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# Form **990-PF**

# **Return of Private Foundation**

OMB No 1545-0052

2009

or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation Department of the Treasury Internal Revenue Service Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements For calendar year 2009, or tax year beginning , 2009, and ending G Check all that apply Final return Initial return Initial Return of a former public charity Amended return Address change Name change

Use t IRS la		THE NELSON & SARA FISHMAN	N FAMILY		^	26-3853840	iibei
Otherv	vise,	FOUNDATION, INC.			В	Telephone number (see the	instructions)
prir or ty	nt	36 S. CHARLES STREET, 187	TH FLOOR			410-466-4270	·
See Spe	ecific	BALTIMORE, MD 21201			С	If exemption application is	pending, check here
Instruct	tions.				D	1 Foreign organizations, chec	
H	heck	type of organization   X   Section 50	1(c)(3) exempt private f	oundation	İ	2 Foreign organizations meet	
[	Se	ection 4947(a)(1) nonexempt charitable (			_	here and attach computation	L 3
			counting method X C	ash Accrual	E	If private foundation status under section 507(b)(1)(A)	
		Part II, column (c), line 16)	Other (specify)		F	If the foundation is in a 60	
<u>► \$</u>			, column (d) must be or	cash basis )	<u> </u>	under section 507(b)(1)(B)	, check here
Part I		nalysis of Revenue and	(a) Revenue and	(b) Net investme	nt	(c) Adjusted net	(d) Disbursements
	C	xpenses (The total of amounts in olumns (b), (c), and (d) may not neces-	expenses per books	ıncome		income	for charitable purposes
	S	arily equal the amounts in column (a)					(cash basis only)
	( <u>\$</u>	see the instructions).)	200,480.				
	2		200,400.				
	3	·			-		
		cash investments	621.	62	21.		·
	4						
		a Gross rents  b Net rental income					
n		b Net rental income or (loss)					
R E		A Net gain/(loss) from sale of assets not on line 10     B Gross sales price for all					
V	7	assets on line 6a Capital gain net income (from Part IV, line 2)					
E N	8		FCEIVED_:	······································		<del>                                       </del>	
U	9	Income modifications	S	*			
Ε	10	a Gross sales less returns and	0.0010				•
(E)	1	b Less Cost of goods sold	UG 0 2 2010 13			ļ	.411.411
2010	'	90005 5010	<u> </u>	<u> </u>			
		c Gross profit/(loss) (att sch)	GDEN UT				
ev H	''	Other income (attach schedule)	CO.				
	12	Total. Add lines 1 through 11	201,101.	62	1	0.	
AUG	13	<del></del>	0.			<u> </u>	
-	14	Other employee salaries and wages		-			
		Pension plans, employee benefits					
豐 a		a Legal fees (attach schedule) SEE ST 1	2,884.				
SCANNED 10-2-802		<b>b</b> Accounting fees (attach sch) SEE ST 2	828.				
S N		c Other prof fees (attach sch)					<del> </del>
တြင္ န		Interest					
ŖR		Taxes (attach schedule)(see instr.) Depreciation (attach					
A A	'3	sch) and depletion					` \$
N V	20						
G E	21	,					
A E N X D P	22	Printing and publications Other expenses (attach schedule)					<del></del>
	23	SEE STATEMENT 3	780.	3	80.		
E N S E S	24	Total operating and administrative	,,,,,				
E S	١	expenses. Add lines 13 through 23	4,492.	3	0.		
	25	, , , , , , , , , , , , , , , , , , , ,	15,000.				15,000.
	26	Total expenses and disbursements. Add lines 24 and 25	10 402	2	30.	0.	15,000.
	27	Subtract line 26 from line 12:	19,492.		ν.	ļ	13,000.
		a Excess of revenue over expenses					
	1	and disbursements	181,609.	·			
		b Net investment income (if negative, enter -0-)		59	11.		
	<u></u>	C Adjusted net income (if negative, enter -0-)	<u> </u>			0.	5 - 000 PE (0000)

BAA For Privacy Act and Paperwork Reduction Act Notice, see the instructions.

TEEA0504L 02/02/10



Part	11	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End o	of year
r art		Column should be for end-of-year amounts only (See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	169,984.	51,593.	51,593.
	2	Savings and temporary cash investments		300,000.	300,000.
	3	Accounts receivable			
	}	Less allowance for doubtful accounts ▶			
	4	Pledges receivable			
		Less allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see the instructions)			
_	7	Other notes and loans receivable (attach sch)			
A S		Less allowance for doubtful accounts ▶			
š	8	Inventories for sale or use		· · · · · · · · · · · · · · · · · · ·	
A S E T	9	Prepaid expenses and deferred charges			
Ś	10:	a Investments – U.S. and state government obligations (attach schedule)			
	1	nvestments — corporate stock (attach schedule)			
	(	: Investments — corporate bonds (attach schedule)			
	11	Investments — land, buildings, and equipment basis.			
		Less: accumulated depreciation (attach schedule)			
	12	Investments – mortgage loans.			
	13	Investments – other (attach schedule)			
	14	Land, buildings, and equipment basis	200 FROS		
		Less accumulated depreciation (attach schedule)	<del></del>		
		Other assets (describe Total assets (to be completed by all filers — see instructions. Also, see page 1, item I)	169,984.	351,593.	351,593.
Ļ	17	Accounts payable and accrued expenses			1
Å	18	Grants payable			ļ
В	19	Deferred revenue			
Ė	20	Loans from officers, directors, trustees, & other disqualified persons			
ļ	21	Mortgages and other notes payable (attach schedule)			
<u>i</u>	22	Other liabilities (describe			
<b>E</b> S	23	Total liabilities (add lines 17 through 22)  Foundations that follow SEAS 117 check here	0.	0.	
		and complete lines 24 through 26 and lines 30 and 31.			
N F E U T N	24	Unrestricted			E.
ΤŇ	25	Temporarily restricted			
A D	26	Permanently restricted			
A B S A L T A		Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.			,
TA	27	Capital stock, trust principal, or current funds			
SNC	28	Paid-in or capital surplus, or land, building, and equipment fund		<del></del>	
O E	29	Retained earnings, accumulated income, endowment, or other funds	169,984.	351,593.	
RS	30	Total net assets or fund balances (see the instructions)	169,984.	351,593.	
	31	Total liabilities and net assets/fund balances (see the instructions)	169,984.	351,593.	
Part	Ш	Analysis of Changes in Net Assets or Fund Balance		<del></del>	
	_	I net assets or fund balances at beginning of year – Part II, colu		oree with	
•	end-	of-year figure reported on prior year's return)	iiii (a), iiie oo (iiiust a	gree with	169,984.
2	Ente	r amount from Part I, line 27a		2	181,609.
3	Other	increases not included in line 2 (itemize)		3	
4	Add	lines 1, 2, and 3		4	351,593.
5		ases not included in line 2 (itemize).		5	
6	Tota	net assets or fund balances at end of year (line 4 minus line 5)	<ul> <li>Part II, column (b), I</li> </ul>	ine 30 <b>6</b>	351,593.
RΔΔ		TEFA0302L 0	7/06/09		Form <b>990-PF</b> (2009)

	pe the kind(s) of property sold (e.g., use, or common stock, 200 shares M	real estate,	(b) How acquired P — Purchase D — Donation	(C) Date acquired (month, day, year)	(d) Date sold (month, day, year)
1a N/A					
b ,					<del>                                       </del>
с					
d					
e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	s	(h) Gain or (e) plus (f) m	(loss) linus (g)
a					
b	-				
	<del></del>				
d	<u> </u>			<del></del>	
Complete only for coasts show	who make in column (b) and award b	u the foundation on 12/21/60			
(i) Fair Market Value	wing gain in column (h) and owned b	(k) Excess of column (	<del></del>	<b>(I)</b> Gains (Col Jain minus column (I	
as of 12/31/69	as of 12/31/69	over column (j), if any		an -0-) or Losses (fi	rom column (h))
a					
b	<del> </del>				
<u> </u>	<del></del>				
<u>d</u>					<del></del>
2 Canital anim not income as (n	ot contol loss) If gain, also	enter in Part I, line 7			
Capital gain net income or (net     Net short-term capital gain or	(loss) as defined in sections 1222(5)	iter -0- in Part I, line 7	2_		
, -	ne 8, column (c) (see the instructions		3		
	er Section 4940(e) for Reduce	d Tay on Not Investmen		1	
	te foundations subject to the section	-			
If 'Yes,' the foundation does not qua	ection 4942 tax on the distributable are alify under section 4940(e). Do not come each column for each year, see the	omplete this part		Yes	X No
<b>(a)</b> Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use asse	ets (col	<b>(d)</b> Distributior umn (b) divided	
2008		13	, 953.		
2007					,
2006					
2005					
2004					
2 Total of line 1, column (d)			2	,	
Average distribution ratio for t number of years the foundation	the 5-year base period — divide the to on has been in existence if less than	otal on line 2 by 5, or by the 5 years	3		
4 Enter the net value of noncha	4		189,070.		
	made use assets for 2003 from Fair	X, mic 3			103,010.
5 Multiply line 4 by line 3			5		
6 Enter 1% of net investment in	come (1% of Part I, line 27b)		6		6.
7 Add lines 5 and 6			7		6.
8 Enter qualifying distributions f	·		_ 8	<u> </u>	15,000.
Part VI instructions.	than line 7, check the box in Part VI	, line 1b, and complete that pa	art using a 19		
BAA				Forn	n <b>990-PF</b> (2009)

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Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e),	or 4948 — see	the instruc	tions)		
1 a Exempt operating foundations described in section 4940(d)(2), check here and enter 'N/A' on line 1.	٦				
Date of ruling or determination letter: (attach copy of letter if necessary - see instr.)					
<b>b</b> Domestic foundations that meet the section 4940(e) requirements in Part V,	i -	<u> </u>			6.
check 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, column (b)					
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable					-
foundations only. Others enter -0-).		2		_	_0.
3 Add lines 1 and 2		3			6.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Other	s enter -0-)	4			0.
5 Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-		5			6.
6 Credits/Payments					
a 2009 estimated tax pmts and 2008 overpayment credited to 2009			4		
<b>b</b> Exempt foreign organizations – tax withheld at source					
c Tax paid with application for extension of time to file (Form 8868)					
d Backup withholding erroneously withheld  6d		<u> </u>			
7 Total credits and payments Add lines 6a through 6d		7			0.
8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	_	8			
9 Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed	•	9			6.
10 Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		10			
11 Enter the amount of line 10 to be Credited to 2010 estimated tax Refu	nded <b>&gt;</b>	11			
Part VII-A   Statements Regarding Activities				Vaa	
1a During the tax year, did the foundation attempt to influence any national, state, or local legislatic participate or intervene in any political campaign?	on or did it		1a	Yes	No X
<b>b</b> Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?			1 b		Х
If the answer is 'Yes' to <b>1a</b> or <b>1b</b> , attach a detailed description of the activities and copies of an or distributed by the foundation in connection with the activities	y materials pi	ıblıshed	··· %		
c 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	ır				
(1) On the foundation $\Rightarrow$ 0. (2) On foundation managers	\$	0.			
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure foundation managers   ▶ \$ 0.	tax imposed	on			
2 Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		X
If 'Yes,' attach a detailed description of the activities					
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instruction of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the	ument, article le changes	s	3		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	•		4a		X
<b>b</b> If 'Yes,' has it filed a tax return on <b>Form 990-T</b> for this year?			4b	N	/A
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		Х
If 'Yes,' attach the statement required by General Instruction T					
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either					
<ul><li>By language in the governing instrument, or</li></ul>					
• By state legislation that effectively amends the governing instrument so that no mandatory dii with the state law remain in the governing instrument?	ections that c	onflict	6	x	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Pa	t XV		7	Х	
8a Enter the states to which the foundation reports or with which it is registered (see the instruction					
MD					
<b>b</b> If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General					
(or designate) of each state as required by General Instruction G? If 'No,' attach explanation			8ь	_X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section	n 4942(ı)(3) oı	4942(1)(5)			
for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If	'Yes,' complet	e Part XIV	9	_	<u>X</u>
10 Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule and addresses	: iisung their i 	iames	10		Х

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Part VII-A	State	ment	s Regard	ing	Activ	ities Conti	nued

2	۶.	-3	R	5	3	Ω	Δ	n

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- Git Til-A   Otalements Regulating Activities Continued		
At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes', attach schedule (see instructions)	11	х
12 Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?	12	x
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х
Website address ► N/A		
14 The books are in care of ► NELSON I. FISHMAN Telephone no ► 410-4	66-4	270
Located at ► 2016 HARBOURSIDE DR., #353 LONGBOAT KEY FL ZIP + 4 ► 34228		
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here	N/A	
and enter the amount of tax-exempt interest received or accrued during the year		N/A
Part VII-B   Statements Regarding Activities for Which Form 4720 May Be Required		
File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.		Yes No
1 a During the year did the foundation (either directly or indirectly)		
(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No		
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a		
disqualified person? Yes X No		
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No		
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? . Yes X No		
(5) Transfer any income or assets to a disqualified person (or make any of either available		
for the benefit or use of a disqualified person)?  Yes X No		
(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination		
of government service, if terminating within 90 days )  Yes X No	1	
<b>b</b> If any answer is 'Yes' to 1a(1)-(6), did <b>any</b> of the acts fail to qualify under the exceptions described in		
Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see the instructions)?	1 b	N/A
Organizations relying on a current notice regarding disaster assistance check here		
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2009?	1 c	<u> </u>
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))		
a At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2009?		
If 'Yes,' list the years > 20 , 20 , 20		
<b>b</b> Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to <b>all</b> years listed, answer 'No' and attach statement — see the instructions.)	2b	N/A
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here		
► 20 _ , 20 _ , 20 _		
		i
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?  Yes X No		
<b>b</b> If 'Yes,' did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved		
by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or beguest, or		
(3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule Č, Form 4720, to determine if the foundation had excess business holdings in 2009)	3ь	N/A
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	Х
<b>b</b> Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of		
the tax year beginning in 2009?	4b	X
	orm <b>99</b> (	0-PF (2009)

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Part VII-B   Statements Regarding Activit	ies for Which Forn	n 4720 May Be Req	uired (continued)		
5a During the year did the foundation pay or incu	-				1
(1) Carry on propaganda, or otherwise attempt	ot to influence legislation	on (section 4945(e))?	Yes X	No	:
(2) Influence the outcome of any specific pub on, directly or indirectly, any voter registra	iic election (see section ation drive?	n 4955), or to carry	Yes X	No	3
(3) Provide a grant to an individual for travel,	-		Yes X	No	
(4) Provide a grant to an organization other the in section 509(a)(1), (2), or (3), or section	han a charitable, etc, o 4940(d)(2)? (see instri	rganization described uctions)	Yes X	No	
(5) Provide for any purpose other than religio educational purposes, or for the prevention	us, charitable, scientific n of cruelty to children	c, literary, or or animals?	Yes X	No	
b If any answer is 'Yes' to 5a(1)-(5), did any of described in Regulations section 53.4945 or in (see instructions)?	the transactions fail to a current notice regar	qualify under the excep ding disaster assistance	tions	5 b	N/A
Organizations relying on a current notice rega	rding disaster assistan	ce check here	▶ _		
c If the answer is 'Yes' to question 5a(4), does tax because it maintained expenditure respon	the foundation claim ex sibility for the grant?	cemption from the	N/A Yes	No	
If 'Yes,' attach the statement required by Regi	ulations section 53.494	5-5(d)			
6a Did the foundation, during the year, receive an on a personal benefit contract?	ny funds, directly or ind	lirectly, to pay premiums	S Yes X	No	
<b>b</b> Did the foundation, during the year, pay prem If 'Yes' to 6b. file Form 8870	iums, directly or indirec	ctly, on a personal bene	fit contract?	6b	X
<b>7a</b> At any time during the tax year, was the found	dation a party to a proh	nibited tax shelter transa	iction? Yes X	No	
<b>b</b> If yes, did the foundation receive any proceed				7b	N/A
Part VIII Information About Officers, D	irectors, Trustees,	Foundation Manag	jers, Highly Paid I	mployees,	,
and Contractors	n managers and their		muntin mal	·	
1 List all officers, directors, trustees, foundation	T '			(a) Evpanso	
(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense other allow	
NELSON FISHMAN	FDN MANAGER	0.	0.		0.
2016 HARBOURSIDE DR. #353	1.00				
LONGBOAT KEY, FL 34228					
_SARA_FISHMAN	FDN MANAGER	0.	0.		0.
1807 SOUTH ROAD BALTIMORE, MD 21209	1.00				
2 Compensation of five highest-paid employee	s (other than those inc	cluded on line 1— see ir	istructions). If none, e	nter 'NONE.'	
(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense other allow	
NONE					_
Total number of other employees paid over \$50,000	)		<b>&gt;</b>		0
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Part X Minimum Investment Return (All domestic foundations must complete this part. F see instructions.)	oreign	foundations,
1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes:  a Average monthly fair market value of securities.	1 a	
b Average of monthly cash balances	1 b	191,949.
c Fair market value of all other assets (see instructions)	1c	131,349.
d Total (add lines 1a, b, and c)	1d	191,949.
e Reduction claimed for blockage or other factors reported on lines 1a and 1c	'4	191, 349.
(attach detailed explanation)		
2 Acquisition indebtedness applicable to line 1 assets	2	0.
3 Subtract line 2 from line 1d	3	191,949.
4 Cash deemed held for charitable activities Enter 1-1/2% of line 3		
(for greater amount, see instructions)	4	2,879.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	189,070.
6 Minimum investment return. Enter 5% of line 5	6	9,454.
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private oper and certain foreign organizations check here ► □ and do not complete this part XI		oundations
1 Minimum investment return from Part X, line 6	1	9,454.
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	2 c	6.
3 Distributable amount before adjustments Subtract line 2c from line 1	3	9,448.
4 Recoveries of amounts treated as qualifying distributions	4	
5 Add lines 3 and 4	5	9,448.
6 Deduction from distributable amount (see instructions)	6	
7 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	9,448.
Rart XII Qualifying Distributions (see instructions)	·	
1 Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes a Expenses, contributions, gifts, etc — total from Part I, column (d), line 26	1 a	15,000.
<b>b</b> Program-related investments — total from Part IX-B	1 b	
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes.	2	
<ul> <li>Amounts set aside for specific charitable projects that satisfy the.</li> <li>a Suitability test (prior IRS approval required)</li> </ul>	3a	
<b>b</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	15,000.
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 (see instructions)	5	6.
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	14,994.
Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whe qualifies for the section 4940(e) reduction of tax in those years	ther the	foundation
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Form 990-PF (200

# Part XIII Undistributed Income (see instructions)

	<b>(a)</b> Corpus	(b) Years prior to 2008	<b>(c)</b> 2008	<b>(d)</b> 2009
1 Distributable amount for 2009 from Part XI, line 7				9,448.
2 Undistributed income, if any, as of the end of 2009:				3,440.
a Enter amount for 2008 only			698.	
<b>b</b> Total for prior years 20, 20, 20		0.		
3 Excess distributions carryover, if any, to 2009				
<b>a</b> From 2004				
<b>b</b> From 2005				
<b>c</b> From 2006				
<b>d</b> From 2007				
e From 2008				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2009 from Part XII, line 4 ► \$ 15,000.				
a Applied to 2008, but not more than line 2a		ļ	698.	
			096.	
<ul> <li>Applied to undistributed income of prior years (Election required — see instructions)</li> </ul>		0.		
c Treated as distributions out of corpus (Election required – see instructions)	0.			
d Applied to 2009 distributable amount	0.			9,448.
e Remaining amount distributed out of corpus	4,854.	, ,		3,110.
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) )		* "		
same amount must be snown in column (a) )		<b>*</b> ,	y	
6 Enter the net total of each column as		,	^	,
indicated below:				
a Corpus Add lines 3f, 4c, and 4e. Subtract line 5	4,854.		<u></u>	
<b>b</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				
ed income for which a notice of deficiency has been issued, or on which the section				
4942(a) tax has been previously assessed		0.		
<b>d</b> Subtract line 6c from line 6b Taxable				
amount — see instructions		0.		
e Undistributed income for 2008 Subtract line 4a from			0	
line 2a Taxable amount — see instructions	,		0.	
f Undistributed income for 2009 Subtract lines	·			
4d and 5 from line 1. This amount must be distributed in 2010.		,	,	0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed				
by section 170(b)(1)(F) or 4942(g)(3) (see instructions)	0.			
8 Excess distributions carryover from 2004 not	``			
applied on line 5 or line 7 (see instructions)	0.			
9 Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a	4,854.			
10 Analysis of line 9				
a Excess from 2005				1
<b>b</b> Excess from 2006		j		:
c Excess from 2007				;
d Excess from 2008				
e Excess from 2009 4,854.				Form <b>900 RF</b> (2000)

Form 990-PF (2009) THE NELSON & SAR				26-385384	
Part XIV   Private Operating Foundation					N/A
1a If the foundation has received a ruling or of is effective for 2009, enter the date of the	ruling	·			4040()(5)
<b>b</b> Check box to indicate whether the foundat		erating toundation of		4942(j)(3) or	4942(j)(5)
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed	Tax year (a) 2009	<b>(b)</b> 2008	Prior 3 years (c) 2007	<b>(d)</b> 2006	(e) Total
<b>b</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					
<ul> <li>Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c</li> </ul>					
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					-
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					
Part XV Supplementary Information			organization ha	d \$5,000 or mo	re in
assets at any time during th  Information Regarding Foundation Managers at List any managers of the foundation who have close of any tax year (but only if they have SEE STATEMENT 5	jers: nave contributed m	ore than 2% of the	total contributions r section 507(d)(2))	eceived by the foun	dation before the
<b>b</b> List any managers of the foundation who capartnership or other entity) of which the NONE	own 10% or more of foundation has a 1	of the stock of a cor 0% or greater inter	poration (or an equi est	ally large portion of	the ownership of
2 Information Regarding Contribution, Gran Check here ► X if the foundation only make requests for funds. If the foundation make complete items 2a, b, c, and d	nakes contributions	to preselected cha	ırıtable organization:	s and does not acce	ept unsolicited ner conditions,
a The name, address, and telephone numbe	r of the person to	whom applications	should be addressed	j	
<b>b</b> The form in which applications should be s	submitted and info	mation and materia	als they should inclu	de	
c Any submission deadlines					
d Any restrictions or limitations on awards, s	such as by geograp	phical areas, charita	ble fields, kinds of i	nstitutions, or other	factors <sup>-</sup>
BAA	TE	EA0310L 07/06/09		F	form <b>990-PF</b> (2009)

Part XV   Supplementary Informatio	n (continued)			
3 Grants and Contributions Paid During the	Year or Approved for Futu	re 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)	substantial contributor	recipient		
a Paid during the year		1		
		1		
ann				
SEE				
STATEMENT 4				
		1		•
	!			
	!			
Total			► 3a	
<b>b</b> Approved for future payment				
Total		<u> </u>	► 3b	

# Part XVI-A Analysis of Income-Producing Activities

Enter gross	s amounts unless otherwise indicated	Unrelate	ed business income	Excluded	by section 512, 513, or 514	
	ram service revenue	(a) Business code	<b>(b)</b> Amount	(c) Exclu- sion code	(d) Amount	(e) Related or exempt function income (see the instructions)
						(000 1110 1110110110)
c						
					-	
f						
-	and contracts from government agencies					
	bership dues and assessments					
	st on savings and temporary cash investments				621.	
	ends and interest from securities		\$			
	ental income or (loss) from real estate					
	financed property				<del></del>	
	lebt-financed property			<del>-</del>	·····	
	ntal income or (loss) from personal property r investment income					
						-
	r (loss) from sales of assets other than inventory					
	ncome or (loss) from special events				-	
	s profit or (loss) from sales of inventory					
					<del>-</del>	
e						<del>-</del>
	otal Add columns (b), (d), and (e)				621.	
<b>12</b> Subto	Mai Add Coldinis (b), (d), and (c)					
	. Add line 12, columns (b), (d), and (e)	<u> </u>	<del>-</del>	<del>! ,,</del>	13	621.
13 Total		lculations)		I	<del></del>	
13 Total (See works	. Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify ca		shment of Exemp	t Purno	13	
13 Total (See works Part XVI-	Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify ca  B Relationship of Activities to the	Accompli			oses	621.
13 Total (See works Part XVI- Line No.	Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify ca  B Relationship of Activities to the	Accompli			oses	621.
13 Total (See works Part XVI- Line No.	. Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify ca	Accompli			oses	621.
13 Total (See works Part XVI- Line No.	Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify ca  B Relationship of Activities to the	Accompli			oses	621.
13 Total (See works Part XVI- Line No.	Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify ca  B Relationship of Activities to the	Accompli			oses	621.
13 Total (See works Part XVI- Line No.	Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify ca  B Relationship of Activities to the	Accompli			oses	621.
13 Total (See works Part XVI- Line No.	Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify ca  B Relationship of Activities to the	Accompli			oses	621.
13 Total (See works Part XVI- Line No.	Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify ca  B Relationship of Activities to the	Accompli			oses	621.
13 Total (See works Part XVI- Line No.	Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify ca  B Relationship of Activities to the	Accompli			oses	621.
13 Total (See works Part XVI- Line No.	Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify ca  B Relationship of Activities to the	Accompli			oses	621.
13 Total (See works Part XVI- Line No.	Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify ca  B Relationship of Activities to the	Accompli			oses	621.
13 Total (See works Part XVI- Line No.	Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify ca  B Relationship of Activities to the	Accompli			oses	621.
13 Total (See works Part XVI- Line No.	Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify ca  B Relationship of Activities to the	Accompli			oses	621.
13 Total (See works Part XVI- Line No.	Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify ca  B Relationship of Activities to the	Accompli			oses	621.
13 Total (See works Part XVI- Line No.	Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify ca  B Relationship of Activities to the	Accompli			oses	621.
13 Total (See works Part XVI- Line No.	Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify ca  B Relationship of Activities to the	Accompli			oses	621.
13 Total (See works Part XVI- Line No.	Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify ca  B Relationship of Activities to the	Accompli			oses	621.
13 Total (See works Part XVI- Line No.	Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify ca  B Relationship of Activities to the	Accompli			oses	621.
13 Total (See works Part XVI- Line No.	Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify ca  B Relationship of Activities to the	Accompli			oses	621.
13 Total (See works Part XVI- Line No.	Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify ca  B Relationship of Activities to the	Accompli			oses	621.
13 Total (See works Part XVI- Line No.	Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify ca  B Relationship of Activities to the	Accompli			oses	621.
13 Total (See works Part XVI- Line No.	Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify ca  B Relationship of Activities to the	Accompli			oses	621.
13 Total (See works Part XVI- Line No.	Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify ca  B Relationship of Activities to the	Accompli			oses	621.
13 Total (See works Part XVI- Line No.	Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify ca  B Relationship of Activities to the	Accompli			oses	621.

Form **990-PF** (2009)

_				RA FISHMAN F		_				6-385			ge 1:
P	art XVII	Information Exempt Org	Regarding Ti janizations	ransfers To and	l Transactio	ns an	d Relati	ionshi —-	ps With	n Nonc	haritable	•	
	1 Did #	ne organization dire	ctly or indirectly s	andade in any of the	e following with	າລກທຸດ	ther organ	nızatıon			ļ	Yes	No
	descr	abed in section 5010	(c) of the Code (c	iher than section 5	01(c)(3) organı	zations	s) or in se	ection 52	27,				
		ng to political organ				h £							
		sfers from the report	ting foundation to	a nonchantable ex	tempt organiza	tion or					1.01		- v
	(1) C	other assets									1 a (1) 1 a (2)		$\frac{X}{X}$
		transactions									14 (2)		
		ales of assets to a	noncharitable exe	empt organization							1 b (1)		X
		urchases of assets		· –	zation						1 b (2)		X
	` '	lental of facilities, e		. •							1 b (3)		X
	<b>(4)</b> R	Reimbursement arrai	ngements								1 b (4)		X
	<b>(5)</b> L	oans or loan guarar	ntees								1 b (5)		Х
	<b>(6)</b> P	erformance of servi	ces or membersh	nip or fundraising so	olicitations						1 b (6)		X
	<b>c</b> Sharı	ng of facilities, equi	pment, mailing li	sts, other assets, o	r paid employe	es.					1c		X
	<b>d</b> If the	answer to any of th	ne above is 'Yes '	complete the follow	wina schedule	Colum	n <b>(b)</b> shou	uld alwa	vs show	the fair	market val	ue of	
	the g	oods, other assets, ransaction or sharin	or services given g arrangement, s	by the reporting for the column (d)	undation If the the value of the	found good:	ation recess, other as	eived le ssets, o	ss than f	air marke s receive	et value in ed	uc 01	
	a) Line no	(b) Amount involved	d (c) Name	of noncharitable exempt	organization	(d)	Description	n of transf	ers, transa	ctions, and	sharing arrar	ngement	S
N	/A												
		_											
											_		
										<del></del>			
					<del></del>								
	<del></del>		<del></del>							<del></del>	<del> </del>		
						<del>.</del>	<del></del>						
_							<del></del>						
		<u> </u>	L										
	2a Is the descr	e foundation directly libed in section 501(	or indirectly affili (c) of the Code (o	ated with, or relate other than section 5	d to, one or mo 01(c)(3)) or in :	ore tax section	exempt of 527?	organiza	itions		Yes	<b>X</b>	No
_	<b>b</b> If 'Ye	s,' complete the foll	owing schedule										
		(a) Name of organi	zation	(b) Type o	f organization			(c)	Descripti	on of rel	ationship	_	
N	/A												
					-				_				
										<del></del>			
	Under pen	alties of perjury, I declare t	that I have examined the	l ns return, including accom	npanying schedules	and state	I ments, and t	to the best	of my know	vledge and I	belief, it is true	e, correc	t, and
	complete	Declaration of preparer (ot	her than taxpayer or fic	ductary) is based on all in	formation of which p	reparer h	as any know	vledge				-,	
		NIFE	S			17	1,-1.	~	_/				
5	P				<del>-</del>	7	113 110	<u>0</u> 1		rasi	~/e/		
ì	Sign	ature of officer or trustee				Date		<del></del>	Title	Pron	parer's Identify	ino num	ber
1	Paid	Preparer's signature						.   9	Check if	(See	Signature in		
?	Pre-	RO	BERT W. GRO				/12/10	) [	mployed P		<u> </u>		
•	parer's Use	Luciure of colf		SOHN & ASSOCI	LATES P.A.			E	IN P	N/A			
	Only	address, and		ST STE 1800 21201-3102					Ohono = :	► / <i>1</i> 1	LO) 685	_551	2
_		ZIP code DA	, FIL					1	hone no	- /41	101 003		<u>-</u>

BAA

#### 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

THE NELSON & SARA	FISHMAN FAMILY	Employer identification number
FOUNDATION, INC.		26-3853840
Organization type (check one)		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust <b>not</b> treat	ed as a private foundation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
1 01111 990-FF	4947(a)(1) nonexempt charitable trust treated a	as a private foundation
	501(c)(3) taxable private foundation	is a private louridation
Check if your organization is covered by the <b>Ge</b>	eneral Rule or a Special Rule anization can check boxes for both the General Rule	and a Special Pula. See instructions
Note: Only a section 501(c)(7), (6), or (10) orga	anization can check boxes for both the General Rule	and a Special Rule See instructions.
General Rule —		
X For an organization filing Form 990, 990-EZ	, or 990-PF that received, during the year, \$5,000 o	r more (in money or property) from any one
contributor (Complete Parts I and II)		
Special Rules -		
509(a)(1)/170(b)(1)(A)(vi) and received from any	orm 990 or 990-EZ, that met the 33-1/3% support to one contributor, during the year, a contribution of the gre r (ii) Form 990-EZ, line 1 Complete Parts I and II	est of the regulations under sections ater of (1) \$5,000 or (2) 2% of the
$\square$ For a section 501(c)(7), (8), or (10) organize	ation filing Form 990 or 990-EZ, that received from	any one contributor, during the year,
aggregate contributions of more than \$1,00 prevention of cruelty to children or animals	0 for use exclusively for religious, charitable, scienti	fic, literary, or educational purposes, or the
For a section 501(c)(7), (8), or (10) organize	ation filing Form 990 or 990-EZ, that received from	any one contributor, during the year,
this box is checked, enter here the total cor	s, charitable, etc, purposes, but these contributions atributions that were received during the year for an	exclusively religious, charitable, etc.
purpose Do not complete any of the parts	unless the <b>General Rule</b> applies to this organization	
religious, charitable, etc, contributions of \$5	5,000 or more during the year	<b>^</b> \$
990-PF) but it <b>must</b> answer 'No' on Part IV. line	the General Rule and/or the Special Rules does no e 2 of their Form 990, or check the box on line H of g requirements of Schedule B (Form 990, 990-EZ, o	its Form 990-EZ, or on line 2 of its Form
BAA For Privacy Act and Paperwork Reduction	on Act Notice, see the Instructions	Schedule B (Form 990, 990-EZ, or 990-PF) (2009)
for Form 990, 990EZ, or 990-PF.		

	-
age	Τ

of 1

of Part I

THE NELSON & SARA FISHMAN FAMILY

Employer identification number 26-3853840

Part I.	Contributors (see instructions )		
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	SARA FISHMAN  1807 SOUTH ROAD  BALTIMORE, MD 21209	\$100,240.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution )
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
2	NELSON FISHMAN  2016 HARBOURSIDE DR. #353  LONGBOAT KEY, FL 34228	\$100,240.	Person X Payroll Noncash  (Complete Part II if there is a noncash contribution )
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
	(b)	\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution )
(a) Number	Name, address, and ZIP + 4	(c) Aggregate contributions	Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

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

Page 1

of 1 of Part II
Employer identification number

Name of organization

THE NELSON. & SARA FISHMAN FAMILY

26-3853840

Part II ·	Noncash Property (see instructions )			
(a) No. from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
	N/A			
		\$.		
(a) No. from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
		\$		
(a) No. from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
		\$		
(a) No. from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
·				
		\$_		
(a) No. from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
		\$.	-	
(a) No. from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
		\$		
DAA			o P (Form 990, 990, F7	or 990-PE) (2009)

of 1

of Part III

THE NELSON, & SARA FISHMAN FAMILY

Employer identification number

THE NEI	SON & SARA FISHMAN FAMILY			26-3853840		
Part III	Exclusively religious, charitable, e	tc, individual contributio	ns to sectio	n 501(c)(7), (8), or (10)		
·	organizations aggregating more th	ian \$1,000 for the year.(C	omplete cols (a	i) through (e) and the following	ng line entry)	
	For organizations completing Part III, enter contributions of \$1,000 or less for the year	total of <i>exclusively</i> religious, cl (Enter this information once —	haritable, etc. see instruction	ns ) •\$	N/A	
(a)	(b)	(c)		(d)		
No. from Part I	Purpose of gift	Use of gift		Description of how gift	is held	
1 41(1	N/A					
		(e)				
	Transferee's name, addres	Transfer of gift s. and ZIP + 4	Relati	onship of transferor to trans	feree	
		-,	110.001			
(a)	(b)	(c)		(d)		
No. from Part I	Purpose of gift	Use of gift		Description of how gift	is held	
		(a)				
		(e) Transfer of gift				
	Transferee's name, addres		Relationship of transferor to transferee			
(a)	(b)	(c)		(d)		
No. from	Purpose of gift	Use of gift		Description of how gift	is held	
Part I						
		· · · · · · · · · · · · · · · · · · ·				
		(e)		<del></del>		
	<b>.</b>	Transfer of gift	<b>.</b>			
	Transferee's name, addres	s, and ZIP + 4	Relati	onship of transferor to trans	reree	
				<del></del>	<del></del>	

(e) Transfer of gift Transferee's name, address, and ZIP + 4

Relationship of transferor to transferee

(a)

No. from Part I

(b)

Purpose of gift

(d)

Description of how gift is held

(c)

Use of gift

22	^	^
/{	u	ч

## **FEDERAL STATEMENTS**

PAGE 1

THE NELSON & SARA FISHMAN FAMILY FOUNDATION, INC.

26-3853840

STATEMENT 1
FORM 990-PF, PART I, LINE 16A
LEGAL FEES

		EXF PER	(A) PENSES BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
LEGAL FEES	TOTAL	\$ \$	2,884. 2,884.	\$ 0.	\$ 0.	\$ 0.

#### STATEMENT 2 FORM 990-PF, PART I, LINE 16B ACCOUNTING FEES

		(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING FEES	TOTAL	\$ 828. \$ 828.	\$ 0.	\$ 0.	\$ 0.

#### STATEMENT 3 FORM 990-PF, PART I, LINE 23 OTHER EXPENSES

		(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
BANK FEES . FORM 1023 FEE	TOTAL	\$ 30. \(\frac{750.}{\\$}\)	\$ 30. \$ 30.	\$ 0.	\$ 0.

#### STATEMENT 4 FORM 990-PF, PART I, LINE 25 CONTRIBUTIONS, GIFTS, AND GRANTS

CASH GRANTS AND ALLOCATIONS

CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS: UNRESTRICTED EVERYMAN THEATER 1727 N. CHARLES STREET BALTIMORE, MD 21201 NONE

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE: AMOUNT GIVEN:

\$ 3,000.

CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:

WYPR 2216 NORTH CHARLES STREET BALTIMORE, MD 21218

RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DONEE:

ORGANIZATIONAL STATUS OF DONEE AMOUNT GIVEN:

NONE

UNRESTRICTED

1,500.

2009

## FEDERAL STATEMENTS

THE NELSON & SARA FISHMAN FAMILY FOUNDATION, INC.

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26-3853840

STATEMENT 4 (CONTINUED) FORM 990-PF, PART I, LINE 25 CONTRIBUTIONS, GIFTS, AND GRANTS

CLASS OF ACTIVITY:

DONEE'S NAME: DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

CLASS OF ACTIVITY:

DONEE'S NAME: DONEE'S ADDRESS:

RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

CLASS OF ACTIVITY:

DONEE'S NAME:

DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

UNRESTRICTED

WBJC

6776 REISTERSTOWN ROAD, SUITE 202

BALTIMORE, MD 21215

NONE

Ś 1.500.

GOUCHER HILLEL

1021 DULANEY VALLEY ROAD

BALTIMORE, MD 21204

NONE

3,000.

UNRESTRICTED

HADASSAH MEDICAL ORGANIZATION

P.O.B 12000

, JERUSALEM 91120 ISRAEL

NONE

1,500.

UNRESTRICTED

ENOCH PRATT FREE LIBRARY

400 CATHEDRAL STREET BALTIMORE, MD 21201

NONE

1.500.

UNRESTRICTED

BALTIMORE SYMPHONY ORCHESTRA KIDS

1212 CATHEDRAL STREET BALTIMORE, MD 21201

NONE

3,000.

TOTAL \$ 15,000.

**STATEMENT 5** FORM 990-PF, PART XV, LINE 1A FOUNDATION MANAGERS - 2% OR MORE CONTRIBUTORS

NELSON FISHMAN SARA FISHMAN