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Form 990-PF

Return of Private Foundation

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

OMB No 1545-0052

Department of the Treasury

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

		Venide Service					
For	caler	dar year 2009, or tax year beginning		, and ending		······································	
G (Check	all that apply: Initial return		ormer public charity	Final return		
		Amended return	Address chan	ge L	Name change		
llse	Use the IRS Name of foundation A Employer identification number						
label.							
	nerwi	harm thamph a liberate	FOUNDATION	· · · · · · · · · · · · · · · · · · ·	<u> 26-3528330</u>		
	print	Number and street (or P O box number if mail is not de	elivered to street address)	Room/suite	B Telephone number		
	r type	E(11(1 1) DO21 1000			<u>(570)424-0</u>	787	
	Spe	I GIV OF IOWN, STATE, AND ZIP COUR			C If exemption application is p	ending, check here	
IRSU	ructio	STROUDSBURG, PA 1836	0		D 1. Foreign organizations	s, check here	
H (Check	type of organization: X Section 501(c)(3) ex	kempt private foundation		Foreign organizations me check here and attach co	eting the 85% test, mputation	
	ີ Se	ction 4947(a)(1) nonexempt charitable trust	Other taxable private founda	ition	 E If private foundation sta	tus was terminated	
I Fa	air ma	rket value of all assets at end of year J Accounti		Accrual	under section 507(b)(1)		
(fi	rom F	Part II, col. (c), line 16)	ther (specify)		F If the foundation is in a	60-month termination	
▶	-\$		mn (d) must be on cash b	basis.)	under section 507(b)(1)		
Pa	art I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements for charitable purposes	
		necessarily equal the amounts in column (a)	expenses per books	income	income	(cash basis only)	
	1	Contributions, gifts, grants, etc., received	10.		N/A		
	2	Check X if the foundation is not required to attach Sch B					
	3	Interest on savings and temporary cash investments	20.	20.		STATEMENT 1	
	4	Dividends and interest from securities	20,657.	20,657.		STATEMENT 2	
	5a	Gross rents				-	
	Ь	Net rental income or (loss)	. 5 .	\$ · ·			
	6a	Net gain or (loss) from sale of assets not on line 10	-93.	,			
Revenue	Ь	Gross sales price for all assets on line 6a 134,646.	1	-	ىدارى بادى بادى يىسىداد جورسىدورىد. در در ساسىدارىدى يىد		
e Ve	7	Capital gain net income (from Part IV, line 2)		0.	付たりた	WED	
č	8	Net short-term capital gain					
	9	Income modifications			P FINIT 2	lot nine	
	10a	Gross sales less returns and allowances		-	(A) 2010 Tr	E 10 10	
	Ь	Less Cost of goods sold) part		
		Gross profit or (loss)			I UGIJEI	3, U 1	
	11	Other income			1/		
	12	Total Add lines 1 through 11	20,594.	20,677.			
	13	Compensation of officers, directors, trustees, etc	0.	0.	_	0.	
	14	Other employee salaries and wages					
	15	Pension plans, employee benefits					
ses	16a	Legal fees STMT 3	4,637.	4,637.		0.	
		Accounting fees STMT 4	3,500.	3,500.		0.	
X	C	Other professional fees			, , , , , , , , , , , , , , , , , , , ,		
Š	17	Interest					
ati	18	Taxes STMT 5	10.	0.		0.	
istr	19	Depreciation and depletion					
ᄩ	20	Occupancy					
Αđ	21	Travel, conferences, and meetings		<u> </u>			
p	22	Printing and publications					
e G	23	Other expenses STMT 6	6,344.	6,344.		0.	
Operating and Administrative Expen	24	Total operating and administrative	7,7-2				
er:	١	expenses. Add lines 13 through 23	14,491.	14,481.		0.	
Ö	25	Contributions, gifts, grants paid	20,000.			20,000.	
	ľ	Total expenses and disbursements.					
		Add lines 24 and 25	34,491.	14,481.		20,000.	
	27	Subtract line 26 from line 12:		<u> </u>		· · · · · · · · · · · · · · · · · · ·	
	l	Excess of revenue over expenses and disbursements	-13,897.				
	1	Net investment income (if negative, enter -0-)		6,196.			
	l	Adjusted net income (if negative, enter -0-)			N/A		
2005							

923501 02-02-10 LHA For Privacy Act and Paperwork Reduction Act Notice, see the instructions.

Form **990-PF** (200

	-	THE DESTER G ABELOFF	<u> FU</u>	Paginning of year		3526330 raye 2
P	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only		Beginning of year (a) Book Value	End of (b) Book Value	(c) Fair Market Value
Assets	2 3 4 5 6 7 10a b	Cash - non-interest-bearing Savings and temporary cash investments Accounts receivable ▶ Less: allowance for doubtful accounts ▶ Pledges receivable ▶ Less: allowance for doubtful accounts ▶ Grants receivable Receivables due from officers, directors, trustees, and other disqualified persons Other notes and loans receivable Less: allowance for doubtful accounts ▶ Inventories for sale or use Prepaid expenses and deferred charges Investments - U.S. and state government obligations Investments - corporate stock Investments - corporate bonds STMT Investments - land, buildings, and equipment basis		23,893. 2,494. 135,427. 163,162.	7. 135,427. 200,424.	7. 133,413. 210,301.
	13 14	Less accumulated depreciation Investments - mortgage loans Investments - other Land, buildings, and equipment: basis Less accumulated depreciation Other assets (describe	9	175,026.	101,404.	101,878.
Liabilities	17 18 19 20 21	Total assets (to be completed by all filers) Accounts payable and accrued expenses Grants payable Deferred revenue Loans from officers, directors, trustees, and other disqualified persons Mortgages and other notes payable Other liabilities (describe)	500,002.	486,105.	494,442.
Net Assets or Fund Balances	24 25 26 27 28 29 30	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. Unrestricted Temporarily restricted Permanently restricted Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. Capital stock, trust principal, or current funds Paid-in or capital surplus, or land, bldg., and equipment fund Retained earnings, accumulated income, endowment, or other fund Total net assets or fund balances		0. 0. 0. 500,002. 500,002.	0. 0. 0. 486,105. 486,105.	
1 2 3 4	(mus Ente Othe Add	Analysis of Changes in Net Assets or Full Inet assets or fund balances at beginning of year - Part II, column (stagree with end-of-year figure reported on prior year's return) or amount from Part I, line 27a or increases not included in line 2 (itemize)			486,105.	500,002. -13,897. 0. 486,105.
		net assets or fund balances at end of year (line 4 minus line 5) - Pa	art II, co	olumn (b), line 30	6	486,105.

•

20,000.

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate.

See the Part VI instructions.

8 Enter qualifying distributions from Part XII, line 4

	n 990-PF			G ABELOFF					<u> 26-</u>	<u>3528</u>	330		age 4
	ırt VI	'Excise Tax Ba						940(e), or 4	948 -	see ir	<u>ıstru</u>	ctior	1S)
1a	Exempt	operating foundations	described in sectio	n 4940(d)(2), check h	ere 🕨 📖 and er	nter "N/A	A" on line 1.	j					
		ruling or determination											
b	Domest	tic foundations that mee	et the section 4940	(e) requirements in Pa	irt V, check here 🕨		and enter 1%	þ	1				<u>62.</u>
		I, line 27b											
		r domestic foundations						. (b) 丿					
2	Tax und	der section 511 (domes	tic section 4947(a)	(1) trusts and taxable	foundations only. Ot	hers en	iter -0-)		2				<u>0.</u>
3		es 1 and 2							3		_		<u>62.</u>
4		A (income) tax (domes				thers er	nter -0-)		4				<u>0.</u>
5	Tax bas	sed on investment inco	me. Subtract line	4 from line 3. If zero o	r less, enter -0-				5_				<u>62.</u>
6		Payments:				1	1						
		stimated tax payments a	· -			6a							
		foreign organizations -				6b							
C	Tax paid	d with application for ex	tension of time to	file (Form 8868)		6c		62.					
	-	withholding erroneous	-			<u>6d</u>		····					
7	Total cr	edits and payments. Ad	ld lines 6a through						7				<u>62.</u>
8		ny penalty for underpay			if Form 2220 is attac	ched			8				
9		e. If the total of lines 5 a						>	9				0.
10	Overpay	yment If line 7 is more	than the total of lir	nes 5 and 8, enter the	amount overpaid			, •	10				
		ne amount of line 10 to						Refunded >	11				
		A Statements										× 1	<u> </u>
1a	-	the tax year, did the fou	ndation attempt to	influence any nationa	i, state, or local legis	lation o	r did it particij	oate or intervene	ın			Yes	
		itical campaign?									<u> 1a</u>		<u>X</u>
b		pend more than \$100 d									1b		<u>X</u>
		nswer is "Yes" to 1a			of the activities and	l copie	s of any ma	tenals publishe	d or				
		uted by the foundation											
		foundation file Form 11	-								1c		<u>X</u>
d		ne amount (if any) of tax				-		•					
		the foundation. > \$						0.	-				
е		ne reimbursement (if an		dation during the year	for political expendi	ture tax	(Imposed on	foundation					
		ers. > \$									_		
2		foundation engaged in	-		een reported to the IF	157					2		X
		," attach a detailed d	•										
3		foundation made any o					ent, articles o	incorporation, (or				37
		, or other similar instrur									3		<u>X</u>
		foundation have unrela	=		more during the year	r?			3.1	/ 7	4a		<u>X</u> _
		has it filed a tax return							N	/A	4b		
5		ere a liquidation, termin			• •						5		<u>X</u>
		," attach the stateme				4b							
6		requirements of section		o sections 494 i throu	gn 4945) satistied ei	mer:							
	•	nguage in the governing	•										
	-	ate legislation that effec	-	governing instrument	so that no mandatory	y airecti	ions that conf	nct with the state	aw		_	v	
_		in in the governing inst		at any tima divisar than							6	X	
′		foundation have at leas			yearr						7		
۰.		," complete Part II, c	. ,,		tored (annualtrustic)								
φā	PA	ne states to which the fo	omuation reports o	n with which it is regis	teren (see instructio	118)							
L		nswer is "Yes" to line 7,	has the foundation	furnished a service C	orm 000. PE to the At	Horney	Congret for d	ncianata)					
0				· ·		HOITIES	delierar (or 0	esignate)			Q.L	х	
٥		state as required by Ge			•	ntion Ac	2/2/1/2) or 4	149(1)(E) for act	indar		8b	Λ	
9		oundation claiming stati 09 or the taxable year b		•				one(j)(o) ful call	iiudi		9		¥
10		persons become subs			·			l addresses			10		$\frac{X}{X}$
	u y	.E 00.10 00001110 00001		nig tile tun youli l		nound	with collins all						

Form 990-PF (2009) THE LESTER G ABELOFF FOU		_, ··· ·	26-35283	30 Page 6
Part VII-B Statements Regarding Activities for Which I	Form 4720 May Be F	Required (contin	ued)	
5a During the year did the foundation pay or incur any amount to:				
(1)' Carry on propaganda, or otherwise attempt to influence legislation (section	า 4945(e))?	Y	es 🗓 No	
(2) Influence the outcome of any specific public election (see section 4955); of	r to carry on, directly or indire	ectly,		
any voter registration drive?			es X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	☐ Y6	es X No	
(4) Provide a grant to an organization other than a charitable, etc., organizatio				
509(a)(1), (2), or (3), or section 4940(d)(2)?	.,	[v	es X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or adjunctional nurnoses, or f		35 (22) 110	
the prevention of cruelty to children or animals?	or bouldational parposes, or i		es X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify unit	far the exceptions described i		3 22 140	
section 53.4945 or in a current notice regarding disaster assistance (see instru		in Negulations	N/A	5b
Organizations relying on a current notice regarding disaster assistance (see histo	·			00
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption for				
expenditure responsibility for the grant?		I/A L Ye	es LLI No	
If "Yes," attach the statement required by Regulations section 53 494	` '			
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on		[===	
a personal benefit contract?		Ye	es X No	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?		<u></u>	Sb X
If "Yes" to 6b, file Form 8870.				
7a At any time during the tax year, was the foundation a party to a prohibited tax s		Ye	es 🗶 No 📙	
b If yes, did the foundation receive any proceeds or have any net income attribut				7b
Part VIII Information About Officers, Directors, Trust	ees, Foundation Ma	magers, Highly	y	
- Faid Employees, and Contractors				
1 List all officers, directors, trustees, foundation managers and their		T	(4) 0	
(a) Name and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
(a) name and address	to position	enter -0-)	compensation	allowances
LESTER G ABELOFF	PRESIDENT			
RR 1 BOX 4005				
STROUDSBURG, PA 18360	1.00	0.	0.	0.
SAMUEL W NEWMAN	VICE PRESIDEN	T		
RD 5 BOX 5136				
STROUDSBURG, PA 18360	1.00	0.	0.	0.
	SECRETARY/TRE			
115 RANSBERRY AVE				
EAST STROUDSBURG, PA 18301	1.00	0.	0.	0.
		ł		
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none,	enter "NONE."	l	
	(b) Title, and average		(d) Contributions to employee benefit plans and deferred	(e) Expense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	and deferred compensation	account, other allowances
NONE	dovotod to position	·	compensation	uno wanoos
HOND				
				
		-		
		-		
		-	<u></u> .	
T. A. I number of allows are laures and are - 0.00		<u> </u>		
Total number of other employees paid over \$50,000				0 PC DE (2000)
			Form S	90-PF (2009)

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Total. Add lines 1 through 3

P	art X Minimum Investment Return (All domestic foundations must complete this part Foreign foundations	ndations, s	ee instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	486,834.
b	Average of monthly cash balances	1b	21,151.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	507,985.
е	Reduction claimed for blockage or other factors reported on lines 1a and		· · · · · · · · · · · · · · · · · · ·
	1c (attach detailed explanation) 1e 0 •		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	507,985.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	7,620.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	500,365.
6	Minimum investment return. Enter 5% of line 5	6	25,018.
P	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part.)	id certain	
1	Minimum investment return from Part X, line 6	1	25,018.
2a	Tax on investment income for 2009 from Part VI, line 5		
b	Income tax for 2009. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	62.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	24,956.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	24,956.
6	Deduction from distributable amount (see instructions)	6	0.
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	24,956.
P	art XII Qualifying Distributions (see 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	20,000.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	20,000.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	<u>62.</u>
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	19,938.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	malifies for t	he section

4940(e) reduction of tax in those years.

.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI,			2000	
line 7				24,956.
2 Undistributed income, if any, as of the end of 2009				21/3300
a Enter amount for 2008 only			4,976.	
b Total for prior years:				
· , ,		0.		
3 Excess distributions carryover, if any, to 2009:				
a From 2004				
b From 2005				
c From 2006				
d From 2007				
e From 2008				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2009 from				
Part XII, line 4: ► \$ 20,000.				
a Applied to 2008, but not more than line 2a			4,976.	
b Applied to undistributed income of prior			2/3/01	
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2009 distributable amount				15,024.
e Remaining amount distributed out of corpus	0.			13,044.
5 Excess distributions carryover applied to 2009	0.	-		0.
(If an amount appears in column (d), the same amount				
must be shown in column (a)) 6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income. Subtract	•			
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2008. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2009. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2010				9,932.
7 Amounts treated as distributions out of				•
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2004				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2010				
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:				
a Excess from 2005				
b Excess from 2006				
c Excess from 2007				
d Excess from 2008				
e Excess from 2009				
		·		5 000 DE (0000)

Form 990-PF (2009) THE LES Part XIV Private Operating F	TER G ABELO			26-35 N/A	28330 Page 10
1 a if the foundation has received a ruling of			7, 44030011 3)	N/A	
foundation, and the ruling is effective fo					
b Check box to indicate whether the found		=	a control	4942(j)(3) or 49	40(-)(5)
2 a Enter the lesser of the adjusted net	Tax year	g loundation described r	Prior 3 years	1 4942(J)(3) OI 49	42(j)(5)
•	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total
income from Part I or the minimum	(2) 2000	(8) 2000	(6) 2007	(4) 2000	(6) 10141
investment return from Part X for					
each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the					
alternative test relied upon: a "Assets" alternative test - enter:					
(1) Value of all assets]			
(2) Value of assets qualifying under section 4942(i)(3)(B)(i)					
b "Endowment" alternative test - enter					
2/3 of minimum investment return					
shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:	,= .		·		
' <u>'</u>					
(1) Total support other than gross investment income (interest,					
dividends, rents, payments on	<u> </u>				
securities loans (section					
512(a)(5)), or royalties)					
(2) Support from general public					
and 5 or more exempt organizations as provided in					
section 4942(j)(3)(B)(III)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income					-
Part XV Supplementary Info	rmation (Comple	te this part only	if the foundation	had \$5,000 or mo	re in assets
at any time during t	he year-see the i	instructions.)		•	
1 Information Regarding Foundation	n Managers:				
a List any managers of the foundation wh	_	than 2% of the total contr	ributions received by the	foundation before the clos	e of any tay
year (but only if they have contributed n	nore than \$5,000). (See s	ection 507(d)(2).)	ibalions received by the	Todildanon octore are cros	c of any tax
NONE		(, , , ,			
b List any managers of the foundation wh	o own 100/ or more of th	a stack of a paragration /	or an aqually large ports	on of the ownership of a pa	ertaarahin ar
other entity) of which the foundation ha			or an equally large porti	on the ownership of a pa	rthership or
••	ya 1070 or ground mitoroc	-u			
NONE					
2 Information Regarding Contributi					
Check here ▶ if the foundation of					
the foundation makes gifts, grants, etc.	(see instructions) to indiv	riduals or organizations u	nder other conditions, co	omplete items 2a, b, c, and	<u>d</u>
a The name, address, and telephone num			addressed:		
LESTER G ABELOFF, (5					
RR1 PO BOX 4005, STR	OUDSBURG, P	A 18360			
b The form in which applications should b	e submitted and informat	tion and materials they sh	ould include:		
APPLICATION OF FUNDI		-			
c Any submission deadlines:					
9/30					
d Any restrictions or limitations on awards	Such as by geographics	al areas, charitable fielde	kinds of institutions or a	other factors	<u> </u>
AT LEAST 70% OF CONT					WHOGE
PRIMARY PURPOSE IS T	O DEMERTI P	FORTE OF OF	MIDU KELIGI		Form 990-PF (2009)
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Part XV Supplementary Information	(continued)			
3 Grants and Contributions Paid During the Yo	ear or Approved for Future	Payment	·	
Recipient	If recipient is an individual,	Foundation	Durnoes of grant or	
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	status of recipient	Purpose of grant or contribution	Amount
a Paid during the year TEMPLE ISRAEL OF THE POCONOS 660 WALLACE ST STROUDSBURG, PA 18360		PUBLIC	RELIGIOUS	20,000.
Total	<u> </u>		▶ 3a	20,000.
b Approved for future payment NONE				0.
Total			<u>▶ 3b</u>	
923611 02-02-10			F	orm 990-PF (2009)

Analysis of Income-Producing Activities Part XVI-A

Enter gross amounts unless otherwise indicated.	Unrelated	business income		ed by section 512, 513, or 514	(e)
	(a) Business	(b) Amount	Exclu- sion	(d) Amount	Related or exempt function income
1 Program service revenue:	code	7 mount	code	Amount	
a			+		
b	-				
<u> </u>	I I				****
d	i I				
e					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments			14	20.	
4 Dividends and interest from securities			14	20,657.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income		-			
8 Gain or (loss) from sales of assets other than inventory			18	-93.	,
9 Net income or (loss) from special events			1 - 1	331	
10 Gross profit or (loss) from sales of inventory					·
11 Other revenue:					
a				·	
b	1 1				
С	1				· · · · · · · · · · · · · · · · · · ·
d	1 1				
e					
12 Subtotal. Add columns (b), (d), and (e)		(\Box	20,584.	0.
13 Total. Add line 12, columns (b), (d), and (e)				13	20,584.
(See worksheet in line 13 instructions to verify calculations.)					

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishing the foundation's exempt purposes (other than by providing funds for such purposes).	nent of
		····
		
923621 02-02-10		orm 990-PF (2009)

2a Is 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 52?? Yes No	P	art X	VII · Information Re	egarding Transfers	To and Transactions a	nd Relationships With Nonch	aritable	•	<u> </u>
the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? Transfers from the reporting foundation to a noncharidable exempt organization of: (1) Cash (2) Other assets (3) Sists of assets to an oncharidable exempt organization (3) Porticipates of assets from a noncharidable exempt organization (3) Porticipates of assets from a noncharidable exempt organization (3) Rental of facilities, equipment, or other assets (4) Remittivisation of accurate a transparenties (5) Loans or loan purarieties (6) Performance of services or membership or fundratising solicitations (8) Performance of services or membership or fundratising solicitations (9) Performance of services or membership or fundratising solicitations (9) Performance of services or membership or fundratising solicitations (9) Performance of services or membership or fundratising solicitations (9) Performance of services or membership or fundratising solicitations (9) Performance of services or membership or fundratising solicitations (9) Performance of services or membership or fundratising solicitations (9) Performance of services or membership or fundratising solicitations (9) Performance of services or membership or fundratising solicitations (9) Performance of services or membership or fundratising solicitations (9) Performance of services or membership or fundratising solicitations (9) Performance of services or services services (9) Performance of services or services received. (9) Amount involved (9) Amoun	1	Did ti			lowing with any other organization	n described in costion EO1/o) of		Vac	No
a Transfers from the reporting foundation to a noncharidable exempt organization of: (1) Cashs of assets to a noncharidable exempt organization (2) Purchases of assets from a noncharidable exempt organization (3) Rental of facilities, equipment, or other assets (4) Rembursement arrangements (5) Loans or loan guarantees (6) Performance of services or membership or fundations of solidations (9) The answer to any of the above is "Key, complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction in sharing arrangement, show in column (d) the value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction in sharing arrangement, show in column (d) the value of the goods, other assets, and the section of the production of the	•		-			, ,	-	163	140
(2) Other sasets b Other transactions: (1) Sales of assets to a noncharidable exempt organization (2) Purchases of assets from a noncharidable exempt organization (3) Rental of facilities, equipment, or other assets (4) Remotivement arrangements (5) Loans or loan guarantees (6) Performance of services or membership or fundrasing solicitations (6) Performance of services or membership or fundrasing solicitations (7) Find answer for any of the above is "Ves," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services received. (8) Performance of services or weight of the poods, other assets, or services received. (9) Performance of services or weight organization (b) Annount involved (c) Name of noncharidable exempt organization (d) Description of sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (a) Time of (b) Annount involved (c) Name of noncharidable exempt organization (d) Description of translation, vineactions, and sharing arrangements. (a) Name of organization (b) Type of organization (c) Description of reliationship. (b) Annount involved (c) Name of organization (b) Type of organization (c) Description of reliationship. (c) Description of reliationship. (d) Description of reliationship. (e) Description of reliationship. (f) Bernitation of translationship or translationship organization (c) Description of reliationship. (e) Date of prepared of prayiny, I cleaters that These examined the letture, including accompanying schedules and databeterits, and to the best of my knowledge and belief, it is true, cereori, yellowed to children trustee. (e) Perparative of prayiny, I cleaters that These examined the letture, including accompanying schedules and databeterits, and to the best of my knowledge and belief, it is true, cereori, yellowed to children trustee. (f) Perparative o			•			izations			
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(6) Performance of services or membership or fundrasing solicitations c Sharing of facilities, equipment, mailing lists, other assests, or paid employees d If the answer to any of the above 5° (es.) complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (a) Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, sansactions, and sharing arrangements N/A 2a Is the foundation directly or indirectly affiniated 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 52?? b if Yes, complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A Under penalties of perjury, 1 declare that I have examined the return, including accompanying schedules and statements, and to the best of my knowledge and chief, it is true, correct, section 501(c) of the foundation of transfers that I have examined the return, including accompanying schedules and statements, and to the best of my knowledge and chief, it is true, correct, section 501 (c) of the control trustee Date Under penalties of perjury, 1 declare that I have examined the return, including accompanying schedules and statements, and to the best of my knowledge and chief, it is true, correct, section 501 (c) of the control trustee Date Under penalties of perjury, 1 declare that I have examined the return, including accompanying schedules and statements, and to the best of my knowledge and chief, it is true, correct, section 501 (c) of the control trustee Date Figure 11 (C) Description of repairer is identifying number section 501 (c) of the control trustee Date Figure 12 (C) Description of repair									
(6) Performance of services or membership or fundrasing solinitations c Sharing of facilities, equipment, mailing lists, other assets, or paid employees d If the answer to any of the above is "Se," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (g) the value of the goods, other assets, or services received. (a) Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, vanisactions, and sharing arrangements N/A 2a Is 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 52??									
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d If the answer to any of the above is Yes, complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (a) Line no (b) Amount involved (c) Name of noncharidable exempt organization (d) Description of transfers, transactions, and sharing arrangements. N/A 2a. Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes X No									
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N/A 2a Is 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? ■ If "Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A Under penalties of perjury, Lectare that I have examined this return, including accompanying schedules and statements, and to the beat of my knowledge and belief, it is true, correct, sections of prepare (other than taxpayer or fiduciary) is based on all information of which prepare has any knowledge Signature of officer or trustee Preparer's Signature of officer or trustee Signature of officer or trustee Preparer's Signature or trustee Preparer's Signature or trustee Preparer's Signature or trustee Signature of officer or trustee Signature of officer or trustee Signature of officer or trustee Preparer's Signature or trustee Signature of officer or trustee Signature or trustee	(a)					(d) Description of transfers transactions an	d charing an	angeme	
2a Is 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 52?? Yes	(-,	,	(b) / tilloune tilloune			(a) bescription of transfers, transactions, an	<u> </u>	angeme	
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes X No				14/	Λ	· -			
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes X No									
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes X No	_								
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In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes X No					 -				
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes X No	2	n Ictho	foundation directly or indirect	the affiliated with or related to	one or more tay everant ergeniz				
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, sectaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge Signature of officer or trustee Preparer's signature Preparer's signature Firm's name (or yours KLATZKIN & COMPANY, LLP if self-employed), 1670 WHITEHORSE HAM SQ RD	20					ations described		v	٦ ٨١ ـ
(a) Name of organization N/A Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and to the best of my knowledge and belief, it is true, correct, and to the best of my knowledge and belief, it is true, correct, and to the best of my knowledge and belief, it is true, correct, and to the best of my knowledge and belief, it is true, correct, and to the best of my knowledge and belief, it is true, correct, and to the best of my knowledge and belief, it is true, correct, and to the best of my knowledge and belief, it is true, correct, and to the best of my knowledge and belief, it is true, correct, and to the best of my knowledge and belief, it is true, correct, and to the best of my knowledge and belief, it is true, correct, and to the best of my knowledge and belief, it is true, correct, and the best of my knowledge and belief, it is true, correct, and the best of my knowledge and belief, it is true, correct, and the best of my knowledge and belief, it is true, correct, and the best of my knowledge and belief, it is true, correct, and the best of my knowledge and belief, it is true, correct, and the best of my knowledge and belief, it is true, correct, and the best of my knowledge and belief, it is true, correct, and the best of my knowledge and belief, it is true, correct, and the best of my knowledge and belief, it is true, correct, and the best of my knowledge and belief, it is true, correct, and the best of my knowledge and belief, it is true, correct, and the best of my knowledge and belief, it is true, correct, and the best of my knowledge and belief, it is true, correct, and the best of my knowledge and belief, it is true, correct, and the best of my knowledge a			* *		1 36611011 321		Yes	Λ	7 1/10
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and the perparer has any knowledge. Signature of officer or trustee Preparer's signature Date Title Date Check if self-employed Firm's name (or yours of the preparer's identifying number self-employed). A Title of the preparer's identifying number self-employed of the preparer's identifying number self-employed.		y 11 16			(b) Type of organization	(c) Description of relation	ehin		
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and to the best of my knowledge and belief, it is true, correct, and to the best of my knowledge and belief, it is true, correct, and to the best of my knowledge and belief, it is true, correct, and to the best of my knowledge and belief, it is true, correct, and to the best of my knowledge and belief, it is true, correct, and to the best of my knowledge and belief, it is true, correct, and to the best of my knowledge and belief, it is true, correct, and to the best of my knowledge and belief, it is true, correct, and to the best of my knowledge and belief, it is true, correct, and to the best of my knowledge and belief, it is true, correct, and to the best of my knowledge and belief, it is true, correct, and to the best of my knowledge and belief, it is true, correct, and the best of my knowledge and belief, it is true, correct, and the best of my knowledge and belief, it is true, correct, and the best of my knowledge and belief, it is true, correct, and the best of my knowledge and belief, it is true, correct, and the best of my knowledge and belief, it is true, correct, and the best of my knowledge and belief, it is true, correct, and the best of my knowledge and belief, it is true, correct, and the best of my knowledge and belief, it is true, correct, and the best of my knowledge and belief, it is true, correct, and the best of my knowledge and belief, it is true, correct, and the best of my knowledge and belief, it is true, correct, and the best of my knowledge and belief, it is true, correct, and the best of my knowledge and belief, it is true, correct, and the best of my knowledge and the best of my kn					(b) type of organization	(e) beservation of relation			
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Signature of officer or trustee Check if self-employed Signature Signat								-	
Signature of officer or trustee Check if self-employed Signature Signat									
Signature of officer or trustee Check if self-employed Signature Signat									
Signature of officer or trustee Check if self-employed Signature Signat	_	Under p	enalties of perjury, I declare that I h	ave examined this return, including	g accompanying schedules and stateme	ents, and to the best of my knowledge and belief, it	s true, corre	ct,	
Signature of officer or trustee Signature of officer or trustee Date Title	,	and.cor	eclaration of preparer (other	r than taxpayer or fiduciary) is base	ed on all information of which preparer h	has any knowledge			
Signature of officer or trustee Signature of officer or trustee Date Title	(ellau H	ans al	71	1 614/10	K			
Firm's name (or yours KLATZKIN & COMPANY, LLP EIN ► 1670 WHITEHORSE HAM SQ RD	e,	Sı		17	Date	Title			
Firm's name (or yours KLATZKIN & COMPANY, LLP EIN ► 1670 WHITEHORSE HAM SQ RD	Ħ		Propararis N /	1 1	· - · · · · · · · · · · · · · · · · · ·		rer's identify	ring num	ber
Firm's name (or yours KLATZKIN & COMPANY, LLP EIN ► 1670 WHITEHORSE HAM SQ RD	Ē	ج ہے	signature Tau a	Livilier		self-			
If self-employed), address, and ZIP code HAMILTON, NJ 08690-3513 Phone no. (609)890-9189	<i>(</i> 1)	o a g	Firm's name (or vours KT, AT	1	IV T.T.P	, , , , , , , , , , , , , , , , , , , ,			
address, and ZIP code HAMILTON, NJ 08690-3513 Phone no. (609)890-9189		rep Jse	rf self-employed). 1670			CIIV			
		~ ~	address, and ZIP code HAMI			Phone no. (609	3)890	-91	89

923622 02-02-10

FORM 990-PF INTEREST ON SAV	INGS A	ND TEM	PORARY C	ASH II	NVESTMENTS	STATEMENT	1
SOURCE						AMOUNT	
WILMINGTON TRUST CO							20.
TOTAL TO FORM 990-PF, PART I	, LINE	3, CO	LUMN A				20
FORM 990-PF DIVIDEN	DS AND	INTER	EST FROM	SECUI	RITIES	STATEMENT	2
SOURCE		GROSS	AMOUNT		ITAL GAINS IVIDENDS	COLUMN (A AMOUNT	.)
WILMINGTON TRUST INT WILMINGTON TRUST US INT			15,419. 5,238.		0.	15,4 5,2	
TOTAL TO FM 990-PF, PART I,	LN 4		20,657.		0.	20,6	57.
FORM 990-PF		LEGAL	FEES			STATEMENT	3
DESCRIPTION	EXPE	A) NSES BOOKS	(B) NET INVI MENT INC		(C) ADJUSTED NET INCOM		
LEGAL		4,637.	4	,637.			0 .
TO FM 990-PF, PG 1, LN 16A		4,637.	4	,637.			0.
FORM 990-PF	AC	COUNTI	NG FEES			STATEMENT	4
DESCRIPTION	EXPE	A) NSES BOOKS	(B) NET INVI MENT INC		(C) ADJUSTED NET INCOM		
ACCOUNTING	· · · · · · · · · · · · · · · · · · ·	3,500.	3	500.			0.
TO FORM 990-PF, PG 1, LN 16B		3,500.	3 ,	500.			0.

FORM '990-PF	TAXES			STATEMENT 5		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVE MENT INC		(C) ADJUSTED NET INCOM		
FED TAX	10.		0.			0.
TO FORM 990-PF, PG 1, LN 18 =	10.		0.			0.
FORM 990-PF	OTHER EXPENSES			STATEMENT 6		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVE MENT INC		(C) ADJUSTED NET INCOM		
INVESTMENT FEES TRUST FEE INSURANCE	4,999. 275. 1,070.		999. 275. 070.			0. 0. 0.
TO FORM 990-PF, PG 1, LN 23	6,344.	6,	344.			0.
FORM 990-PF U.S. AND S	STATE/CITY G	OVERNMENT	OBL	GATIONS	STATEMENT	7
DESCRIPTION	U.S GOV'		вос	OK VALUE	FAIR MARKET	r
US TREASURY BONDS	x		135,427.		133,413.	
TOTAL U.S. GOVERNMENT OBLIGAT	rions	-		135,427.	133,42	13.
TOTAL STATE AND MUNICIPAL GOV	VERNMENT OBL	IGATIONS -				
TOTAL TO FORM 990-PF, PART I	I, LINE 10A	-		135,427.	133,43	13.

FORM '990-PF CORPORATE BONDS		STATEMENT 8	
DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE	
CORPORATE BONDS	200,424.	210,301.	
TOTAL TO FORM 990-PF, PART II, LINE 10C	200,424.	210,301.	
FORM 990-PF MORTGAGE LOANS		STATEMENT 9	
DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE	
FED NAT'L MTG BOND	101,404.	101,878.	
TOTAL TO FORM 990-PF, PART II, LINE 12	101,404.	101,878.	

. Form. **8868**

(Rev April 2009)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No. 1545-1709

Internal revenue Service	- T 110 a	separate application for	OLOTTOURITE.						
• If you are filing for an Addit	matic 3-Month Extension, com ional (Not Automatic) 3-Month ss you have already been grante	Extension, complete o	nly Part II (on page 2 of th		► X				
Part I Automatic	3-Month Extension of Ti	me. Only submit origina	al (no copies needed).						
A corporation required to file F	Form 990-T and requesting an au	utomatic 6-month extens	on - check this box and co	mplete	▶□				
All other corporations (including to file income tax returns.	ng 1120-C filers), partnerships, R	EMICs, and trusts must	use Form 7004 to request a	n exter	sion of time				
noted below (6 months for a c (not automatic) 3-month exten you must submit the fully com	erally, you can electronically file orporation required to file Form ision or (2) you file Forms 990-BL ipleted and signed page 2 (Part e-file for Chanties & Nonprofits	990·T). However, you ca ., 6069, or 8870, group r	nnot file Form 8868 electro eturns, or a composite or c	nically if onsolida	(1) you want the additional ated Form 990-T. Instead,				
Type or Name of Exempt (Emp	Employer identification number							
Print THE LESTE	R G ABELOFF FOUN	DATION		26-3528330					
File by the due date for filing your R.R. 1. B	Number, street, and room or suite no. If a P O. box, see instructions. 9 your R.R. 1. BOX 4005								
return See instructions City, town or post STROUDSBU	office, state, and ZIP code. For RG, PA 18360	a foreign address, see ir	structions.						
Check type of return to be fil	led (file a separate application fo	r each retum):							
Form 990	Form 990-T (corpora	ation)	Form 4	1720					
Form 990-BL	Form 990-T (sec. 40		Form						
Form 990-EZ	Form 990-T (trust of		Form						
X Form 990-PF	Form 1041-A	······································	Form 8						
Telephone No ► 609- If the organization does not If this is for a Group Return	KLATZKIN & CO of ► 1670 WHITEHOR 890-9189 It have an office or place of busing, enter the organization's four difficient of the group, check this box ►	SE HAMILTON FAX No. less in the United States git Group Exemption Nu	, check this box mber (GEN) If t	his Is fo	r the whole group, check this				
1 request an automatic 3 AUGUST 15 , is for the organization's X calendar year 2 tax year beginning	return for. 009 or	•	990-T) extension of time ui for the organization named		The extension				
2 If this tax year is for less	than 12 months, check reason	Initial return	Final return		Change in accounting period				
• •	orm 990-BL, 990-PF, 990-T, 472	0, or 6069, enter the ter	itative tax, less any						
nonrefundable credits. See instructions.				3a	\$ 62.				
• •	Form 990-PF or 990-T, enter any		estimated		_				
	lude any prior year overpayment			3b	\$ 0.				
	line 3b from line 3a Include you								
See instructions	n or, if required, by using EFTPS	(Electronic Federal Tax		3c	\$ 62.				
Caution. If you are going to m	ake an electronic fund withdraw	al with this Form 8868, s	ee Form 8453-EO and Forr	n 8879-l	EO for payment instructions.				

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Form 8868 (Rev. 4-2009)

923831 05-26-09

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

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