
7	Total credits and payments Add lines 6a through 6d		4,2	40.
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 ▶ 9			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		3,5	87.
11	Enter the amount of line 10 to be Credited to 2010 estimated tax ▶ 3,587. Refunded ▶ 11			
	t VII-A Statements Regarding Activities			
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	- 0	Yes	No
	participate or intervene in any political campaign?	1a		<u> </u>
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19			v
	of the instructions for definition)?	1b		<u>X</u>
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials		.	٠.
	published or distributed by the foundation in connection with the activities		ĺ	v′
	Did the foundation file Form 1120-POL for this year?	1 c		_X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year	44	` ~`	^
	(1) On the foundation >\$ (2) On foundation managers >\$	1		
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
_	on foundation managers  \$			Х
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	_2		
•	If "Yes," attach a detailed description of the activities	- 1	1	
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			Χ
4.0	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	3_		X
4a		4a 4b	N	A
5	If "Yes," has it filed a tax return on Form 990-T for this year?  Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
Đ	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		4	٠,
·	By language in the governing instrument, or	. }	``	
	By state legislation that effectively amends the governing instrument so that no mandatory directions that	`		
	conflict with the state law remain in the governing instrument?	6	Х	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7	X	
	Enter the states to which the foundation reports or with which it is registered (see page 19 of the			
- •	instructions)			
ь	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General	ĺ	ļ	
-	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8 b	х	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			
	4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV on page	]		
	27)? If "Yes," complete Part XIV	9		Х
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			
-	names and addresses	10	.	Х

gorm €orm	990- 0 22 – 3516532			Page 5
Par	t VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			ļ
	meaning of section 512(b)(13)? If "Yes," attach schedule (see page 20 of the instructions)	11		<u> </u>
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	<u>L</u>
	Website address ►N/A			
14	The books are in care of ▶ ELAINE ADLER Telephone no ▶ 201-84	3-64	64 	
	The books are in care of ► ELAINE ADLER  Located at ► 205 MAYWOOD AVENUE MAYWOOD, NJ  ZIP + 4 ► 07607			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		▶	•
	and enter the amount of tax-exempt interest received or accrued during the year			<del></del>
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required	1	1	T
	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?  Yes X No	1	١.,	}
	(i) anguga mana ana an anananga, an asamaga propany mana anatamana panasin		ľ	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	1		ĺ
	disqualified person?	1	Ì	
	(3) Furnish goods, services, or racimies 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)?			
			1	
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if		l	ļ
	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 ).	İ	l	i
_				ļ
В	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	1 b	N,	A
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)?	1.5		
_	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that		l .	
٠	were not corrected before the first day of the tax year beginning in 2009?	1 c	'	Х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private	,	1 2,	<del>                                     </del>
_	operating foundation defined in section 4942(j)(3) or 4942(j)(5))	1.	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
а	At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and	ľ		
-	6e, Part XIII) for tax year(s) beginning before 2009?		1	
	If "Yes," list the years	'` '	١,	
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)	`	1	
	(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 )	2 b	10	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>&gt;</b>		1	
3a	Did the foundation hold more than a 2% direct or indirect interest in any business		,	1
	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		<b>∤</b> ∙ ′	
	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	N.	A
4 a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	<u> </u>	X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			1
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2009?	4b	<u> </u>	<u> </u>

Par	t VII-B Statements Regarding Activities for	or Which Form 4	720 May Be Requi	red (continued)		
5a	During the year did the foundation pay or incur any amou	nt to				
•	(1) Carry on propaganda, or otherwise attempt to influer		4945(e))?	Yes X No		<b> </b>
	(2) Influence the outcome of any specific public election	-				.
	directly or indirectly, any voter registration drive?			Yes X No	ļ	
	(3) Provide a grant to an individual for travel, study, or other	<i>.</i>		Yes X No	İ	1
	(4) Provide a grant to an organization other than a chari				,	\
	section 509(a)(1), (2), or (3), or section 4940(d)(2)? (	-		Yes X No	Ì	}  ·
	(5) Provide for any purpose other than religious, charital	· •			1	1 1
	purposes, or for the prevention of cruelty to children of	•		Yes X No	l	
ь	If any answer is "Yes" to 5a(1)-(5), did any of the trans					
-	Regulations section 53 4945 or in a current notice regard		•		5b	N/A
	Organizations relying on a current notice regarding disast		-			
С	If the answer is "Yes" to question 5a(4), does the foundation				-	1 1
	because it maintained expenditure responsibility for the gi	•		Yes No	}	1 1
	If "Yes," attach the statement required by Regulations section.					1 1
6 a	Did the foundation, during the year, receive any funds, of	, ,	pay premiums		1	
	on a personal benefit contract?	•		Yes X No		,
b	Did the foundation, during the year, pay premiums, direct			12	6 b	X_
	If "Yes" to 6b, file Form 8870					'
7 a	At any time during the tax year, was the foundation a pa	rty to a prohibited tax	shelter transaction?	Yes X No		<u>'                                    </u>
	If yes, did the foundation receive any proceeds or have a				7b	NA
Pai	t VIII Information About Officers, Directors and Contractors	, Trustees, Foun	dation Managers,	Highly Paid Emplo	yees,	
1	List all officers, directors, trustees, foundation m	anagers and their	compensation (see	page 22 of the instru	ıctions).	
	(a) Name and address	(b) Title, and average hours per week	(c) Compensation (if not paid, enter	(d) Contributions to employee benefit plans		se account, lowances
		devoted to position		and deferred compensation		
л т	TACHMENT 10		0.	0.		0.
Δī				<u>`</u>		<u>`</u>
		İ				
				<del></del>		<del></del>
				į		
	Compensation of five highest-paid employees (ot	her than those inc	luded on line 1 - se	e page 23 of the inst	ructions).	
	If none, enter "NONE."	· · · · · · · · · · · · · · · · · · ·	<del></del>	(d) Contributions to		
(a	Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	employee benefit plans and deferred		se account, llowances
		devoted to position		compensation		
NON	IE					
- <b>-</b> -						
					<del> </del>	
		[		.		
Tota	I number of other employees paid over \$50,000 .		<del></del>	<u> </u>		NONE
. 010	Transcriot other employees paid over \$50,000 .	· · · · · · · · · · · · · · · · · · ·	<del> </del>	· · · · · · · · · · · · · · · · · · ·		90-PF (2009)
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Form 990-PF (	2009)	22-3516532	Page 7
Part VIII	Information About Officers, Directors, Trustees, Foundation Mar and Contractors (continued)	nagers, Highly Paid Emplo	yees,
3 Five high	est-paid independent contractors for professional services (see page 23	of the instructions). If none,	enter "NONE."
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE			
Total numb	er of others receiving over \$50,000 for professional services		▶ NONE
Part IX-A	Summary of Direct Charitable Activities		
	dation's four largest direct charitable activities during the tax year. Include relevant statistical info	rmation such as the number	Expenses
1 NONE			
2			
3			
4			
	Summary of Program-Related Investments (see page 23 of the ins		T
NONE	two largest program-related investments made by the foundation during the tax year on lines 1 are	10 2	Amount
1 NONE			
2			
•	gram-related investments. See page 24 of the instructions		
3 NONE	·		
Total Add	ines 1 through 3		

ra	see page 24 of the instructions)	iii louridaliori	<b>5</b> ,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes:	ļ	
а	Average monthly fair market value of securities	1a	3,176,522.
b	Average of monthly cash balances	1b	60,231.
С		1c	0.
d	Total (add lines 1a, b, and c)	1d	3,236,753.
е	Total (add lines 1a, b, and c)  Reduction claimed for blockage or other factors reported on lines 1a and		<del></del>
2	1c (attach detailed explanation)  Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	3,236,753.
4	Cash deemed held for charitable activities Enter 1 1/2 % of line 3 (for greater amount, see page 25		<del></del>
		4	48,551.
5	of the instructions)  Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	3,188,202.
6	Minimum investment return. Enter 5% of line 5	6	159,410.
_	rt XI Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) private	te operating	
	foundations and certain foreign organizations check here		
1	Minimum investment return from Part X, line 6	1	159,410.
	Tax on investment income for 2009 from Part VI, line 5 2a 653.		· · · · · · · · · · · · · · · · · · ·
_ b	Income tax for 2009 (This does not include the tax from Part VI)		
	/· · · · · · · · · · · · · · · · · · ·	2c	653.
3	Add lines 2a and 2b  Distributable amount before adjustments Subtract line 2c from line 1	3	158,757.
4	Recoveries of amounts treated as qualifying distributions	4	
	Add lines 3 and 4	5	158,757.
6	Add lines 3 and 4  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,	<del></del>	<del></del>
•	line 1	7	158,757.
		- <del>-</del>	
Pa	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	275,400.
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	0.
b	Cash distribution test (attach the required schedule)	3 b	0.
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	275,400.
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	653.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	274.747.

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

2 Undistributed income, it amy, as of the end of 2809 3 Enter amount for 2008 only 5 Total for preyers 20 0 7 20 06 20 05 3 Excess distributions carryover, if any, to 2009 5 From 2006 6 From 2006 7 From 2006 7 From 2006 7 From 2007 7 470, 663. 6 From 2007 7 27 470, 663. 7 Total of lines 3a through e 7 Could you will be a served on the served of the s	Pa	rt XIII Undistributed Income (see page	26 of the instruction	ns)		
1 Distributable amount for 2009 from Part XI, Inc 7			(a)	(b)	(c)	(d)
2 Undistributed income, it amy, as of the end of 2809 3 Enter amount for 2008 only 5 Total for preyers 20 0 7 20 06 20 05 3 Excess distributions carryover, if any, to 2009 5 From 2006 6 From 2006 7 From 2006 7 From 2006 7 From 2007 7 470, 663. 6 From 2007 7 27 470, 663. 7 Total of lines 3a through e 7 Could you will be a served on the served of the s	1	Distributable amount for 2009 from Part XI,		Years prior to 2008		• •
2 Undatabused income, 4 any, as of the end of 2009 a Enter amount for 2008 and y  5 Total for persysas 2 0 07 20 06 20 05  5 Essas distributions carryover, if any, to 2009 a From 2004  6 From 2006  7 From 2006  8 From 2006  9 From 2006  10 From 2006  10 From 2006  10 From 2006  10 From 2006  10 From 2006  10 From 2006  10 From 2006  10 From 2007  10 From 2006  10 From 2007  10 From 2007  10 From 2007  10 From 2007  10 From 2008  10 From 2007  10 From 2007  10 From 2007  10 From 2007  10 From 2007  10 From 2007  10 From 2007  10 From 2007  10 From 2007  10 From 2007  10 From 2007  10 From 2007  10 From 2007  10 From 2007  10 From 2007  10 From 2008  10 From 2008  10 From 2008  10 From 2007  10 From 2008  10 From 2008  10 From 2007  10 From 2008  11 From 2008  11 From 2008  11						158,757.
a Enter amount for 2008 only  Total for promy years 20_07_20_05_20_5  Decess distributions carryover, if any, to 2009 a From 2006.  From 2006.  From 2006.  From 2006.  From 2008.  Total of lines 3 at through e  Qualifying distributions for 2009 from Part XII, line 4 ▶ \$ 275, 400.  Applied to 2008, but not more than kine 2 a.  Applied to 2008, but not more than kine 2 a.  Applied to 2008, but not more than kine 2 a.  Applied to 2008, but not more than kine 2 a.  Applied to 2008 but not more than kine 2 a.  Applied to 2008 but not more than kine 2 a.  Applied to 2008 but not more than kine 2 a.  Applied to 2008 but not more than kine 2 a.  Applied to 2008 but not more than kine 2 a.  Applied to 2008 distributions or for or years (Election required - see page 26 of the instructions).  Treated as distributions or or or or or or or or or or or or or	2					
b Total for port years 2 0 07 2 0 06 2 0.05  Excess distributions carryover, if any, to 2009  a From 2004	а				ļ	
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b From 2005	а			,		
c From 2006		1			j	
d From 2007 470, 663. From 2008 28,418. Total of lines 3a through c 521, 947.  Qualifying distributions for 2009 from Part XII, line 4 № \$ 275,400. Applied to 2008, but not more than line 2a. Applied to 2008, but not more than line 2a. Applied to 2008 but not more than line 2a. Applied to 2008 but not more than line 2a. Applied to 2008 distributions out of corpus (Election required - see page 26 of the instructions).  Applied to 2009 distributable amount Remaining amount distributed out of corpus Excess distributions carryover applied to 2009 (if an amount appears in column (a). It is same amount mast be shown in column (a). Emerity of the folial of each column as indicated below: Corpus Add lines 3f, 4c, and 4e Subtract line 5 Drow years' undistributed income Subtract line 5 Drow years' undistributed income Subtract line 5 Drow years' undistributed income Subtract line 5 Drow years' undistributed income Subtract line 4b from line 2b. Enter the met foral of each column as been previously assessed.  Qualification of which his estern 4942(a) (ax has been previously assessed.  Qualification of which his estern 4942(a) (ax has been previously assessed.  Qualification of the intructions.  Qualification of the intructions out of corpus to satisfy requirements imposed by section 170(b)(10°) or 4942(g)(3) (see page 27 of the instructions).  Excess distributions carryover from 2004 not applied on line 5 or line 7 (see page 27 of the instructions).  Excess distributions carryover from 2004 not applied on line 5 or line 7 (see page 27 of the instructions).  Excess distributions carryover from 2004 not applied on line 5 or line 7 (see page 27 of the instructions).  Excess distributions carryover from 2004 not applied on line 5 or line 7 (see page 27 of the instructions).  Excess firm 2006.  Excess from 2006.  22,866. Excess from 2007.  470,663. Excess from 2008.  28,418.	С	From 2006 22,866.				
From 2008	đ	From 2007 470, 663.				
Total of lines 3a through e	e	From 2008 28,418.				
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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.  d Subtract line 6c from line 6b Taxable amount - see page 27 of the instructions e Undistributed income for 2008 Subtract line 4a from line 2 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 distributed in 2010.  7 Amounts treated as distributions out of corpus to salisty requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see page 27 of the instructions).  8 Excess distributions carryover from 2004 not applied on line 5 or line 7 (see page 27 of the instructions).  9 Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a  10 Analysis of line 9 a Excess from 2005 b Excess from 2006 22,866. c Excess from 2007 470,663. d Excess from 2008 28,418.	b	Prior years' undistributed income Subtract				
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issued, or on which the section 4942(a) tax has been previously assessed.  d Subtract line 6c from line 6b Taxable amount - see page 27 of the instructions.  e 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 distributed in 2010.  7 Amounts treated as distributions out of corpus to salisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see page 27 of the instructions).  8 Excess distributions carryover from 2004 not applied on line 5 or line 7 (see page 27 of the instructions).  9 Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a.  10 Analysis of line 9  a Excess from 2005. b Excess from 2006. c Excess from 2007. 470,663. d Excess from 2008. 22,866. c Excess from 2008. 28,418.	С	, ,				
d Subtract line 6c from line 6b Taxable amount - see page 27 of the instructions.  e Undistributed income for 2008 Subtract line 4a from line 2a Taxable amount - see page 27 of the instructions						
amount - see page 27 of the instructions  e 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 distributed in 2010.  7 Amounts treated as distributions out of corpus to salisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see page 27 of the instructions)		been previously assessed			·	<del></del>
e Undistributed income for 2008 Subtract line 4a from line 2a Taxable amount - see page 27 of the instructions	đ					
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 distributed in 2010.  7 Amounts treated as distributions out of corpus to salisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see page 27 of the instructions)	e					
4d and 5 from line 1 This amount must be distributed in 2010.  7 Amounts treated as distributions out of corpus to salisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see page 27 of the instructions)		27 of the instructions				
distributed in 2010.  7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see page 27 of the instructions).  8 Excess distributions carryover from 2004 not applied on line 5 or line 7 (see page 27 of the instructions).  9 Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a.  10 Analysis of line 9  a Excess from 2005. b Excess from 2006. c Excess from 2007. d 470,663. d Excess from 2008.  28,418.	f	Undistributed income for 2009 Subtract lines				
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see page 27 of the instructions).  8 Excess distributions carryover from 2004 not applied on line 5 or line 7 (see page 27 of the instructions).  9 Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a.  10 Analysis of line 9  a Excess from 2005. b Excess from 2006 c Excess from 2007 d Excess from 2008 28,418.			,			
to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see page 27 of the instructions)	7	Amounts treated as distributions out of cornus		<del></del>		<u> </u>
Instructions)	•					
Excess distributions carryover from 2004 not applied on line 5 or line 7 (see page 27 of the instructions).  Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a.  10 Analysis of line 9 a Excess from 2005 . b Excess from 2006 . c Excess from 2007 . d Excess from 2008 . 28,418.		( ) ( ) ( ) ( )				
applied on line 5 or line 7 (see page 27 of the instructions)	8					
9 Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a  10 Analysis of line 9 a Excess from 2005 b Excess from 2006	-	applied on line 5 or line 7 (see page 27 of the	n			
Subtract lines 7 and 8 from line 6a	_			, , , , , , , , , , , , , , , , , , , ,		
10 Analysis of line 9 a Excess from 2005 b Excess from 2006	y	•	638.590			
a Excess from 2005	10		100,000			
b Excess from 2006		1			ĺ	
c Excess from 2007 470, 663. d Excess from 2008 28, 418.						
d Excess from 2008 28, 418.	r					
	q					
	e	Excess from 2009			i	

Pa	rt XIV Private Oper	rating Foundations	see page 27 of the	e instructions and P	art VII-A, question 9)	NOT APPLICABLE
1 a	If the foundation has	•			erating	
	foundation, and the ruling				▶└	<del></del>
þ	Check box to indicate wh	Tax year	private operating foun	dation described in section Prior 3 years	on 4942( <sub>j</sub> )	(3) or 4942(j)(5)
2 a	Enter the lesser of the ad- justed net income from Part	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total
	I or the minimum investment		(3,7222	, , , , , , , , , , , , , , , , , , ,	(0/2000	
	return from Part X for each year listed					
b	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					
e	Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
3 a	Complete 3a, b, or c for the alternative test relied upon "Assets" alternative test - enter					
	(1) Value of all assets     (2) Value of assets qualifying under section					
b	4942(j)(3)(B)(i) "Endowment" alternative test- enter 2/3 of minimum invest- ment return shown in Part X,					
	tine 6 for each year tisted	<u> </u>				
C	"Support" alternative test - enter (1) Total support other than					
	gross investment income	}	<u> </u>			
	(interest, dividends, rents, payments on securities				·	
	loans (section 512(a)(5)), or royalties)					
	(2) Support from general public and 5 or more					
	exempt organizations as provided in section 4942					
	(j)(3)(B)(III)		<del></del>		<del></del>	
	port from an exempt organization					
	(4) Gross investment income					
Pa	Supplement	ary  Information  (C during the year - se	complete this part	t only if the found	dation had \$5,000	or more in assets
<del></del>	Information Regardin	<del></del>		iisti uctions. <sub>1</sub>		
a	List any managers of	the foundation who h	nave contributed mo	re than 2% of the to	tal contributions receive	ed by the foundation
	before the close of any MYRON & EL.		ney have contributed	more than \$5,000). (	See section 507(d)(2))	
b	List any managers of		own 10% or more of	of the stock of a cor	poration (or an equally	large portion of the
	ownership of a partner					
	N/A	- Comtain Air - Com	Citt Loop Cabal	Lin D		
2	Information Regardin	•			atable assessed to	·
	unsolicited requests forganizations under of	for funds. If the foun	dation makes gifts,	grants, etc (see pag	ritable organizations a ge 28 of the instructio	nd does not accept ns) to individuals or
a	The name, address, a		of the person to who	m applications should	be addressed	
b			bmitted and informat	tion and materials the	y should include	
	N/A	·		<del></del>		
C	Any submission deadl	ines				
	N/A	· <del></del>				
d	Any restrictions or lifactors	imitations on awards	, such as by geog	raphical areas, chari	table fields, kinds of	institutions, or other
	N/A					
104						

Form 990-PF (2009)			22-3516532	Page 11
Part XV Supplementary Information (co	ontinued)			
3 Grants and Contributions Paid Duri	ng the Year or App		uture Payment	
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	contribution	
a Paid during the year				
ATTACHMENT 12				
ATTACHMENT 12		,		
			,	
				,
,				
Tabel	<u> </u>	l		271,400.
b Approved for future payment	<del>                                     </del>	<del></del>		271,400.
b Approved for fatare payment				
	İ			
				ļ
	<u></u>	<u> </u>	<u> </u>	ļ
<u> </u>	<u></u> .	<u> </u>	▶ 3b	<u> </u>

ter gross a	mounts unless otherwise indicated	Unrela	ated business income	Excluded by	section 512, 513, or 514	(e) Related or exempt
Program s	service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See page 28 of the instructions)
	Service revenue			<del>                                     </del>	<del> </del>	and meadering )
			<del></del>	1		
				<u> </u>		
				1		
f						
g Feesa	and contracts from government agencies					
Membersi	hip dues and assessments					
	savings and temporary cash investments					
Dividends	and interest from securities		•	14	71,580.	
Net rental	Income or (loss) from real estate					
a Debt-f	financed property					
	ebt-financed property					
Net rental i	ncome or (loss) from personal property .					
Other inve	estment income			<del></del>		
Gain or (los	ss) from sales of assets other than inventory			18	-68,690.	
Net incom	ne or (loss) from special events		ļ	ļ		
	ofit or (loss) from sales of inventory					
Other reve	enue a					·····
b			<u> </u>			<del></del>
c				<b>_</b>		
d			1			
			<del></del>		<del> </del>	
е	<del></del>				0.000	
e Subtotal	Add columns (b), (d), and (e)				2,890.	
e Subtotal /	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e)				<del></del>	
Subtotal Addee workshe	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) eet in line 13 instructions on page 28 Relationship of Activities	to verify calci	ulations ) complishment of Ex	kempt Purp		2,890
Subtotal Addee workshe	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) eet in line 13 instructions on page 28	to verify calco	ulations) complishment of Exch income is reporte	kempt Purp	ooses  (e) of Part XVI-A con	2,89
Subtotal A Total. Addee workshe art XVI-E	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) eet in line 13 instructions on page 28 to Relationship of Activities  Explain below how each activities accomplishment of the form	to verify calco	ulations) complishment of Exch income is reporte	kempt Purp	ooses  (e) of Part XVI-A con	2,890
Subtotal A Total. Add se workshe art XVI-E	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) eet in line 13 instructions on page 28 to Relationship of Activities  Explain below how each activities accomplishment of the form	to verify calco	ulations) complishment of Exch income is reporte	kempt Purp	ooses  (e) of Part XVI-A con	2,89
Subtotal A Total. Add se workshe art XVI-E	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) eet in line 13 instructions on page 28 to Relationship of Activities  Explain below how each activities accomplishment of the form	to verify calco	ulations) complishment of Exch income is reporte	kempt Purp	ooses  (e) of Part XVI-A con	2,89
Subtotal A Total. Addee workshe art XVI-E	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) eet in line 13 instructions on page 28 to Relationship of Activities  Explain below how each activities accomplishment of the form	to verify calco	ulations) complishment of Exch income is reporte	kempt Purp	ooses  (e) of Part XVI-A con	2,89
Subtotal A Total. Add se workshe art XVI-E	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) eet in line 13 instructions on page 28 to Relationship of Activities  Explain below how each activities accomplishment of the form	to verify calco	ulations) complishment of Exch income is reporte	kempt Purp	ooses  (e) of Part XVI-A con	2,89
Subtotal A Total. Addee workshe art XVI-E	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) eet in line 13 instructions on page 28 to Relationship of Activities  Explain below how each activities accomplishment of the form	to verify calco	ulations) complishment of Exch income is reporte	kempt Purp	ooses  (e) of Part XVI-A con	2,89
Subtotal A Total. Addee workshe art XVI-E	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) eet in line 13 instructions on page 28 to Relationship of Activities  Explain below how each activities accomplishment of the form	to verify calco	ulations) complishment of Exch income is reporte	kempt Purp	ooses  (e) of Part XVI-A con	2,89
Subtotal A Total. Add se workshe art XVI-E	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) eet in line 13 instructions on page 28 to Relationship of Activities  Explain below how each activities accomplishment of the form	to verify calco	ulations ) complishment of Exch income is reporte exempt purposes (c	kempt Purp	ooses  (e) of Part XVI-A con	2,89
Subtotal A Total. Add se workshe art XVI-E	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) eet in line 13 instructions on page 28 to Relationship of Activities  Explain below how each activities accomplishment of the form	to verify calco	ulations) complishment of Exch income is reporte	kempt Purp	ooses  (e) of Part XVI-A con	2,89
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to be the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)) are section 527, relating to political organizations?  (1) Sabe of sasets to a noncharitable exempt organization of (1) Sabe of sasets to a noncharitable exempt organization (2) Purchases of assets from a noncharitable exempt organization (1) Sabe of sasets to a noncharitable exempt organization (2) Purchases of assets from a noncharitable exempt organization (1) Sabe of sasets to a noncharitable exempt organization (1	Pa	t XVII	Information   Exempt Orga		ransfers To and	Transactio	ons and I	Relationship	s With N	lonc	harit	able
(2) Other assets  Differ transactions (1) Sales of assets to a noncharitable exempt organization (2) Purchase of assets from a noncharitable exempt organization (3) Rental of facilities, equipment, or other assets (4) Relimbursement arrangements (5) Loans or loan guarantees (6) Loans or loan guarantees (7) Loans or loan guarantees (8) Ferformance of services or membership or fundrasing solicitations (8) Refination facilities, equipment, maining list, other assets, or paid employees (9) Line no lea goods, other assets, or canceas given by the reporting foundation if the foundation received leas than fain value of the goods, other assets, or services received in any of the above is "Yes," complete the following schedule Column (b) should always show the fair in value of the goods, other assets, or services received in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received in any transaction of sharing arrangement, show in column (d) the value of the goods, other assets, or services received in a section 501(c) of the Code (other than section 501(c)(3)) or in section 527?  Betting the foundation directly or indirectly affiliated with, or related to one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?  Betting the foundation directly or indirectly affiliated with, or related to one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?  Betting the foundation directly or indirectly affiliated with, or related to one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?  Betting the foundation directly or indirectly affiliated with, or related to one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?  Betting the foundation of the foundation of the foundation of the foundation	1	ın se	ction 501(c) of the C	ode (other than	section 501(c)(3) orga	anızatıons) or					Yes	No
(2) Other assets  (3) Define transactions  (1) Sales of assets to a noncharitable exempt organization  (2) Purchases of assets from a noncharitable exempt organization  (3) Rental of facilities, equipment, or other assets  (4) Reimbursement arrangements  (5) Loans or loan guarantees  (6) Performance of services or membership or fundrasing solicitations  (8) Performance of services or membership or fundrasing solicitations  (9) Performance of services or membership or fundrasing solicitations  (9) If the answer to any of the above is "Yes" complete the following schedule Column (b) should always show the fair in value of the goods, other assets, or services given by the reporting foundation if the foundation received less than fair in value of the goods, other assets, or services given by the reporting foundation if the foundation received less than fair in value of the goods, other assets, or services given by the reporting foundation if the foundation received less than fair in value of the goods, other assets, or services given by the reporting foundation if the foundation received less than fair in value of the goods, other assets, or services received and the properties of the following schedule contains and sharing arrangement of the value of the goods, other assets, or services received the secondary of the same of the following schedule schedules and statements, and sharing arrangement of the secondary o	а		_									v
b Other transactions  (1) Sales of assets to a noncharitable exempt organization  (2) Purchases of assets from a noncharitable exempt organization  (3) Rental of facilities, equipment, or other assets  (4) Reimbursement arrangements  (5) Loans or loan guarantees  (6) Loans or loan guarantees  (7) Sharing of facilities, equipment, mailing lists, other assets, or paid employees  (8) Performance of services or memberathip or fundraising solicitations  (8) Performance of services or memberathip or fundraising solicitations  (9) Line no little goods, other assets, or services given by the reporting foundation if the foundation received less than fair in value of the goods, other assets, or services given by the reporting foundation if the foundation received less than fair in value in any transaction or sharing arrangement, show in column (9) the value of the goods, other assets, or services given by the reporting foundation if the foundation received less than fair in value in any transaction or sharing arrangement, show in column (9) the value of the goods, other assets, or services per little of the goods, other assets, or services per little of the services of the												<u>X</u>
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(2) Purchases of assets from a noncharitable exempt organization  (3) Rental of facilities, equipment, or other assets  (4) Reimbursement arrangements  (5) Loans or loan guarantees  (6) Loans or loan guarantees  (6) Performance of services or membership or fundraising solicitations  (7) Elifs  (8) Performance of services or membership or fundraising solicitations  (9) Enromance of services or membership or fundraising solicitations  (9) Enromance of services or membership or fundraising solicitations  (9) Enromance of services or membership or fundraising solicitations  (9) Enromance of services or membership or fundraising solicitations  (9) Enromance of services or membership or fundraising solicitations  (10) Enromance of services or membership or fundraising solicitations  (11) International direction of the above is "Yes," complete the following schedule Column (b) should always show the fair in value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services recipied to the goods, other assets, or services recipied to the goods, other assets, or services recipied to the goods, other assets, or services recipied to the solicities of the services given by the reporting foundation if the foundation received less than fair in value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services recipied to the goods, other assets, or services recipied to the goods, other assets, or services recipied to the foundation directly or indirectly or	D			acitable evernet e	organization					45/41		х
(a) Rental of facilities, equipment, or other assets												X
(4) Reimbursement arrangements (5) Loans or loan guarantees (5) Loans or loan guarantees (5) Performance of services or membership or fundrasing solicitations (5) Performance of services or membership or fundrasing solicitations (5) Performance of services or membership or fundrasing solicitations (5) Performance of services or membership or fundrasing solicitations (5) Performance of services or membership or fundrasing solicitations (5) Performance of services or membership or fundrasing solicitations (5) Performance of services or membership or fundrasing solicitations (6) It following schedule Column (b) should always show the fair in value of the goods, other assets, or services recommendation if the foundation received less than fair in value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services recommendation in the following schedule (a) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangement N/A  N/A  N/A  N/A  N/A  N/A  N/A  N/A												X
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Section 501(c) of the Code (other than section 501(c)(3)) or in section 527?  b If "Yes," complete the following schedule  (a) Name of organization  (b) Type of organization  (c) Description of relationship  Under penalties of perjuny I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowled belief, it is true, correct and complete Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowled belief, it is true, correct and complete Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowled belief, it is true, correct and complete Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowled belief, it is true, correct and complete Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowled belief, it is true, correct and complete Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowled belief, it is true, correct and complete Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowled belief, it is true, correct and complete Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge.  Signature of officer of trustee  Date  Preparer's identifying number   Preparer's identifying number   Preparer's identifying number   Preparer's identifying number   Preparer's identifying number   Preparer's identifying number   Preparer's identifying number   Preparer's identifying number   Preparer's identifying number   Preparer's identifying number   Preparer's identifying number   Preparer's identifying number   Preparer's identifying number   Preparer's identifying number   Preparer's identifying number   Preparer's identifying number								<del></del>				
Section 501(c) of the Code (other than section 501(c)(3)) or in section 527?  b If "Yes," complete the following schedule  (a) Name of organization  (b) Type of organization  (c) Description of relationship  Under penalties of perjuny I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowled belief, it is true, correct and complete Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowled belief, it is true, correct and complete Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowled belief, it is true, correct and complete Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowled belief, it is true, correct and complete Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowled belief, it is true, correct and complete Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowled belief, it is true, correct and complete Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowled belief, it is true, correct and complete Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge.  Signature of officer of trustee  Date  Preparer's identifying number   Preparer's identifying number   Preparer's identifying number   Preparer's identifying number   Preparer's identifying number   Preparer's identifying number   Preparer's identifying number   Preparer's identifying number   Preparer's identifying number   Preparer's identifying number   Preparer's identifying number   Preparer's identifying number   Preparer's identifying number   Preparer's identifying number   Preparer's identifying number   Preparer's identifying number												
Section 501(c) of the Code (other than section 501(c)(3)) or in section 527?  b If "Yes," complete the following schedule  (a) Name of organization  (b) Type of organization  (c) Description of relationship  Under penalties of perjuny I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowled belief, it is true, correct and complete Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowled belief, it is true, correct and complete Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowled belief, it is true, correct and complete Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowled belief, it is true, correct and complete Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowled belief, it is true, correct and complete Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowled belief, it is true, correct and complete Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowled belief, it is true, correct and complete Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge.  Signature of officer of trustee  Date  Preparer's identifying number   Preparer's identifying number   Preparer's identifying number   Preparer's identifying number   Preparer's identifying number   Preparer's identifying number   Preparer's identifying number   Preparer's identifying number   Preparer's identifying number   Preparer's identifying number   Preparer's identifying number   Preparer's identifying number   Preparer's identifying number   Preparer's identifying number   Preparer's identifying number   Preparer's identifying number												
Section 501(c) of the Code (other than section 501(c)(3)) or in section 527?  b If "Yes," complete the following schedule  (a) Name of organization  (b) Type of organization  (c) Description of relationship  Under penalties of perjuny I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowled belief, it is true, correct and complete Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowled belief, it is true, correct and complete Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowled belief, it is true, correct and complete Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowled belief, it is true, correct and complete Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowled belief, it is true, correct and complete Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowled belief, it is true, correct and complete Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowled belief, it is true, correct and complete Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge.  Signature of officer of trustee  Date  Preparer's identifying number   Preparer's identifying number   Preparer's identifying number   Preparer's identifying number   Preparer's identifying number   Preparer's identifying number   Preparer's identifying number   Preparer's identifying number   Preparer's identifying number   Preparer's identifying number   Preparer's identifying number   Preparer's identifying number   Preparer's identifying number   Preparer's identifying number   Preparer's identifying number   Preparer's identifying number					<del></del>							
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belief, it is true, correct and complete Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any known of the preparer has a preparer has any known of the preparer has a preparer has a preparer has a preparer has a prep												
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Signature of officer of trustee  Date  Check if self-employed  Preparer's identifying number (See Signature of page 30 of the instructions P00544631  Firm's name (or yours if PMG LLP)  EIN 13-5565207		Under belief,	penalties of penjury I decli it is true, correct, and com	are that I have explete Declaration	amined this return, including of preparer (other than taxp.	g accompanying ayer or fiduciary	schedules and	d statements, and all information of w	to the best o	f my ki has ar	nowled ny kno	ge and wledge
Firm's name or yours if FMG LLP EIN > 13-5565207	إي	-		e sa	ees_		<u> </u>		KJIDE,	1/		
Firm's name or yours if FMG LLP EIN > 13-5565207	ere	<b>y</b> \$1	gnature of officer or trustee		<del></del>	<del></del>	ite	▼ Title	Brongras'-	ıdon!.		
Firm's name for yours it FMG LLP EIN > 13-5565207	Sign H	aid arer's Only	Preparer's signature	- My			Che self-	employed -	number (Se page 30 of t P00544	e Signa he instr 631	ture o	
	}	Prep. S	1 . <i>[*]</i> *					EIN ▶	13-5565	207		
self-employed, address, 150 JOHN F. KENNEDY PARKWAY and ZIP code SHORT HILLS, NJ 07078 Phone of 973-467-9650	ļ	د ۵	1 '1/Z''			PARKWAY	07070		072 4	67 0	650	

Phone no 973-467-9650

SHORT HILLS, NJ

### 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

Employer identification number Name of the organization THE MYRON AND ELAINE ADLER PRIVATE FOUNDATION PRIVATE FOUNDATION INC. 22-3516532 Organization type (check one) Filers of: Section: 501(c)(3 Form 990 or 990-EZ ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions General Rule  $\overline{X}$  For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor Complete Parts I and II Special Rules For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 331/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1 Complete Parts I and П For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ. or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

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

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions

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

THE MYRON AND ELAINE ADLER PRIVATE FOUNDATION

PRIVATE FOUNDATION INC.

Employer identification number 22-3516532

Part I Contributors (see instructions)	Part I	Contributors	(see instructions)
--	--------	--------------	--------------------

(a)	(b)	(c) Aggregate contributions	(d)
No.	Name, address, and ZIP + 4		Type of contribution
11	ELAINE ADLER  910 FRANKLIN LAKE ROAD  FRANKLIN LAKES, NJ 07417	\$\$	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)
(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)
(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)
(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
		<b>\$</b>	Person Payroll Noncash (Complete Part II if there is a noncash contribution)

Kind of F					ription		P Or D	Date acquired	Date sold
Gross sale price less expenses of sale	allo	eciation wed/ wable	Cost or other basis	FMV as of 12/31/69	Adj basis as of 12/31/69	Excess of FMV over adj basis	ע	Gain or (loss)	
			TOTAL CAPIT	-		• • • • • • • • • • • • • • • • • • • •		1,878.	
			ARTISAN MIC				P	04/27/2006	05/01/2009
83,875.			PROPERTY TY	PE: SECURI	TIES			-28,355.	
			DELAWARE US		ΓIES		P	02/15/2008	05/01/2009
28,760.			42,322.					-13,562.	
			HARBOR CAPI		TIES		P	01,01,200	05/01/2009
22,060.			28,733.	HEV MID CA	D			-6,673.	05 (01 (2000
57,810.			PROPERTY TY				P	04/27/2006 -21,543.	05/01/2009
<b>.</b> ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			PIMCO TOTAL	RETURN			P		05/01/2009
21,160.			PROPERTY TY 21,781.	PE: SECURI	FIES			-621.	
			DISALLOWED	WASH SALE				VAR 186.	VAR
rotal GAIN(L	OSS)			•••••				<u>-68,690.</u>	

# FORM 990PF, PART I - INTEREST ON TEMPORARY CASH INVESTMENTS

NET INVESTMENT INCOME	22.	22.
REVENUE AND EXPENSES PER BOOKS	22.	22.
		TOTAL
DESCRIPTION	FIDELITY INTEREST INCOME	

ATTACHMENT 1

11/4/2010

53C3RI 2880

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

E 12 2	INVESTMENT	INCOME	71,5
REVENUE	AND EXPENSES	PER BOOKS	71,558.
		DESCRIPTION	FIDELITY, DIVIDENDS

TOTAL

71,558.	71,558.
71,558.	71,558.
INVESTMENT	EXPENSES PER BOOKS

 $\sim$ 

FEES	
ACCOUNTING	
1	l
PART I	
990PF,	
9	

CHARITABLE PURPOSES	4,000.	4,000.
ADJUSTED NET INCOME		0
NET INVESTMENT INCOME		0.
REVENUE AND EXPENSES PER BOOKS	4,000.	4,000.
		TOTALS
DESCRIPTION	KPMG LLP	

4

ATTACHMENT

### - OTHER PROFESSIONAL FEES PART I FORM 990PF,

	NET	ĩ	INCOME	6. 606.
KEVENCE	AND	EXPENSES	PER BOOKS	6,606.
			DESCRIPTION	INVESTMENT FEES

INVESTMENT	6,606.	6,606.
EXPENSES PER BOOKS	.909,9	6,606.
		TOTALS

## FORM 990PF, PART I - INTEREST EXPENSE

	NET	INVESTMENT	INCOME	232.
REVENUE	AND	EXPENSES	PER BOOKS	 232.
			DESCRIPTION	MAKGIN INTEREST

TOTALS

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THE MYRON AND ELAINE ADLER PRIVATE FOUNDATION

9

ATTACHMENT

PAGE 25

TAXES 1 Н PART FORM 990PF,

EXPENSES PER BOOKS REVENUE AND

NET INVESTMENT: INCOME

TOTALS

PAID

FOREIGN TAXES EXCISE TAXES

DESCRIPTION

1,344. 6,719. 8,063.

1,344.

1,344.

ATTACHMENT

9

ATTACHMENT 7	
FORM 990PF, PART II - RECEIVABLES DUE FROM OFFICERS, ETC.	
BORROWER: RECEIVABLE FROM FOUNDERS ORIGINAL AMOUNT: 3,152.	
BEGINNING BALANCE DUE	3,152.
ENDING BALANCE DUE	2,200.
ENDING FAIR MARKET VALUE	2,200.
TOTAL BEGINNING RECEIVABLES DUE FROM OFFICERS, ETC.	3,152.
TOTAL ENDING BOOK - RECEIVABLES DUE FROM OFFICERS, ETC.	2,200.

TOTAL ENDING FMV - RECEIVABLES DUE FROM OFFICERS, ETC. 2,200.

- CORPORATE STOCK PART II FORM 990PF,

DESCRIPTION

SEE ATTACHED STATEMENT 8A

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ATTACHMENT

ENDING BOOK VALUE

ENDING FMV

4,126,029. 4,126,029.

3,669,960.

3,669,960.

TOTALS

PAGE 27

STATEMENT 9A

The Myron and Elaine Adler Private Foundation, Inc Form 990PF, Part II - Common Stocks, Closed End Funds, Mutual Funds FYE December 31, 2009

22-3516532

Security	Symbol	Ending Book Value	Ending FMV
LSV Value Equity Institutional	LSVEX	240,645	169,032
Artisan Mid Cap Value	ARTQX	148,422	141,694
Delaware US Growth Class I	DENIX	161,718	145,959
Dodge & Cox Internatl Stock Fund	DODFX	219,594	179,111
Harbor International	HAINX	339,279	302,800
Harbor Capital Appreciat Instl	HACAX	229,577	229,344
Hussman Strategic Growth	HSGFX	20,000	48,446
Keeley Small Cap Value FD Inc	KSCVX	44,305	34,414
Oppenheimer Developing Mkts CL A	KSCVX	13,994	10,870
Lazard Cap Allocator Opp Strat Por Instl	LCAIX	50,768	56,532
Morgan Stan Instl TR Midcap Grwth	MPEGX	173,567	173,888
Oppenheimer Developing Mkts CL A	ODMAX	184,793	190,381
Pimco Total Return Instl	PTTRX	626,709	675,072
Pimco High Yield Instl	PHIYX	40,445	37,885
Pimco All Assets Inst Class	PAAIX	43,142	47,832
Pimco Commodity Real Returninst	PCRIX	26,992	33,160
Royce Total Return FD Inv CL	RYTRX	32,140	25,636
Selected American Shares CL S	SLASX	214,021	191,010
Phornburg INTL	TGVIX	163,398	126,359
Vanguard Index Trust S&P 500	VFINX	273,840	234,413
Vanguard Index Trust Small Cap	VISGX	14,680	20,922
Berkshire Hathaway	BRKA	804,000	595,200
•		4,126,029	3,669,960

A'	ΓT.	ACF	IMEN	T 9	

FORM 990PF, PART III - OTHER INCREASES IN NET WORTH OR FUND BALANCES

DESCRIPTION

TNUOMA

DIVIDEND ADJUSTMENT

672.

TOTAL

672.

ATTACHMENT 10

DIRECTORS, AND TRUSTEES

- LIST OF OFFICERS,

PART VIII

FORM 990PF,

4

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NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
MYRON ADLER C/O MYRON MANUFACTURING CORP. 205 MAYWOOD AVE. MAYWOOD, NJ 07607	VP 20.00	Ö	.0	.0
ELAINE ADLER C/O MYRON MANUFACTURING CORP. 205 MAYWOOD AVE. MAYWOOD, NJ 07607	PRES. 20.00	Ö	· o	.0
WILLIAM S. ADLER C/O MYRON MANUFACTURING CORP. 205 MAYWOOD AVE. MAYWOOD, NJ 07607	5.00	o	· o	· o
RICHARD S. ADLER C/O MYRON MANUFACTURING CORP. 205 MAYWOOD AVE. MAYWOOD, NJ 07607	VP 5.00	0		. 0

## \*DENOTES ANNUAL HOURS DEVOTED TO POSITION

0

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5.00

C/O MYRON MANUFACTURING CORP.

MAYWOOD, NJ 07607

205 MAYWOOD AVE.

MARIE ADLER KRAVECAS

SEC.

53C3RI 2880

440578

PAGE 29

- LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

PART VIII

FORM 990PF,

ATTACHMENT 10 (CONT'D)

EXPENSE ACCT AND OTHER ALLOWANCES	·o	.0
CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	Ö	0
COMPENSATION	O	0
TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	TREAS. 5.00	GRAND TOTALS
NAME AND ADDRESS	DONALD JAMES ADLER C/O MYRON MANUFACTURING CORP. 205 MAYWOOD AVE. MAYWOOD, NJ 07607	

# \*DENOTES ANNUAL HOURS DEVOTED TO POSITION

53C3RI 2880

PAGE 30

ATTACHMENT 11

FORM 990PF, PART XV - NAME, ADDRESS AND PHONE FOR APPLICATIONS

N/A

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ATTACHMENT 12

3 THE YEAR	
THE	ı
PAID DURING	
PAID	I
GRANTS AND CONTRIBUTIONS	
AND	ŀ
_1	l
ネ	
C, PART XV -	
FORM 990PE,	

	AMOUNT	10,000	27,000	100	750	25,000.	4,000.
	PURPOSE OF GRANT OR CONTRIBUTION	WELFARE OF THE CHILDREN	FEEDING, RESCUING AND EDUCATING PEOPLE TO HELPING THEM RE-CONNECT WITH THEIR JEWISH HERITAGE OR GETTING PROPER MEDICAL CARE, FEDERATION RAISES FUNDS FOR THE MOST WORTHWHILE AND RESPECTED PROGRAMS AND SERVICES FOR JEWISH PEOPLE IN NEED	WOMEN'S AND CHILDREN'S AID ORGANIZATION	SUPPORT HIGHER EDUCATION	. FUNDING REFORM & FISCAL ACCOUNTABILITY INTO REAL CHANGE FOR EDUCATION	TO PROVIDE FOOD TO THE NEEDY
RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR	AND FOUNDATION STATUS OF RECIPIENT	NONE 501(C)(3)	NONE 501(C)(3)	NONE 502(C)(3)	NONE 501(C)(3)	NONE 501(C)(3)	NONE 501 (C) (3)
	RECIPIENT NAME AND ADDRESS	THE CHILDREN'S AID SOCIETY 105 EAST 22ND ST NEW YORK, NY 10010	JEWISH FOUNDATION S PALM BEACH 9901 DONNA KLEIN BLVD BOCA RATON, FL 33428	NATIONAL COUNCIL OF JEWISH WOMEN 53 WEST 23RD STREET, 6TH FLOOR NEW YORK, NY 10010-4204	RAMAPO COLLEGE 505 RAMAPO VALLEY ROAD MAHWAH, NJ 07430	CAUCUS EDUCATION NEW YORK, NY	COMMUNITY FOOD BANK OF NEW JERSEY 31 EVANS TERMINAL HILLSIDE, NJ 07205

53C3RI 2880 11/4/2010

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ATTACHMENT 12 (CONT'D)

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

AMOUNT	. 800.	SKILLS 100,000 .OGY	<b>22.</b> 1,000. RIAL	2,500.	2,500	0005
PURPOSE OF GRANT OR CONTRIBUTION	TO SUPPORT IN FIGHT AGAINST CANCER.	HELP PHYSICIANS-IN-TRAINING WITH HIGH TECH SKILLS OF CUTTING EDGE MEDICAL SCIENCE AND TECHNOLOGY	Assist NJ Children with Cancer and THEIR FAMILIES BY PROVIDING EMOTIONAL, MATERIAL AND EMERGENCY FINANCIAL SUPPORT	TO RESTORE WELL-BEING TO THE VULNERABLE THROUGHOUT THE GREATER DENVER COMMUNITY BY DELIVERING SERVICES BASED ON JEWISH VALUES	TO PROVIDE FOOD TO THE NEEDY	CANCER RESEARCH
RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT	NONE 501 (C) (3)	501(C)(3)	501(C)(3)	501(C)(3)	501(C)(3)	501(C)(3)
RECIPIENT NAME AND ADDRESS	ISRAEL CANCER ASSOCIATION 525 SOUTH FLAGLER DRIVE, SUITE 202 WEST PALM BEACH, FL 33401	ARNOLD P FOUNDATION 619 PALISADE AVENUE, 2ND FLOOR ENGLEWOOD CLIFFS, NJ 07632	EFFMANUEL CANCER FOUNDATION 1833 FRONT STREET SCOTCH PLAINS, NJ 07076	JEWISH FAMILY SERVICE 3201 SOUTH TAMARAC DRIVE DENVER, CO 80231	CENTER FOR FOOD ACTION/CFA 192 WEST DEMAREST AVENUE ENGLEWOOD, NJ 07631	SAMUEL WAXMAN CANCER RESEARCH 420 LEXINGTON AVENUE SUITE 825 NEW YORK, NY 10170

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ATTACHMENT 12 (CONT'D)

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

AMOUNT	50,000	9, 100.	20,000	1,200	10,000.	100.
PURPOSE OF GRANT OR CONTRIBUTION	RESPECTS DIVERSITY AMONG JEWS AND WELCOMES PEOPLE AT EVERY AGE AND STAGE OF LIFE	PROVIDE THE VERY BEST CARE, SERVICE AND GUIDANCE FOR THE BENEFIT OF OUR ELDERLY AND THEIR FAMILIES, AT HOME AND AT OUR FACILITIES, NOW AND INTO THE FUTURE, RECARDLESS OF RACE, RELIGION OR FINANCIAL ABILITY, CONSISTENT WITH OUR JEWISH TRADITIONS AND VALUES	PROVIDE COMPREHENSIVE, STATE-OF-THE-ART PATIENT SERVICES.	SOCIAL SERVICE AND WELFARE ORGANIZATIONS	BRINGS PEOPLE OF ALL FAITHS TOGETHER	PROVIDES YEAR-ROUND SPORTS TRAINING AND ATHLETIC COMPETITION IN A VARIETY OF OLYMPIC-TYPE SPORTS FOR CHILDREN AND ADULTS WITH INTELLECTUAL DISABILITIES
RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT	501(C)(3)	501(C)(3)	501(C)(3)	501(C)(3)	501(C)(3)	501(C)(3)
RECIPIENT NAME AND ADDRESS	KAPLEN JCC ON THE PALISADES 411 EAST CLINTON AVENUE TENAFLY , NJ 07670	JEWISH HOME FOUNDATION OF NORTH JERSEY 10 LINK DRIVE ROCKLEIGH, NJ 07647-2504	ENGLEWOOD HOSPITAL 350 ENGLE STREET ENGLEWOOD, NJ 07631	COMMUNITY RESOURCE COUNCIL 387 MAIN STREET #1 HACKENSACK, NJ 07601-5824	CENTER FOR INTERRELIGIOUS UNDERSTAND 463 BARRELL AVENUE CARLSTADT, NJ 07072	SPECIAL OLYMPICS 4004 BARRETT DRIVE SUITE 206 RALEIGH, NC 27609

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53C3RI 2880 11/4/2010

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ATTACHMENT 12 (CONT'D)

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

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		
RECIPIENT NAME AND ADDRESS	AND FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
CHAVURAH BETH SHALOM 165 WESTERVELT AVE TENAFLY, NJ 07670-2531	501(C)(3)	DEDICATED TO THE VALUES OF EDUCATION, INCLUSIVE WORSHIP AND SOCIAL JUSTICE	1,000.
BERGEN COMMUNITY COLLEGE FOUNDATION 400 PARAMUS ROAD SCOSKIE HALL PARAMUS, NJ 07652	501(C)(3)	SUPPORT STUDENT SCHOLARSHIPS, FACULTY AND STAFF DEVELOPMENT, CONSTRUCTION, AND OTHER SPECIAL PROJECTS AND PROGRAMS	100
RED BANK CATHOLIC DANCE CO 112 BROAD STREET RED BANK, NJ 07701	501(C)(3)	SUPPORT HIGHER EDUCATION	750
FRANKLIN LAKES POLICEMEN'S BENELOVENT ASSOC NEW JERSEY	501(C)(3)	TO SUPPORT ORGANIZATION'S MISSION.	250.
GOODWILL RESCUE MISSION 79 UNIVERSITY AVE NEWARK, NJ 07102-2197	501(C)(3)	OFFERS HELP TO NJ'S URBAN POOR	200
SALVATION ARMY 615 SLATERS LANE PO BOX 269 ALEXANDRIA, VA 22313	501(C)(3)	CHARITABLE WORK	1,000.

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ATTACHMENT 12 (CONT'D)

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

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53C3RI 2880 11/4/2010

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

RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR

FOUNDATION STATUS OF RECIPIENT

501 (C) (3)

KING OF PRUSSIA, PA 19406-2101

133 IVY LANE, SUITE 200 SECURITY ON CAMPUS

RECIPIENT NAME AND ADDRESS

ATTACHMENT 12 (CONT'D)

PURPOSE OF GRANT OR CONTRIBUTION

AMOUNT

DEDICATED TO SAFE CAMPUSES FOR COLLEGE AND

500.

UNIVERSITY STUDENTS

271,400.

TOTAL CONTRIBUTIONS PAID

ATTACHMENT 12 PAGE 37

V 09-8 4

53C3RI 2880 11/4/2010

### SCHEDULE D (Form 1041)

Department of the Treasury Internal Revenue Service Name of estate or trust

### **Capital Gains and Losses**

THE MYRON AND ELAINE ADLER PRIVATE FOUNDATION

► 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

Employer identification number

2009

22-3516532 PRIVATE FOUNDATION INC. Note: Form 5227 filers need to complete only Parts I and II Part I 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 (see page 4 of the instructions) the entire year Subtract (e) from (d) (d) Sales price (Example 100 shares 7% preferred of "Z" Co) (mo, day, yr) (mo, day, yr) 1 a Enter the short-term gain or (loss), if any, from Schedule D-1, line 1b 1 b 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 Short-term capital loss carryover Enter the amount, if any, from line 9 of the 2008 Capital Loss 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 (d) Sales price (see page 4 of the instructions) the entire year Subtract (e) from (d) (Example 100 shares 7% preferred of "Z" Co) (mo, day, yr) (mo, day, yr) 6a b Enter the long-term gain or (loss), if any, from Schedule D-1, line 6b -70,568. 6b 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 1,878. Capital gain distributions 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, -68,690. column (3) on the back. For Paperwork Reduction Act Notice, see the Instructions for Form 1041. Schedule D (Form 1041) 2009

	dule D (Form 1041) 2009		<del>, , , , , , , , , , , , , , , , , , , </del>			Page 2
Pai	Summary of Parts I and II	nort	(1) Beneficiaries'	(2) Estat		(3) Total
	Caution: Read the instructions before completing this		(see page 5)	or trus		<u> </u>
13 14	Net short-term gain or (loss)	13				<del> </del>
		14a				-68,690.
a h	Total for year					
	28% rate gain					<del></del>
	Total net gain or (loss). Combine lines 13 and 14a					-68,690.
	e: If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4 (or Fo		L	s 14a and 15	columr	-L
	rt V, and <b>do not</b> complete Part IV If line 15, column (3), is a net loss, complete F					
Pai	t IV Capital Loss Limitation					
16	Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, F	Part I, I	ne 4c, if a trust), the sr	naller of		
а	The loss on line 15, column (3) or b \$3,000			L	16 (	3,000)
Note	e: If the loss on line 15, column (3), is more than \$3,000, <b>or</b> if Form 1041, pag <b>over Worksheet</b> on page 7 of the instructions to figure your capital loss carryove	je 1, lir	ne 22 (or Form 990-T, II	ne 34), is a lo	ss, com	plete the Capital Loss
_	t V Tax Computation Using Maximum Capital Gains Rate		<del></del>			
	n 1041 filers. Complete this part only if both lines 14a and 15 in colu		) are gains or an am	nount is ente	ered in	Part I or Part II and
	e is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is mo					,
	t <mark>ion:</mark> Skip this part and complete the worksheet on page 8 of the instru					
	ther line 14b, col (2) or line 14c, col (2) is more than zero, or					
	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					
	orm 990-T, <b>and</b> Form 990-T, line 34, is more than zero. Skip this pa er line 14b, col. (2) or line 14c, col. (2) is more than zero.	art and	complete the work	sneet on pa	ge o o	if the instructions if
		-	147	····		<del></del>
17	Enter taxable income from Form 1041, line 22 (or Form 990-T, line 3	34) .	17			
18	Enter the smaller of line 14a or 15 in column (2)					
4.0	but not less than zero			ŀ	,	
19	Enter the estate's or trust's qualified dividends		( %)		* -3	
	from Form 1041, line 2b(2) (or enter the qualified			1		
20	dividends included in income in Part I of Form 990-T)			,		
20 21	Add lines 18 and 19				<i>\$</i> ,	
41	amount from line 4g, otherwise, enter -0-				Ì	
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		` `	
23	Subtract line 22 from line 17 in 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					
	No. Enter the amount from line 23		25			
26	Subtract line 25 from line 24		26			
27	Are the amounts on lines 22 and 26 the same?					
	Yes. Skip lines 27 thru 30, go to line 31 No. Enter the smaller of line 17 or li	ine 22	27			
	_				ŀ	
28	Enter the amount from line 26 (If line 26 is blank, enter -0-)		. 28			
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 Rat					
	(see the Schedule G instructions in the instructions for Form 1041)				31	· <del></del>
_						
32	Add lines 30 and 31				32	<del></del>
33	Figure the tax on the amount on line 17 Use the 2009 Tax Rat					
	(see the Schedule Ginstructions in the instructions for Form 1041)				33	
34	Tax on all taxable income. Enter the smaller of line 32 or line 33	here a	and on Form 1041,	Schedule	ı	

Schedule D (Form 1041) 2009

Name of estate or trust as shown on Form 1041 Do not enter name and employer identification number if shown on the other side Employer identification number THE MYRON AND ELAINE ADLER PRIVATE FOUNDATION 22-3516532

acquired (mo , day, yr )	(mo , day, yr )	(see page 4 of the instructions)	(see page 4 of the instructions)	(f) Gain or (loss) Subtract (e) from (d)
04/27/2006	05/01/2009	83,875.	112,230.	-28,355
02/15/2008	05/01/2009	28,760.	42,322.	-13,562
04/27/2006	05/01/2009	22,060.	28,733.	-6,673
04/27/2006	05/01/2009	57,810.	79,353.	-21,543
04/27/2006	05/01/2009	21,160.	21,781.	-621
				186
				: :
				•
	02/15/2008 04/27/2006 04/27/2006	02/15/2008 05/01/2009 04/27/2006 05/01/2009 04/27/2006 05/01/2009	02/15/2008     05/01/2009     28,760.       04/27/2006     05/01/2009     22,060.       04/27/2006     05/01/2009     57,810.	02/15/2008     05/01/2009     28,760.     42,322.       04/27/2006     05/01/2009     22,060.     28,733.       04/27/2006     05/01/2009     57,810.     79,353.

Schedule D-1 (Form 1041) 2009

Form 8	868 (Re	4-2009)							Page 2
• If y	ou ar	e filing for an Additional (N	Not Automatic) 3	-Month Extensio	n, complete only	Part II a	nd check this bo	x	► X
Note	. Only	complete Part II if you ha	ve already been	granted an auton	natic 3-month ext	ension o	n a previously file	d Form 8	868.
<ul><li>If y</li></ul>	ou ar	e filing for an Automatic 3-	-Month Extensio	n, complete only	Part I (on page 1	I).	•		
Par		Additional (Not Autor	natic) 3-Mont	h Extension o	f Time. Only f	ile the	original (no co	pies ne	eded).
Туре	Name of Exempt Omanization THE MYRON AND FLATNE ADLED					Employer identification number			
print		PRIVATE FOUNDATION INC.					22-35165	2-3516532	
File by	Number street and room or suite no. If a D.O. hey and instructions						<del></del>		
extend due di	ed	C/O FLATNE ADLER MYRON MANUFACTURING CORP					For IRS use only	•	
filing t	he	City, town or post office, st	ate, and ZIP code. I	For a foreign addres	s, see instructions				
return ınstruc		205 MAYWOOD AVE	ENUE, MAYWOO	D, NJ 07607	7				
Chec	k typ	of return to be filed (File	a separate appl	lication for each re	etum):				
		n 990					Form 1041-A		Form 6069
	Forn	990-BL	Form 990-T	(sec. 401(a) or 4	08(a) trust)		Form 4720	11	Form 8870
М		990-EZ		(trust other than		H	Form 5227		
STO		not complete Part II if yo				th exter		ously file	ed Form 8868.
		s are in the care of > E							
		ne No ▶ 201 843-6			AX No. ▶			<del></del>	
		anization does not have a	an office or place	<del></del>		heck this	box		▶□
		for a Group Return, enter t							
		ole group, check this box							
		names and EINs of all m			group, cricok tilis		, Pand att	acii a	
		est an additional 3-month			5/2010	<del></del>			
		alendar year 2009, or o				and en	dina	<del></del> ·	
		tax year is for less than 1	,	· · · · · · · · · · · · · · · · · · ·	ial return	- and en Final reti		00 ID 200	counting period
		in detail why you need the			ECESSARY TO				ounting period
•		RATE RETURN IS NO							
	-1000	THE REPORT TO THE	71 121 11111				<del></del>	<del>-</del>	<del></del>
							·		<del></del>
8a	If the	application is for Form	990-B1 990-PE	990-T 4720 or	6069 enter the	tentativ	e tay less any	TT	
Qa		efundable credits. See insti		550-1, 4720, 01	OOOD, CIRCI IIIO	tomany	c tax, loss ally	8a \$	120
L		application is for Form 9		20 or 6069 en	er any refundable	e credits	and estimated	Ua   V	100
D		ayments made Include							
	-		any prior year o	verpayment and	wed as a cledit	and an	y amount paid	8Ь \$	4740
		ously with Form 8868.	from line to loc	lude vous pours	est with this form	or if ro	auirad dapasit	100 3	1,210
С		nce Due. Subtract line 8b						8c \$	NONE
	Witn	FTD coupon or, if required	, by using EF IPS				see instructions.	[86] \$	IVOIV
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		es of perjury, I declare that I hect, and complete, and that I am a			iheralina ecuendies si	A SIGNAL	, and to tile 00\$1	OI HIN KIN	Swieda elia nailei'
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Signa	ture 🕨	Jour 1			Tiue V		Date		
		PMG LLP	DV D3D101311					⊦om 8	868 (Rev. 4-2009)
		(50 JOHN F. KENNE							
	•	SHORT HILLS, NJ 0	7078						