

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



#orm 990-PF

Return of Private Foundation

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

Department of the Treasury Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements. **2009**

OMB No 1545-0052

Internal Revenue Service For calendar year 2009, or tax year beginning and ending Final return Initial return of a former public charity Initial return G Check all that apply: Address change Name change Amended return A Employer identification number Name of foundation Use the IRS JEROME S. GLAZER FOUNDATION, INC. label. (THE "SUCCESSOR FOUNDATION") 31-1787788 Otherwise. Room/suite Number and street (or P.O. box number if mail is not delivered to street address) B Telephone number print 513-936-4801 or type. 9200 FLORAL AVENUE See Specific City or town, state, and ZIP code C If exemption application is pending, check here Instructions CINCINNATI, OH 45242-6954 D 1. Foreign organizations, check here 2. Foreign organizations meeting the 85% test, check here and attach computation Section 501(c)(3) exempt private foundation H Check type of organization: Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation E If private foundation status was terminated I Fair market value of all assets at end of year | J Accounting method: Cash X Accruat under section 507(b)(1)(A), check here Other (specify) (from Part II, col. (c), line 16) If the foundation is in a 60-month termination 4,492,049. (Part I, column (d) must be on cash basis.) ▶\$ under section 507(b)(1)(B), check here Analysis of Revenue and Expenses (d) Disbursements Pärt I (a) Revenue and (b) Net investment (c) Adjusted net (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).) for chantable purposes (cash basis only) expenses per books income income 严重活动情况证明 N/A Contributions, gifts, grants, etc., received "是是是"的"是是是是"。 第一 [12] "图》(12] "E 2 Check X if the foundation is not required to attach Sch B Interest on savings and temporary cash investments 4000年的"西海江东 92,817 $\mathtt{STATEMENT} \cdot \mathbf{1}$ 92,817 Dividends and interest from securities **为心境类型。**[20] 5a Gross rents . . . Te 25 - 5. Findson Ministra 中面 二月 b Net rental income or (loss) The state of the state of the state of the 学業がでいる。 <23,763. ٠.`خ 62 Net gain or (loss) from sale of assets not on line 10 Revenue -71. 25 Tr. . b Gross sales price for all assets on line 6a 178,322. · 豐 接流。 - 一種新 0. 7 Capital gain net income (from Part IV, line 2) 14"5 W. And the Control of the Calif 8 Net short-term capital gain ,4、深刻中心强烈 Income modifications THE COLLEGE Gross sales less returns 41.000 b Less Gost of goods soo CEIVED c Gross profit or (loss) 11 Other Income NOV 1 9 2010 12 Total Add lines 1 through 11 15,327 STATEMENT 15,327 الهائيوان يتي فرقيتها المات 84.381 108,144 0. Compensation of officers directors, trustees, etc Other employee salaries and wages 0 0 13 15 Pension plans, employee benefits 16a Legal fees 12,488. 0 **b** Accounting fees STMT 12,488 14,429 14,429 0. STMT 4 c Other professional fees 17 Interest 0. 3,768 0 STMT 18 Taxes 19 Depreciation and depletion 0 557. 2,557 Occupancy Travel, conferences, and meetings 22 Printing and publications 343. 343 23 Other expenses STMT 24 Total operating and administrative 15,388. 33,585 14,429 expenses. Add lines 13 through 23 : 155 . E.S. 164,520 164,520. 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. 179,908. 198,105 Add lines 24 and 25 27 Subtract line 26 from line 12: 2 Excess of revenue over expenses and disbursements 93,715 b Net investment income (if negative, enter -0-) N/A c Adjusted net income (if negative, enter -0-) Form **990-PF** (2009)

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

Page 2

Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End o	f year
Column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
1 Cash - non-interest-bearing	68,600.	89,283.	89,283.
2 Savings and temporary cash investments	346,015.	202,053.	202,053.
3 Accounts receivable ►		17 17 17 17 17 17 17 17 17 17 17 17 17 1	
Less: allowance for doubtful accounts		the name of the state of the st	The same of the sa
4 Pledges receivable	的 新史 经建设金额数 学路	Superior Control of the State o	to the control of the state of
Less: allowance for doubtful accounts	_ Whiteum John of St. 32" 17" Test.	Control of the Control of a material control	ر المواحد الما المواجعة الموا المواجعة المواجعة الم
5 Grants receivable			
6 Receivables due from officers, directors, trustees, and other			
disqualified persons	ing a supplication of the	では、これで、12年の12年では本では20mmである。	44.2 1747 77 77 77 77 17 17 17 17 17 17 17 17 17
7 Other notes and loans receivable	3.22-14型性的中华的大型性。		da la
Less: allowance for doubtful accounts			
8 Inventories for sale or use			
9 Prepaid expenses and deferred charges			
10a investments - 0.5. and state government obligations 51M1 /	1,642,292.	1,533,136.	1,630,684.
b Investments - corporate stock STMT 8	845,940.	951,377.	1,064,845.
c Investments - corporate bonds			
11 Investments - land, buildings, and equipment basis	The state of the s		
Less accumulated depreciation			
12 Investments - mortgage loans	7,153.		
13 Investments - other STMT 9	1,431,762.	1,459,770.	1,489,012.
14 Land, buildings, and equipment basis	THE THE STREET	16 14 1	
Less accumulated depreciation			
15 Other assets (describe ► STATEMENT 10)	20,858.	16,172.	16,172.
			<u> </u>
16 Total assets (to be completed by all filers)	4,362,620.	4,251,791.	4,492,049.
17 Accounts payable and accrued expenses	1		1745年
18 Grants payable			
do Defermed reviews			
20 Loans from officers, directors, trustees, and other disqualified persons			
Loans from officers, directors, trustees, and other disqualified persons			[1] "中华基层是10°2
20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable 22 Other liabilities (describe STATEMENT 11)	5,299.	8,194.	
22 Other liabilities (describe STATEMENT 11)	3,233.	0,154.	
23 Total liabilities (add lines 17 through 22)	5,299.	8,194.	
Foundations that follow SFAS 117, check here			1. 2. 4. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.
and complete lines 24 through 26 and lines 30 and 31.			The state of the s
0 124 Unrestricted			[] [] [] [] [] [] [] [] [] []
25 Temporarily restricted 26 Permanently restricted 27 Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. 28 Paid-in or capital surplus, or current funds 29 Paid-in or capital surplus, or land, bldg., and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 30 Total net assets or fund balances			
B 25 Terriporarily restricted			1. 机直接温度
26 Permanently restricted Foundations that do not follow SFAS 117, check here			
Foundations that do not follow SFAS 117, check here			
and complete lines 27 through 31.		_	
27 Capital stock, trust principal, or current funds	0.	0.	"是到"的"特别"
28 Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
29 Retained earnings, accumulated income, endowment, or other funds	4,357,321.		
O Total net assets or fund balances	4,357,321.	4,243,597.	
	4 060 600	4 054 504	
31 Total liabilities and net assets/fund balances	4,362,620.	4,251,791.	Constituting and their
Part III Analysis of Changes in Net Assets or Fund E	Balances		
	20		1
Total net assets or fund balances at beginning of year - Part II, column (a), line	3 00	١.	4,357,321
(must agree with end-of-year figure reported on prior year's return)			<113,724
Enter amount from Part I, line 27a			
Other increases not included in line 2 (itemize)		12] _ 0.
			4 242 505
4 Add lines 1, 2, and 3		4	
Add Bass 4.0 and 0			4,243,597 0 4,243,597

Page 3

Part IV. Capital Gains a	and Lo	sses for Tax on In	vestment	Income						
(a) List and descr 2-story brick wa	ibe the kir rehouse; (nd(s) of property sold (e.g. or common stock, 200 shs	, real estate, . MLC Co.)		(b) D	How ac - Purci - Dona	quired hase ition		Date acquired io., day, yr.)	(d) Date sold (mo., day, yr.)
1a					<u> </u>					
b SEE ATTACHED	STAI	EMENT			<u> </u>	_				
C					<u> </u>				·	
<u>d</u>					<u> </u>					
<u>e</u>					Ц,					L
(e) Gross sales price	(f) D	epreciation allowed (or allowable)		t or other basis xpense of sale		_			h) Gain or (loss plus (f) minus	
a										
b		_		<u> </u>						
C										
170 200				202 00	_				·	-02 762
e 178,322.			L	202,08	5.					<23,763
Complete only for assets showin					-				ns (Col. (h) gain but not less tha	
(i) F.M.V. as of 12/31/69		i) Adjusted basis as of 12/31/69		cess of col. (i) col. (j), if any				Lo	sses (from col.	(h))
a			-			<u></u>				
b										
C										
d										
e										<23,763
Capital gain net income or (net ca	pital loss)	If gain, also enter If (loss), enter -0-	in Part I, line	7 7	}	2				<23,763
Net short-term capital gain or (los If gain, also enter in Part I, line 8, If (loss), enter -0- in Part I, line 8			a (6).		}	2			N/A	
Part V Qualification U	nder S	ection 4940(e) for	Reduced	Tax on Net	Inv	estr	ent In	com		<u> </u>
section 4940(d)(2) applies, leave the /as the foundation liable for the sect *Yes," the foundation does not qual	ion 4942 t	ax on the distributable amsection 4940(e). Do not co	mplete this pa	rt.						Yes X No
Enter the appropriate amount in e	ach colun		ictions before	making any entri					···	(4)
(a) Base period years Calendar year (or tax year beginnir	ıg ın)	(b) Adjusted qualifying dist		Net value of no		ritable-		_	Dıstri (col. (b) dı	(d) bution ratio vided by col. (c))
2008			1,169.				0,41			.04070
2007			<u>6,332.</u>				<u>6,93</u>			.02991
2006			<u>6,208.</u>				9,44			.02862
2005			<u>5,868.</u>				<u>8,96</u>			.02485
2004		30	<u>9,268.</u>		4	<u>,42</u>	<u>2,09</u>	4.		.06993
Total of line 1, column (d)								. L	2	.19404
Average distribution ratio for the 5 the foundation has been in exister	-				of ye	ears			3	.03880
Enter the net value of noncharitab	le-use ass	ets for 2009 from Part X, I	line 5						4	4,246,144
Multiply line 4 by line 3								.	5	164,784
Enter 1% of net investment incom	ne (1% of	Part I, line 27b)	-	· ···				.	6	937
Add lines 5 and 6		-							7	165,721
Enter qualifying distributions from									8	179,908
If line 8 is equal to or greater than See the Part VI instructions.	line 7, ch	eck the box in Part VI, line	1b, and comp	olete that part usin	ıg a 1	% tax	rate.			

(THE "SUCCESSOR FOUNDATION")

31-1787788

Page 4

Form 990-PF (2009)

	JEROME S. GLAZER FOUNDATION, INC. 990-PF (2009) (THE "SUCCESSOR FOUNDATION")	31-178	7788		Page 5
	TEVILA Statements Regarding 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		X
	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before				
	August 17, 2008?		12	**	X
	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	· · · ·	13	X	L
	Website address ► N/A	> E13 0	26 4	0.01	
		.► <u>513-9</u> :			
	Located at ► 9200 FLORAL AVE., CINCINNATI, OH	ZIP+4 ▶ <u>4</u>	0444	-09	54
	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	ا مدا	107	/ >	لــا
Dai	and enter the amount of tax-exempt interest received or accrued during the year AND Statements Regarding Activities for Which Form 4720 May Be Required	<u> </u>		/A_	
			(1. (c) (c)	Yes	No
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. During the year did the foundation (either directly or indirectly):		25.25	# 3.4E	()
		Yes X No	127.6		1
		ICS LAL NO		riterior di Università	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)	Yes X No			推論
		Yes X No	4 755		
		Yes X No			
		TES LA INO	74.2		
	(5) Transfer any income or assets to a disqualified person (or make any of either available	Yes X No			
	, , ,	TES LALINO			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			2.4. F. V.	
	If the foundation agreed to make a grant to or to employ the official for a period after	Yes X No	F	-585.5	
		Yes LAL NO	The second		1
	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	37 / 3	EE.	Tari.	1-18-3
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)?	N/A	1b	76.3	11600£.:
	Organizations relying on a current notice regarding disaster assistance check here				智慧
	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected		127957		BELLI
	before the first day of the tax year beginning in 2009?		16		X
	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	1			77.7
	defined in section 4942(j)(3) or 4942(j)(5)):	•		- 4 44 4. - 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginn		150		
	·	Yes X No	(*), I		
	If 'Yes,' list the years , , , , , , , , , , , , , , , , , , ,	-4	Fig. 3		14 A
	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorre		. 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1		25.5
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attack			E E	西湖
	statement - see instructions.)	. N/A	2b	مرسوروي	55 144
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.		差類		
	<u> </u>		i guto		5. 315. 5. 315.
	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time	ر. اودا	2 mil), 1 2 mil), 1	777. 17.	
		Yes X No	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	- 1.47 .	
	If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or disqualified persons a		2		5. 45
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to				
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule		FF.		날았실
	Form 4720, to determine if the foundation had excess business holdings in 2009.)	N/A	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4a	l	X

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?

			ļ ,	
2 Compensation of five highest-paid employees (other than thos	e included on line 1). If none	, enter "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 account, other allowances
NONE				
			ľ	ĺ
			1	
		1		· · · · · · · · · · · · · · · · · · ·
				
Total number of other employees paid over \$50,000			. •	

JEROME S. GLAZER FOUNDATION, (THE "SUCCESSOR FOUNDATION") Form 990-PF (2009) 31-1787788 Page 7 Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued) Part VIII 3 Five highest-paid independent contractors for professional services. If none, enter "NONE." (a) Name and address of each person paid more than \$50,000 (c) Compensation (b) Type of service NONE Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the Expenses number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. Amount N/A

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.

Amount

Amount

All other program-related investments. See instructions.

Total, Add lines 1 through 3

Form 990-PF (2009)

Pa	Minimum Investment Return (All domestic foundations must complete this part. Foreign for	undations, s	ee instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:	21 27 G 7 27 7 G	
а	Average monthly fair market value of securities	1a	2,676,386.
	Average of monthly cash balances	1b	347,908.
	Fair market value of all other assets	1c	1,286,512.
	Total (add lines 1a, b, and c)	1d	4,310,806.
	Reduction claimed for blockage or other factors reported on lines 1a and	75-12	
•	1c (attach detailed explanation) 1e 0		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	4,310,806.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	64,662.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	4,246,144.
6	Minimum investment return. Enter 5% of line 5	6	212,307.
P	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations foreign organizations check here and do not complete this part.)	and certain	
1	Minimum investment return from Part X, line 6	1	212,307.
2a	Tax on investment income for 2009 from Part VI, line 5	• Jan 1	
b	Income tax for 2009. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	937.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	211,370.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	211,370.
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	211,370.
P	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	歷歷	
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	179,908.
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:	-	
a	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	179,908.
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	937.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	178,971.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation	n qualifies for	the section

Form **990-PF** (2009)

4940(e) reduction of tax in those years.

Form 990-PF (2009)

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,	The state of the s			
line 7		Total Comments of the Comments		211,370.
2 Undistributed income, if any, as of the end of 2009			A state of the sta	
a Enter amount for 2008 only	A	print of the state	U.	Entropy of the second
b Total for prior years:				
Funda distributions company if any to 2000s	التا عرامي مدين الاستان الاستان	ا في در در الراب المراجع المر	The Tank of the state of the	ストラー・イル・マンフェ 表面の 1 ・イキャチリケ 5編
3 Excess distributions carryover, if any, to 2009:	医 色型透光分裂			
a From 2004 90,805.				
b From 2005		人 人名马尔特森		
c From 2006	250 - 10 10 10 10 10 10 10 10 10 10 10 10 10			
d From 2007				
e From 2008	90,805.			
f Total of lines 3a through e	30,003.		I TO THE TOTAL OF	12 12 1/2 1
4 Qualifying distributions for 2009 from Part XII, line 4: ▶ \$ 179,908.	1	The state of the state of	"特别提供的 "。4	· · · · · · · · · · · · · · · · · · ·
a Applied to 2008, but not more than line 2a			1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	
b Applied to undistributed income of prior	1 1 2 2 1 2 4 1 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		不是一次,	
years (Election required - see instructions)		٥.		
c Treated as distributions out of corpus	2 (7 2.0 p - (-1)	ASSET THE FOR THE PARTY	12 8 K1 18 7 7 1	· V · · · · · · · · · · · · · · · · · ·
(Election required - see instructions)	0.			
d Applied to 2009 distributable amount	~	4 19 1	(2) # [2] [1] [1] [1] [1] [1] [1] [1] [1] [1] [1	179,908.
e Remaining amount distributed out of corpus	0.		可以 本意本學報道在	
5 Excess distributions carryover applied to 2009	31,462.	J	·夏雪·西南山东西等	31,462.
(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		i i i i i i i i i i i i i i i i i i i	و من الله الله الله الله الله الله الله الل	
indicated below:	-4-14	,		
2 Corpus. Add lines 3f, 4c, and 4e Subtract line 5	59,343.	10 4	11.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1	
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				
d Subtract line 6c from line 6b. Taxable	, , , , , , , , , , , , , , , , , , , ,	_		1 2 1
amount - see instructions		0.		, see
e Undistributed income for 2008. Subtract line			0.	
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	-	1 1.		0.
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	59,343.	ter i		1
9 Excess distributions carryover to 2010.				
Subtract lines 7 and 8 from line 6a	0.		1 - 3-4-	
10 Analysis of line 9:			3.	
a Excess from 2005]			-
b Excess from 2006			-	
c Excess from 2007				
d Excess from 2008	ľ, · · · · · · · · · · · · · · · · · · ·			-
e Excess from 2009	<u> </u>	<u> </u>	<u> </u>	Form 900-PE (2000)

JEROME S. GLAZER FOUNDATION, (THE "SUCCESSOR FOUNDATION") 31-1787788 Page 10 Form 990-PF (2009) Part XIV: Private Operating Foundations (see instructions and Part VIIA, question 9) N/A 1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2009, enter the date of the ruling b Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or 4942(j)(5) Prior 3 years Tax year 2 a Enter the lesser of the adjusted net (b) 2008 (a) 2009 (c) 2007 (d) 2006 (e) Total income from Part I or the minimum 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 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(1)(3)(B)(1) 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 Pairt XVI Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see the instructions.) Information Regarding Foundation Managers: a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).) NONE b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest. BRADFORD A. GLAZER Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs: Check here X if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d. a The name, address, and telephone number of the person to whom applications should be addressed: N/A b The form in which applications should be submitted and information and materials they should include: N/A c Any submission deadlines: N/A d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors: N/A

JEROME S. GLAZER FOUNDATION, INC.

Form 990-PF (2009) (THE "SUCCESSOR FOUNDATION")

Part XV Supplementary Information (continued) 31-1787788 Page 11

SEE ATTACHED SCHEDULE PUBLIC SEMERAL USE OF DONEE 164,12 164,52 NONE	3 Grants and Contributions Paid During the Ye	ear or Approved for Future	Payment		
PARK CENTER, LLC K-1 PUBLIC BENERAL USE OF DONEE 39 SEE ATTACHED SCHEDULE PUBLIC BENERAL USE OF DONEE 164,12 Iotal Approved for future payment NONE	Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
PARK CENTER, LLC K-1 PUBLIC SENERAL USE OF DONE SENERAL USE OF DONE 164,12 Total b Approved for lature payment NONE		or substantial contributor	recipient		
Total b Approved for future payment NONE			PUBLIC	GENERAL USE OF DONEE	395.
NONE	SEE ATTACHED SCHEDULE		PUBLIC	GENERAL USE OF DONEE	164,125.
NONE					
NONE		T	1	▶ 3a	164,520.
	b Approved for future payment				
	NONE				
Tab. I	Total			20	0

Form 990-PF (2009) Part XVI-A

Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelate	ed business income		ded by section 512, 513, or 514	(e)
	(a) Business	(b)	(c)	(d)	Related or exempt
1 Program service revenue:	code	Amount	code	Amount	function income
a					
b					
c			<u></u>	· · · · · · · · · · · · · · · · · · ·	
d			<u> </u>	<u></u>	
e	<u></u>				
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments			<u> </u>		
3 Interest on savings and temporary cash					
investments			ļ		
4 Dividends and interest from securities			14	92,817.	
5 Net rental income or (loss) from real estate:		THE PROPERTY OF THE PARTY OF TH	M.		
a Debt-financed property			<u> </u>		
b Not debt-financed property			L	<u></u>	
6 Net rental income or (loss) from personal			'		
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other			1		
than inventory	L		18	<23,763.	<u> </u>
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a RENTAL - PARK CENTER LLC	L		16	15,327.	
b			<u> </u>		
c			ļ		
d					
e			//	<u> </u>	
12 Subtotal. Add columns (b), (d), and (e)	Arra Markey.	0.	MAN	84,381.	
13 Total. Add line 12, columns (b), (d), and (e)				13_	84,381.
(See worksheet in line 13 instructions to verify calculations.)					·
Part:XVI:B: Relationship of Activities to	o the Acc	omplishment of Ex	æmp	t Purposes	
Line No. Explain below how each activity for which incor			Contri	outed importantly to the accor	nplishment of
the foundation's exempt purposes (other than t	oy providing to	inus idi sacii parpuses).			
					
				·	
					
					
					
					
					
			-		
					
					···

JEROME S. GLAZER FOUNDATION, INC.

31-1787788 (THE "SUCCESSOR FOUNDATION") Page 13 Form 990-PF (2009) Information Regarding Transfers To and Transactions and Relationships With Noncharitable Part XVII **Exempt Organizations** Yes No Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? Transfers from the reporting foundation to a noncharitable exempt organization of: 1a(1) (1) Cash _____ 1a(2) (2) Other assets b Other transactions: 16(1) (1) Sales of assets to a noncharitable exempt organization 16(2) (2) Purchases of assets from a noncharitable exempt organization 16(3) (3) Rental of facilities, equipment, or other assets 16(4) (4) Reimbursement arrangements (5) Loans or loan guarantees ______ 16(5) (6) Performance of services or membership or fundraising solicitations 10(6) c Sharing of facilities, equipment, mailing lists, other assets, or pald employees 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 tair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (c) Name of noncharitable exempt organization (b) Amount involved (d) Description of transfers, transactions, and sharing arrangements (a) Line no. N/A 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described X No ın section 501(c) of the Code (other than section 501(c)(3)) or in section 527? b. If "Yes," complete the following schedule. (b) Type of organization (c) Description of relationship (a) Name of organization N/A Under penalties of perjury, I declare trial I have examined this return, including accompanying schedules and statements, and to the best of my known rer (other than taxoayer or tiductary) is based on all information of which preparer has any knowled Sign Hore Signature of officer or trustee Title Date Check if self-employed Preparer's 2010 NOV signature BENNETT, BOURGEOIS L.L.C. EIN > firm's easts (currows I szi-ensloyet). 111 VETERANS BLVD. 17TH FLOOR ettiess, and IIP cote 70005 504.831.4949 METAIRIE, LOUISIANA Phone no.

Form 990-PF (2009)

over col. (j), if any as of 12/31/69 <18,089.> a <4,069.> b <1,659.> C 50. đ е f g h k m n 0 { If gain, also enter in Part I, line 7 If (loss), enter "-0-" in Part I, line 7 } <23,763.> 2 Capital gain net income or (net capital loss) 2

N/A

Net short-term capital gain or (loss) as defined in sections 1222(5) and (6):

If gain, also enter in Part I, line 8, column (c). If (loss), enter *-0-* in Part I, line 8

FORM 990-PF DI	VIDENDS A	AND INTER	EST FROM	SECU	TRITIES	STATEMENT	
SOURCE		GROSS	AMOUNT		PITAL GAINS DIVIDENDS	COLUMN (A))
OTHER DIVIDEND INCOME			23,770.		0.	23,7	70.
OTHER INTEREST INCOME PARK CENTER LLC INTERES	ST		66,972. 2,075.		0. 0.	66,9° 2,0°	
TOTAL TO FM 990-PF, PAR	RT I, LN 4	4	92,817.		0.	92,81	L7.
FORM 990-PF		OTHER I	NCOME			STATEMENT	2
DESCRIPTION			(A) REVENUE PER BOOKS	5	(B) NET INVEST- MENT INCOME	(C) ADJUSTEI NET INCOI	
RENTAL - PARK CENTER LI	r.C		15,3	327.	15,327	•	
TOTAL TO FORM 990-PF, I	PART I, L	INE 11	15,3	327.	15,327	•	
FORM 990-PF		ACCOUNTI	NG FEES			STATEMENT	3
DESCRIPTION		(A) XPENSES ER BOOKS	(B) NET INVI MENT INC		(C) ADJUSTED NET INCOME	(D) CHARITAI E PURPOSI	
ACCOUNTING FEES		12,488.		0.	,	12,48	88.
TO FORM 990-PF, PG 1, I	LN 16B	12,488.		0.	·	12,4	88.
FORM 990-PF	ОТНІ	ER PROFES	SIONAL FI	EES	· · · · · · · · · · · · · · · · · · ·	STATEMENT	4
DESCRIPTION		(A) XPENSES ER BOOKS	(B) NET INVI MENT INC		(C) ADJUSTED NET INCOM	(D) CHARITAI E PURPOSI	
INVESTMENT FEES		14,429.	14	,429.	•		0.
TO FORM 990-PF, PG 1, I	 LN 16C	14,429.	14	,429.	•		0.
					=		

FORM 990-PF	TAX	ES			STATEMENT	5 ——
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVE MENT INC		(C) ADJUSTED NET INCOM		
EXCISE TAX OTHER TAXES	3,072. 696.		0.	<u> </u>		0.
TO FORM 990-PF, PG 1, LN 18	3,768.		0.			0.
FORM 990-PF	OTHER E	XPENSES			STATEMENT	6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVE MENT INC		(C) ADJUSTED NET INCOM		
OFFICE EXPENSES POSTAGE & DELIVERY	279. 64.	4	0. 0.		_	79. 54.
TO FORM 990-PF, PG 1, LN 23	343.		0.		34	43.
FORM 990-PF U.S. AND	STATE/CITY G	OVERNMENT	OBL	[GATIONS	STATEMENT	7
DESCRIPTION	U.S GOV'		вос	OK VALUE	FAIR MARKE	r
TREASURY NOTES AGENCY NOTES MORTGAGE PASS THRU NOTES U.S. TREASURY BILLS - 1ST MA	X X X X NHATTAN X			842,317. 346,817. 224,017. 119,985.	915,20 365,70 229,73 119,99	09. 13.
TOTAL U.S. GOVERNMENT OBLIGA	TIONS	•	:	1,533,136.	1,630,6	84.
TOTAL STATE AND MUNICIPAL GO	VERNMENT OBI	IGATIONS .				
TOTAL TO FORM 990-PF, PART I	I, LINE 10A		:	1,533,136.	1,630,6	84.

FORM 990-PF	CORPORATE STOCK		STATEMENT 8
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
SEE ATTACHED SCHEDULE 3		951,377.	1,064,845.
TOTAL TO FORM 990-PF, PART II, I	LINE 10B	951,377.	1,064,845.
FORM 990-PF (OTHER INVESTMENTS		STATEMENT 9
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
INVESTMENT IN PARK CENTER, LLC INVESTMENT IN WEST VIRGINIA LANI INVESTMENT IN MINERAL INTEREST STATE OF ISRAEL BONDS	COST COST COST COST	1,229,020. 25,000. 750. 205,000.	1,258,262. 25,000. 750. 205,000.
TOTAL TO FORM 990-PF, PART II, 1	LINE 13	1,459,770.	1,489,012.
FORM 990-PF	OTHER ASSETS		STATEMENT 10
DESCRIPTION	BEGINNING OF YR BOOK VALUE	END OF YEAR BOOK VALUE	FAIR MARKET
			VALUE
ACCRUED INTEREST RECEIVABLE PREPAID TAXES PORTRAIT	17,041. 1,317. 2,500.	10,592. 3,080. 2,500.	10,592. 3,080. 2,500.
PREPAID TAXES	1,317. 2,500.	3,080.	10,592.
PREPAID TAXES PORTRAIT TO FORM 990-PF, PART II, LINE 15	1,317. 2,500.	3,080. 2,500.	10,592. 3,080. 2,500.
PREPAID TAXES PORTRAIT TO FORM 990-PF, PART II, LINE 15	1,317. 2,500. 5 20,858.	3,080. 2,500.	10,592. 3,080. 2,500. 16,172.
PREPAID TAXES PORTRAIT TO FORM 990-PF, PART II, LINE 19 FORM 990-PF	1,317. 2,500. 5 20,858.	3,080. 2,500. 16,172.	10,592. 3,080. 2,500. 16,172. STATEMENT 11

Jerome S. Glazer Foundation, Inc. 31-1787788 Contributions December 31, 2009

Chanty Donee Name and Address Date Type Amount 3/19/2009 Schottenstein Chabad House R 500.00 Columbus, OH Chabad House of Cincinnati 35.000.00 2/11/2009 R Cinquatti, OH 1/12/2009 Chabad at Vanderbilt R 1,500 00 Nashville, TN Sycamore Senior Center 1,200.00 H&S 1/12/2009 Cincinnati, OH 1/12/2009 Congregation Sheanth Israel R 500 00 Nashville, TN Boy Scouts of America C. H & E 75 00 1/30/2009 Cincinnati, OH 1/30/2009 Florida International University, Foundation Fund C, H & E 500 00 Miami, FL University of Cincinnati, College of Nursing 500 00 C. H & E 2/11/2009 Cincinnati, OH 250 00 3/19/2009 Footlighters Foundation C, H & E Hollywood, FL 25 00 4/7/2009 Habitat for Humanity C, H&E Cincinnati, OH Walnut Hills High School C, H & E 100 00 9/18/2009 Cincinnati, OH 8/3/2009 Beth Israel Synagogue R 1,000 00 Hamilton, OH USY Scholarship Fund C, H & E 50 00 8/10/2009 New York, NY American Discovery Trail Society Washington, DC 8/20/2009 C, H & E 1,800 00 Make a Wish Foundation 25 00 10/21/2009 Columbus, OH Next Generation Dance Company C, H & E 10/17/2009 3.200 00 Cincinnati, OH 12/1/2009 Blue Ash Montgomery Rotary Fund 0 400 00 Cincinnati, OH 6/9/2009 American Jewish Committee C. H & E 50,000 00 165 E 56th St New York, NY 10022 1/12/2009 Hamilton Symphony Orchestra Association C. H & E 500 00 Hamilton, OH 2/28/2009 Jewish Federation of Greater New Orleans C, H & E 4,000 00 Metaine, LA 8/21/2009 Temple Sınaı R 10,000 00 New Orleans, LA 2/19/2009 Jeep Jewish Education for Every Person R 1,000 00 Cincinnati, OH Jewish Community Center C, H & E 2,000 00 7/24/2009 Cıncınnati, OH 7/8/2009 Meharry Medical College C, H & E 50,000 00 Nashville, TN Total Contributions 164,125 00 Summary by Chanty Type 49,500.00 Religious Cultural, Historical, Educational C, H & E 113,000.00 Health & Services H&S 1,200 00 Other 425 00 164,125 00

	EIN: 31-1787788 SCHEDULE. 3	MAN_ATTAN JEROME S GLAZER FOUNDATION ALFRED H MOSES. CHATRMAN	ACCOUNT NO. AS OF	437 Madison Ave, New York, N.Y. 10022 54Z-004894-1-030		SECURITY - PER UNIT TOTAL PER UNIT* VALUE INCOME YIELD	COMMON STOCKS	G US BANCORP DEL NEW 16.86 19,394 22.51 25,887 230 .9 SUB TOTAL 25,887 230 .9	0 CAPLEASE INC. 10.68 42,728 4.38 17,520 960 5.5 SUB TOTAL 17,520 960 5.5	0 CONOCOPHILLIPS 72.47 36,236 51.07 25,535 1,000 3.9 SUB TOTAL 25,535 1,000 3.9	ENTERTAINMENT/LEISURE 800 TYCO INTL LID 8HS 800 TYCO INTL LID 8HS SUB TOTAL 28,544 640 2.2 28,544 640 2.2	FINANCIAL SERVICES 750 AMERICAN EXPRESS CO 540 1.8 SUB TOTAL 30,390 540 1.8	0 KELLOGG CO 0 NESTLE SA-SPONSORED ADR 24.15 30,192 48.56 60,701 1,204 2.0 REPSTG REGD ORD 77.789 53.20 53,200 1,500 2.8	DUCTS TON DICKINSON & CO 61.98
--	-----------------------------	---	-------------------	--	--	--	---------------	---	---	---	--	---	--	---------------------------------

*While we believe the pricing information contained herein is reliable, we cannot guarantee its accuracy.

EIDCT	EIN: 31-1787788	788			SCHEDULE	WAE3
CITI	ACCOUNT				PAGE	, ,
MANGATTAN	JEROME S GLAZER	ER FOUNDATION	ALFRED H MOS	MOSES, CHAIRMAN		
CO.	ACCOUNT NO.				AS OF	
437 Madison Ave, Now York, N.Y. 10022	542-004894-1-030	030			12/31/2009	
NO. OF SHARES	TSOO	ST	MARKET	ET	ESTIMATED	
OR FACE VALUE OF BONDS SECURITY	PER UNIT	TOTAL	PER UNIT*	VALUE	ANNUAL	CURR
400 ZIMMER HLDGS INC SUB TOTAL	66.77	26,710 124,520	59.11	23,644	2,618	1.7
INTERNATIONAL HEALTH CARE 500 ASTRAZENECA PLC 600 GLAXOSMITHKLINE PLC ADR SUB TOTAL	47.44	23,718 32,819 56,537	46.94	23,470 25,350 48,820	1,045 1,113 2,158	4 4 4 4 4 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5
HOTEL/RESTAURANT 500 MCDONALDB CORPORATION SUB TOTAL	62.59	31,294 31,294	62.44	31,220 31,220	1,100	3.5
MEDIA 2,300 CBS CORP CL B COM SUB TOTAL	23.90	54,962 54,962	14.05	32,315 32,315	460	4.4
MISCELLANEOUS 900 ACCENTURB PLC IRELAND CL SHS 1,400 AMERICAN WTR WKS CO INC NEW CM 30 BERKSHIRE HATHAWAY INC CL B 865 REED ELSEVIER P L C SPON ADR SUB TOTAL	29.12 19.66 2,263.82 42.47	26,204 27,520 67,914 36,740 158,378	41.52 22,41 3,286.00 32.79	37,368 31,374 98,580 28,363 195,685	495 1,176 1,124 2,795	1.3 3.7 1.6
MISC. CONSUMER 1,600 RECKITT BENCKISER 800 PROCTER & GAMBLE CO SUB TOTAL	10.09	16,150 26,382 42,532	54.19 60.63	86,696 48,504 135,200	2,001 1,408 3,409	22.2 5.60
INDUSTRIAL/MANUFACTURING 1,500 GENERAL ELECTRIC CO 500 3M CO COM 600 UNITED TECHNOLOGIES CORP SUB TOTAL	35.32 77,53 62.97	52,987 38,766 37,781 129,534	15.13 82.67 69.41	22,695 41,335 41,646 105,676	600 1,020 924 2,544	22.23
SERVICES						

FIRST	EIN: 31-1787788	87788			SCHE	SCHEDINE 3	
	ACCOUNT				PAGE	, .,	
MAINTALIAN	JEROME S GLAZ	JEROME S GLAZER FOUNDATION	ALFRED H MOS	ALPRED H MOSES, CHAIRMAN	ı	, is	
CO.	ACCOUNT NO.				AS OF		
437 Madison Ave, New York, N.Y. 10022	54Z-004894-1-030	.030			12/31/2009		
NO. OF SHARES	ງວ	cosr	MARKET	Ter	ESTIMATED		
OR FACE VALUE OF BONDS SECURITY	PER UNIT	TOTAL	PER UNIT*	VALUE	ANNUAL	CURR	
1,500 WESTERN UN CO COM. SUB TOTAL	18.99	28,492 28,492	18.85	28,275 28,275	06	46	
TECHNOLOGY 1,700 MICROSOFT CORP SUB TOTAL	26.29	44,689	30.48	51,816 51,816	884	1.7	
UTILITIES 1,500 NORTHWESTERN CORP COM NEW SUB TOTAL	29.00	43,499	26.02	39,030 39,030	2,010	5.1	
TOTAL COMMON STOCKS	1	951,377	,	1,064,845	24,142	2.3	

Form 8868 (Rev. 4-2009)				
• If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and	check this bo	x		ightharpoons
Note. Only complete Part II if you have already been granted an automatic 3-month extension on a p	reviously filed	Form 8	3868	
 If you are filing for an Automatic 3-Month Extension, complete only Part I (on page 1). 				
Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the	original (no co	pies n	eeded).	
Name of Exempt Organization		Emp!	oyer identificati	on number
Type of JEROME S. GLAZER FOUNDATION, INC.				
(THE "SUCCESSOR FOUNDATION")		<u> 3 </u>	<u>1-1787788</u>	3
File by the extended Number, street, and room or suite no. If a P.O. box, see instructions	, ,	For IF	RS use only	
due date for filing the 9200 FLORAL AVENUE	1 12			
return See Instructions City, town or post office, state, and ZIP code For a foreign address, see instructions.			ur i.	
Check type of return to be filed (File a separate application for each return)				
	n 1041-A	Fo	m 5227	Form 8870
Form 990-BL X Form 990-PF Form 990-T (trust other than above) Form	n 4720	Fo	rm 6069	
STOP! Do not complete Part II if you were not already granted an automatic 3-month extension	on a previous	ly file	d Form 8868.	
				
BRADFORD A. GLAZER	450	40	CO F 4	
The books are in the care of p	<u> </u>	42-	6954	
Telephone No ► <u>513-936-4801</u> FAX No. ►				
• If the organization does not have an office or place of business in the United States, check this bo				-
If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)			the whole group	· -
box If it is for part of the group, check this box and attach a list with the names a	nd EINS of all I	nemb	ers the extension	is for.
4 I request an additional 3-month extension of time until NOVEMBER 15, 2010.				
	and ending	$\overline{\Box}$		-4
	ıl return	Ш,	Change in accou	nting penoa
7 State in detail why you need the extension ADDITIONAL TIME IS REQUESTED FOR THE TAXPAYER T	O CATHE	D λ	CCOLIMPTNO	
RECORDS NEEDED TO PREPARE A COMPLETE AND ACCURA			CCOONTIN	J
· ·	Sally	8a	\$	999.
nonrefundable credits See instructions. b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and es	timated	Oa	Ψ	
b If this application is for Form 990-PF, 990-1, 4720, or 6069, enter any refundable credits and estax payments made. Include any prior year overpayment allowed as a credit and any amount p		٠,		
previously with Form 8868	aid	8b	\$	3,080.
	deposit	~	Ψ	3,000.
with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See		8c	\$	0.
Signature and Verification	, mondonono.		<u> </u>	
Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and staten	nents, and to the	best of	mv knowledae an	d belief.
it is true, correct, and complete, and that I am authorized to prepare this form. BOURGEOIS, BENN				
Signature CPA Title CERTIFIED PUBLIC ACT		- Date	> Aug 1	1 2010
TV O' DOX OUDDO, NEW O'HEAT	s, LA 70100-00 Ph. 831 -4949	100 ·	•	(Rev. 4-2009)

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

			X
If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of	f this form).		
Do not complete Part II unless you have already been granted an automatic 3-month extension on a previous	sly filed Fo	m 8868. WAILED	CERTIFI
Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).		6444	4 i. 5046
A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and	d complete	MAY	1 4 2010
Part I only		▶	
Il other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to requi o file income tax returns.	est an exter	nsion of time	
Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic ex toted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 element automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite ou must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electrowww.irs.gov/efile and click on e-file for Charities & Nonprofits.	ctronically it or consolid	f (1) you want the add ated Form 990-T. Inst	itional
ype or Name of Exempt Organization	Emp	loyer identification n	umber
rint JEROME S. GLAZER FOUNDATION, INC.			
(THE "SUCCESSOR FOUNDATION")	3	<u>1-1787788</u>	
Number, street, and room or suite no. If a P.O. box, see instructions. 9200 FLORAL AVENUE			
structions. City, town or post office, state, and ZIP code. For a foreign address, see instructions.			
CINCINNATI, OH 45242-6954			
Check type of return to be filed (file a separate application for each return):			
Form 990 Form 990-T (corporation) Fo	rm 4720		
Form 990-BL Form 990-T (sec. 401(a) or 408(a) trust) Fo	m 5227		
Form 990-EZ Form 990-T (trust other than above)	m 6069		
X Form 990-PF	m 8870		
Telephone No. ► 513-936-4801 FAX No. ► If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)	. If this is fo	r the whole group, cho	
The books are in the care of ▶ 9200 FLORAL AVE., CINCINNATI, OH − Telephone No. ▶ 513-936-4801 FAX No. ▶ If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)	. If this is fo of all memb	r the whole group, cheers the extension will	
The books are in the care of ▶ 9200 FLORAL AVE., CINCINNATI, OH − Telephone No. ▶ 513 – 936 – 4801 If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)	. If this is fo of all memb e until ned above.	r the whole group, cheers the extension will	cover.
The books are in the care of ▶ 9200 FLORAL AVE., CINCINNATI, OH − Telephone No. ▶ 513-936-4801 FAX No. ▶ If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If it is for part of the group, check this box ▶ and attach a list with the names and EINs I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time AUGUST 15, 2010	If this is fo of all members and above.	r the whole group, cheers the extension will The extension	period
The books are in the care of ▶ 9200 FLORAL AVE., CINCINNATI, OH − Telephone No. ▶ 513-936-4801 If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If it is for part of the group, check this box ▶ and attach a list with the names and EINs I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time AUGUST 15, 2010 I to file the exempt organization return for the organization nare is for the organization's return for: X calendar year 2009 or and ending and ending If this tax year is for less than 12 months, check reason: Initial return Final return If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	. If this is fo of all memb e until ned above.	r the whole group, cheers the extension will The extension Change in accounting	cover.
The books are in the care of ▶ 9200 FLORAL AVE., CINCINNATI, OH − Telephone No. ▶ 513-936-4801 If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time AUGUST 15, 2010 Is for the organization's return for: X calendar year 2009 or X calendar year 2009 or This tax year is for less than 12 months, check reason: If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated	If this is fo of all members and above.	r the whole group, cheers the extension will The extension Change in accounting	period
The books are in the care of ▶ 9200 FLORAL AVE., CINCINNATI, OH − Telephone No. ▶ 513 − 936 − 4801 If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for part of the group, check this box ▶ and attach a list with the names and EINs I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time AUGUST 15, 2010 Is for the organization's return for: X calendar year 2009 or X calendar year 2009 or X calendar year 2009 or This tax year is for less than 12 months, check reason: If this tax year is for less than 12 months, check reason: If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any pnor year overpayment allowed as a credit.	e until	r the whole group, cheers the extension will The extension Change in accounting	period
The books are in the care of ▶ 9200 FLORAL AVE., CINCINNATI, OH − Telephone No. ▶ 513-936-4801 If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time AUGUST 15, 2010 It file the exempt organization return for the organization nare is for the organization's return for: X calendar year 2009 or This tax year beginning If this tax year is for less than 12 months, check reason: Initial return Final return If this application is for Form 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated	e until	r the whole group, cheers the extension will The extension Change in accounting	period