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Form **990-PF**

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

OMB No 1545-0052

2009Department 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 , and ending

G Check all that apply ☐ Initial return ☐ Initial return of a former public charity ☐ Final return
☐ Amended return ☐ Address change ☐ Name change

Use the IRS label. Otherwise, print or type. See Specific Instructions.	Name of foundation HOLTZ CHARITABLE FOUNDATION, INC.		A Employer identification number 35-2042978
	Number and street (or P.O. box number if mail is not delivered to street address) 9209 CROMWELL PARK PLACE	Room/suite	B Telephone number (see page 10 of the instructions)
	City or town, state, and ZIP code ORLANDO FL 32827		C If exemption application is pending, check here <input type="checkbox"/>
	H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
I Fair market value of all assets at end of year (from Part II, col (c), line 16) \$ 2,650,781	J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify)	E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/> F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>	

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see page 11 of the instructions))

	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
1 Contributions, gifts, grants, etc., received (attach schedule)	87,362			
2 Check <input type="checkbox"/> if the foundation is not required to attach Sch B				
3 Interest on savings and temporary cash investments	1,700	1,700	1,700	
4 Dividends and interest from securities	19,788	19,788	19,788	
5a Gross rents				
b Net rental income or (loss)				
6a Net gain or (loss) from sale of assets not on line 10 STMT 1	-472,425			
b Gross sales price for all assets on line 6a 1,285,645				
7 Capital gain net income (from Part IV, line 2)		0		
8 Net short-term capital gain			0	
9 Income modifications				
10a Gross sales less returns & allowances				
b Less Cost of goods sold				
c Gross profit or (loss) (attach schedule)				
11 Other income (attach schedule)				
12 Total. Add lines 1 through 11	-363,575	21,488	21,488	
13 Compensation of officers, directors, trustees, etc	60,000	30,000		
14 Other employee salaries and wages				
15 Pension plans, employee benefits				
16a Legal fees (attach schedule)				
b Accounting fees (attach schedule) STMT 2	8,826	4,413		
c Other professional fees (attach schedule) STMT 3	10,015	10,015		
17 Interest				
18 Taxes (attach schedule) (see page 14 of the instructions) STMT 4	1,249	1,249		
19 Depreciation (attach schedule) and depletion				
20 Occupancy				
21 Travel, conferences, and meetings				
22 Printing and publications				
23 Other expenses (att sch)				
24 Total operating and administrative expenses. Add lines 13 through 23	80,090	45,677		0
25 Contributions, gifts, grants paid	129,245			129,245
26 Total expenses and disbursements. Add lines 24 and 25	209,335	45,677	0	129,245
27 Subtract line 26 from line 12	-572,910			
a Excess of revenue over expenses and disbursements		0		
b Net investment income (if negative, enter -0-)				
c Adjusted net income (if negative, enter -0-)			21,488	

For Privacy Act and Paperwork Reduction Act Notice, see page 30 of the instructions.

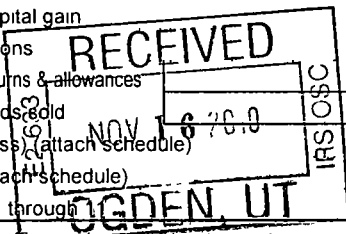
Form 990-PF (2009)

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Revenue

Operating and Administrative Expenses



Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year	End of year	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1	Cash—non-interest-bearing	736,405	30,597	30,597
	2	Savings and temporary cash investments	587,257	898,318	898,318
	3	Accounts receivable ▶ 25,637		25,637	25,637
		Less allowance for doubtful accounts ▶			
	4	Pledges receivable ▶			
		Less allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see page 16 of the instructions)			
	7	Other notes and loans receivable (att. schedule) ▶			
		Less allowance for doubtful accounts ▶			
	8	Inventories for sale or use			
	9	Prepaid expenses and deferred charges			
	10a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule) SEE STMT 5	1,359,711	1,163,324	1,484,823
	c	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment basis ▶			
		Less accumulated depreciation (attach sch.) ▶			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule) SEE STATEMENT 6	200,000	200,000	211,406
	14	Land, buildings, and equipment basis ▶			
		Less accumulated depreciation (attach sch.) ▶			
	15	Other assets (describe ▶)			
	16	Total assets (to be completed by all filers—see the instructions. Also, see page 1, item I)	2,883,373	2,317,876	2,650,781
Liabilities	17	Accounts payable and accrued expenses	23,849	31,262	
	18	Grants payable			
	19	Deferred revenue			
	20	Loans from officers, directors, trustees, and other disqualified persons			
	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe ▶)			
	23	Total liabilities (add lines 17 through 22)	23,849	31,262	
Net Assets or Fund Balances		Foundations that follow SFAS 117, check here ▶ <input type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.			
	24	Unrestricted			
	25	Temporarily restricted			
	26	Permanently restricted			
		Foundations that do not follow SFAS 117, check here ▶ <input checked="" type="checkbox"/> and complete lines 27 through 31.			
	27	Capital stock, trust principal, or current funds			
	28	Paid-in or capital surplus, or land, bldg, and equipment fund			
	29	Retained earnings, accumulated income, endowment, or other funds	2,859,524	2,286,614	
	30	Total net assets or fund balances (see page 17 of the instructions)	2,859,524	2,286,614	
	31	Total liabilities and net assets/fund balances (see page 17 of the instructions)	2,883,373	2,317,876	

Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	2,859,524
2	Enter amount from Part I, line 27a	2	-572,910
3	Other increases not included in line 2 (itemize) ▶	3	
4	Add lines 1, 2, and 3	4	2,286,614
5	Decreases not included in line 2 (itemize) ▶	5	
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30	6	2,286,614

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co.)		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a N/A				
b				
c				
d				
e				

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a			
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
a			
b			
c			
d			
e			

2 Capital gain net income or (net capital loss)	<div style="border-left: 1px solid black; border-right: 1px solid black; padding: 0 10px;"> If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 </div>	2	
		3	

3 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) (see pages 13 and 17 of the instructions)
 If (loss), enter -0- in Part I, line 8

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☒ No

If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year, see page 18 of the instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2008	189,029	2,623,324	0.072057
2007	337,250	2,817,871	0.119683
2006	187,600	2,589,506	0.072446
2005	130,929	1,781,854	0.073479
2004	198,041	1,831,476	0.108132

2 Total of line 1, column (d)	2	0.445797
3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	0.089159
4 Enter the net value of noncharitable-use assets for 2009 from Part X, line 5	4	2,441,301
5 Multiply line 4 by line 3	5	217,664
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	
7 Add lines 5 and 6	7	217,664
8 Enter qualifying distributions from Part XII, line 4 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions on page 18.	8	129,245

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instructions)

1a	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1 Date of ruling or determination letter (attach copy of letter if necessary—see instructions)		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b	1	
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	0
3	Add lines 1 and 2	3	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	0
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	0
6	Credits/Payments		
a	2009 estimated tax payments and 2008 overpayment credited to 2009	6a	2,100
b	Exempt foreign organizations—tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868)	6c	
d	Backup withholding erroneously withheld	6d	
7	Total credits and payments. Add lines 6a through 6d	7	2,100
8	Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> 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	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	2,100
11	Enter the amount of line 10 to be Credited to 2010 estimated tax 2,100 Refunded	11	

Part VII-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		X
1b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 of the instructions for definition)? If the answer is "Yes" to 1a or 1b , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities		X
1c Did the foundation file Form 1120-POL for this year?		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation \$ _____ (2) On foundation managers \$ _____		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers \$ _____		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities		X
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		X
4b If "Yes," has it filed a tax return on Form 990-T for this year?		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T		X
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	X	
8a Enter the states to which the foundation reports or with which it is registered (see page 19 of the instructions) IN		
8b 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	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV on page 27)? If "Yes," complete Part XIV		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		X

N/A

Part VII-A Statements Regarding Activities (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see page 20 of the instructions)	11		X
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? Website address ▶ N/A	13	X	
14	The books are in care of ▶ BETH B. HOLTZ 9209 CROMWELL PARK PLACE Located at ▶ ORLANDO, FL	Telephone no ▶ 407-240-8403 ZIP+4 ▶ 32829		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the year	▶ 15 <input type="checkbox"/>		

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
1a	During the year did the foundation (either directly or indirectly)		
(1)	Engage in the sale or exchange, or leasing of property with a disqualified person?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(2)	Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(3)	Furnish goods, services, or facilities to (or accept them from) a disqualified person?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(4)	Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> 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)?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> 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)	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)? Organizations relying on a current notice regarding disaster assistance check here	N/A	
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?	N/A	
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 , 20	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see page 20 of the instructions)	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 , 20		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
b	If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2009)	N/A	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		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?		X

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)

5a	During the year did the foundation pay or incur any amount to			
(1)	Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
(2)	Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
(3)	Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
(4)	Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see page 22 of the instructions)	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
(5)	Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
b	If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see page 22 of the instructions)? Organizations relying on a current notice regarding disaster assistance check here	N/A		5b
c	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53.4945-5(d)	N/A <input type="checkbox"/> Yes <input type="checkbox"/> No		
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870			6b
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
b	If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?	N/A		7b

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**1 List all officers, directors, trustees, foundation managers and their compensation (see page 22 of the instructions).**

(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 account, other allowances
SEE STATEMENT 7				

2 Compensation of five highest-paid employees (other than those included on line 1—see page 23 of the instructions).

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				

Total number of other employees paid over \$50,000

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**3 Five highest-paid independent contractors for professional services (see page 23 of the instructions). If none, enter "NONE."**

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		

Total 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 number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

	Expenses
1 N/A	
2	
3	
4	

Part IX-B Summary of Program-Related Investments (see page 24 of the instructions)

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

	Amount
1 N/A	
2	
All other program-related investments See page 24 of the instructions	
3	
Total. Add lines 1 through 3 ▶	

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see page 24 of the instructions.)

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	1a	1,367,277
b	Average of monthly cash balances	1b	1,111,201
c	Fair market value of all other assets (see page 24 of the instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	2,478,478
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	0
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	2,478,478
4	Cash deemed held for charitable activities. Enter 1½ % of line 3 (for greater amount, see page 25 of the instructions)	4	37,177
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	2,441,301
6	Minimum investment return. Enter 5% of line 5	6	122,065

Part XI Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

1	Minimum investment return from Part X, line 6	1	122,065
2a	Tax on investment income for 2009 from Part VI, line 5	2a	
b	Income tax for 2009 (This does not include the tax from Part VI)	2b	
c	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	122,065
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	122,065
6	Deduction from distributable amount (see page 25 of the instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	122,065

Part XII Qualifying Distributions (see page 25 of the 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	1a	129,245
b	Program-related investments—total from Part IX-B	1b	
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	129,245
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see page 26 of the instructions)	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	129,245

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

Part XIII Undistributed Income (see page 26 of the instructions)

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI, line 7				122,065
2 Undistributed income, if any, as of the end of 2009				
a Enter amount for 2008 only				
b Total for prior years 20____, 20____, 20____				
3 Excess distributions carryover, if any, to 2009				
a From 2004	107,501			
b From 2005	43,516			
c From 2006	60,200			
d From 2007	196,356			
e From 2008	57,863			
f Total of lines 3a through e	465,436			
4 Qualifying distributions for 2009 from Part XII, line 4 ▶ \$ 129,245				
a Applied to 2008, but not more than line 2a				
b Applied to undistributed income of prior years (Election required—see page 26 of the instructions)				
c Treated as distributions out of corpus (Election required—see page 26 of the instructions)				
d Applied to 2009 distributable amount				122,065
e Remaining amount distributed out of corpus	7,180			
5 Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below.				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	472,616			
b Prior years' undistributed income Subtract line 4b from line 2b				
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
d Subtract line 6c from line 6b Taxable amount—see page 27 of the instructions				
e Undistributed income for 2008 Subtract line 4a from line 2a Taxable amount—see page 27 of the instructions				
f Undistributed income for 2009 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2010				0
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see page 27 of the instructions)				
8 Excess distributions carryover from 2004 not applied on line 5 or line 7 (see page 27 of the instructions)	107,501			
9 Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a	365,115			
10 Analysis of line 9				
a Excess from 2005	43,516			
b Excess from 2006	60,200			
c Excess from 2007	196,356			
d Excess from 2008	57,863			
e Excess from 2009	7,180			

Part XIV Private Operating Foundations (see page 27 of the instructions and Part VII-A, question 9)

1a 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 <input type="checkbox"/> 4942(j)(3) or <input type="checkbox"/> 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	Prior 3 years			(e) Total
	(a) 2009	(b) 2008	(c) 2007	(d) 2006	
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon					
a "Assets" alternative test—enter					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(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 (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year—see page 28 of the instructions.)

1 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)) LOUIS L. HOLTZ	
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 N/A	
2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:	
Check here <input checked="" type="checkbox"/> 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 page 28 of the 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	

Part XV Supplementary Information (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year SEE STATEMENT 8				129,245
Total			▶ 3a	129,245
b Approved for future payment N/A				
Total			▶ 3b	

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated

Enter gross amounts unless otherwise indicated		Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See page 28 of the instructions)
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
1	Program service revenue					
a	_____					
b	_____					
c	_____					
d	_____					
e	_____					
f	_____					
g	Fees and contracts from government agencies					
2	Membership dues and assessments					
3	Interest on savings and temporary cash investments			14	1,700	
4	Dividends and interest from securities			14	19,788	
5	Net rental income or (loss) from real estate					
a	Debt-financed property					
b	Not debt-financed property					
6	Net rental income or (loss) from personal property					
7	Other investment income					
8	Gain or (loss) from sales of assets other than inventory					- 472,425
9	Net income or (loss) from special events					
10	Gross profit or (loss) from sales of inventory					
11	Other revenue a _____					
b	_____					
c	_____					
d	_____					
e	_____					
12	Subtotal. Add columns (b), (d), and (e)		0		21,488	- 472,425
13	Total. Add line 12, columns (b), (d), and (e)				13	- 450,937

(See worksheet in line 13 instructions on page 28 to verify calculations)

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

[illegible]

1 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?

a Transfers from the reporting foundation to a noncharitable exempt organization of

(1) Cash

(2) Other assets

b Other transactions

(1) Sales of assets to a noncharitable exempt organization

(2) Purchases of assets from a noncharitable exempt organization

(3) Rental of facilities, equipment, or other assets

(4) Reimbursement arrangements

(5) Loans or loan guarantees

(6) Performance of services or membership or fundraising solicitations

c Sharing of facilities, equipment, mailing lists, other assets, or paid 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 fair market value in any transaction or sharing arrangement, show in column **(d)** the value of the goods, other assets, or services received.

	Yes	No
1a(1)		X
1a(2)		X
1b(1)		X
1b(2)		X
1b(3)		X
1b(4)		X
1b(5)		X
1b(6)		X
1c		X

[illegible]

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No

b If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship
N/A		

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge.

Sign Here

Signature of officer or trustee

Date _____

PRESIDENT

Title

**Paid
Preparer's
Use Only**

Preparer's
signature

Firm's name (or yours if self-employed), address, and ZIP code

NEUMAN & COMPANY, PA
280 WEKIVA SPRINGS RD STE 3030
LONGWOOD, FL 32779

Date _____

11/08/10

Check if
self-employed

Preparer's identifying
number (see **Signature** on
page 30 of the instructions)
P00298330

EIN ▶ 59-3476071

Phone no **407-862-7557**

Form **990-PF** (2009)

Schedule B
(Form 990, 990-EZ,
or 990-PF)
Department of the Treasury
Internal Revenue Service

Schedule of Contributors

► Attach to Form 990, 990-EZ, or 990-PF.

OMB No 1545-0047

2009

Name of the organization

Employer identification number

HOLTZ CHARITABLE FOUNDATION, INC.

35-2042978

Organization type (check one)

Filers of:

Section:

Form 990 or 990-EZ

☐ 501(c)() (enter number) organization

☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

☐ 527 political organization

Form 990-PF

☒ 501(c)(3) exempt private foundation

☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation

☐ 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**

Note Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

Special Rules

☐ For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II.

☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year. ► \$

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2 of its Form 990, or check the box in the heading of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF.

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

Name of organization

HOLTZ CHARITABLE FOUNDATION, INC.

Employer identification number

35-2042978

Part I Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	JOHN COBAN 3573 N W CLUBSIDE CIR BOCA RATON FL 33496	\$ 5,500	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
2	JACQUES CHAPPUIS APT 31 2 EAST 75TH STREET NEW YORK NY 10021	\$ 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
3	KEVIN KEYES 4 WORLD FINANCIAL CENTER - F1 05 NEW YORK NY 10080	\$ 25,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)

Federal Statements

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Statement 1 - Form 990-PF, Part I, Line 6a - Sale of Assets

Description		How Received		Expense	Depreciation	Net Gain / Loss
Whom Sold	Date Acquired	Date Sold	Sale Price			
ISHARES RUSSELL 1000 VALUE	9/12/07	1/23/09	\$ 18,577	\$ 35,479	\$	-16,902
ISHARES RUSSELL 1000 VALUES	10/31/07	1/23/09	PURCHASE 25,570	50,169		-24,599
ISHARES RUSSELL 1000 GROWTH	11/22/06	1/23/09	PURCHASE 41,343	65,154		-23,811
ISHARES RUSSELL 1000 GROWTH	5/31/07	1/23/09	PURCHASE 24,454	41,902		-17,448
ISHARES RUSSELL MIDCAP	9/12/07	1/23/09	PURCHASE 14,355	26,882		-12,527
ISHARES RUSSELL MIDCAP	10/31/07	1/23/09	PURCHASE 28,412	56,202		-27,790
ISHARES RUSSELL MIDCAP	1/25/08	1/23/09	PURCHASE 3,290	5,619		-2,329
ISHARES RUSSELL 1000 VALUE	5/31/07	2/03/09	PURCHASE 1,972	4,020		-2,048
ISHARES RUSSELL 1000 VALUE	2/21/08	2/03/09	PURCHASE 876	1,516		-640
ISHARES RUSSELL 1000 VALUE	6/24/08	2/03/09	PURCHASE 9,421	15,347		-5,926
ISHARES RUSSELL 1000 VALUE	10/31/07	2/03/09	PURCHASE 20,376	39,878		-19,502
ISHARES RUSSELL 1000 VALUE	2/21/08	2/03/09	PURCHASE 11,174	19,324		-8,150
ISHARES MSCI EAFE	6/24/08	2/10/09	PURCHASE 3,863	7,066		-3,203
ISHARES MSCI EAFE	4/19/07	2/10/09	PURCHASE 74,171	151,545		-77,374
ISHARES RUSSELL 2000 VALUE	4/19/07	2/18/09	PURCHASE 5,365	11,108		-5,743
ISHARES RUSSELL 2000 VALUE	1/25/09	2/18/09	PURCHASE 40,141	65,973		-25,832
ISHARES RUSSELL 2000 VALUE	4/01/08	2/18/09	PURCHASE 9,141	15,527		-6,386

Federal Statements

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Statement 1 - Form 990-PF, Part I, Line 6a - Sale of Assets (continued)

Description		How Received		Expense	Depreciation	Net Gain / Loss
Whom Sold	Date Acquired	Date Sold	Sale Price			
ISHARES RUSSELL 2000 VALUE	5/16/08	2/18/09	\$ 2,186	\$ 3,837	\$	-1,651
ISHARES RUSSELL 2000 GROWTH	5/16/08	2/18/09	PURCHASE			
ISHARES RUSSELL 2000 GROWTH	5/16/08	2/18/09	28,129	48,266		-20,137
ISHARES RUSSELL 2000 GROWTH	4/01/08	2/18/09	PURCHASE			
ISHARES RUSSELL 2000 GROWTH	5/16/08	2/18/09	25,804	41,225		-15,421
JB HUNT TRANS SVSC	5/16/08	2/18/09	PURCHASE			
L-3 COMMUNICATIONS	3/27/07	2/18/09	2,092	3,590		-1,498
PHILIP MORRIS	3/13/03	2/18/09	PURCHASE			
PHILIP MORRIS	8/25/03	2/18/09	21,392	26,800		-5,408
PHILIP MORRIS	3/16/04	2/18/09	PURCHASE			
TARGET	10/16/01	2/18/09	11,374	5,654		5,720
ISHARES RUSSELL 1000 GROWTH	5/31/07	2/24/09	PURCHASE			
ISHARES RUSSELL 1000 GROWTH	1/25/08	2/24/09	7,038	4,150		2,888
ISHARES RUSSELL 1000 GRWOTH	4/01/08	2/24/09	PURCHASE			
ISHARES RUSSELL 1000 GRWOTH	10/31/07	2/24/09	10,557	8,407		2,150
ISHARES RUSSELL 1000 MIDCAP	1/25/08	2/24/09	PURCHASE			
ISHARES RUSSELL 1000 MIDCAP	2/21/08	2/24/09	12,587	13,163		-576
ISHARES RUSSELL 1000 MIDCAP	1/25/08	2/24/09	PURCHASE			
ISHARES RUSSELL 1000 MIDCAP	2/21/08	2/24/09	20,888	37,983		-17,095
ISHARES RUSSELL 1000 MIDCAP	6/24/08	2/24/09	PURCHASE			
ISHARES RUSSELL 1000 MIDCAP	2/21/08	2/24/09	15,749	30,068		-14,319
ISHARES RUSSELL 1000 MIDCAP	6/24/08	2/24/09	PURCHASE			
ISHARES RUSSELL 1000 MIDCAP	2/21/08	2/24/09	9,947	16,692		-6,745
ISHARES RUSSELL 1000 MIDCAP	6/24/08	2/24/09	PURCHASE			
ISHARES RUSSELL 1000 MIDCAP	2/21/08	2/24/09	15,749	30,068		-14,319
ISHARES RUSSELL 1000 MIDCAP	6/24/08	2/24/09	PURCHASE			
ISHARES RUSSELL 1000 MIDCAP	2/21/08	2/24/09	3,979	6,728		-2,749
ISHARES RUSSELL 1000 MIDCAP	6/24/08	2/24/09	PURCHASE			
ISHARES RUSSELL 1000 MIDCAP	2/21/08	2/24/09	36,627	66,921		-30,294
ISHARES RUSSELL 1000 MIDCAP	6/24/08	2/24/09	PURCHASE			
ISHARES RUSSELL 1000 MIDCAP	2/21/08	2/24/09	5,312	10,057		-4,745
ISHARES RUSSELL 1000 MIDCAP	6/24/08	2/24/09	PURCHASE			
ISHARES RUSSELL 1000 MIDCAP	2/21/08	2/24/09	2,017	4,002		-1,985

Federal Statements

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Statement 1 - Form 990-PF, Part I, Line 6a - Sale of Assets (continued)

Whom Sold	Description	Date Acquired	Date Sold	How Received		Cost	Expense	Depreciation	Net Gain / Loss
				Sale Price	PURCHASE				
ISHARES RUSSELL MID VALUE		4/19/07	2/24/09	\$	PURCHASE 63,545 \$	148,665 \$		\$	-85,120
ISHARES RUSSELL MID VALUE		2/24/09	10/31/07		PURCHASE 20,173	45,401			-25,228
ISHARES RUSSELL MID VALUE		1/25/08	2/24/09		PURCHASE 22,527	43,466			-20,939
DEVON		2/18/09	3/30/09		PURCHASE 9,084	9,834			-750
DEVON		3/02/09	3/30/09		PURCHASE 6,647	6,016			631
EL PASO		2/18/09	3/30/09		PURCHASE 7,598	9,769			-2,171
EL PASO		3/02/09	3/30/09		PURCHASE 5,628	5,562			66
JOHNSON AND JOHNSON		2/18/09	3/30/09		PURCHASE 11,895	12,511			-616
JOHNSON AND JOHNSON		3/02/09	3/30/09		PURCHASE 8,194	7,511			683
CELGENE		2/18/09	4/24/09		PURCHASE 7,506	9,903			-2,397
CELGENE		3/02/09	4/24/09		PURCHASE 5,531	5,964			-433
CELGENE		4/13/09	4/24/09		PURCHASE 19,556	20,488			-932
NII HOLDINGS		2/18/09	4/24/09		PURCHASE 9,609	9,761			-152
NII HOLDINGS		3/02/09	4/24/09		PURCHASE 8,952	5,875			3,077
NII HOLDINGS		4/13/09	4/24/09		PURCHASE 19,218	17,509			1,709
KROGER		2/18/09	8/06/09		PURCHASE 10,004	9,898			106
KROGER		3/02/09	8/06/09		PURCHASE 6,173	5,960			213

Federal Statements

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Statement 1 - Form 990-PF, Part I, Line 6a - Sale of Assets (continued)

Whom Sold	Description	Date Acquired	Date Sold	How Received		Cost	Expense	Depreciation	Net Gain / Loss
				Sale Price	PURCHASE				
KROGER		4/13/09	8/06/09	\$	19,370	\$		\$	770
UNDER ARMOUR		2/18/09	8/06/09		PURCHASE				
					15,147				5,413
UNDER ARMOUR		3/02/09	8/06/09		PURCHASE				
					10,059				4,088
UNDER ARMOUR		4/13/09	8/06/09		PURCHASE				
					18,106				3,796
ACTIVISION		2/18/09	11/02/09		PURCHASE				
					13,728				1,243
ACTIVISION		3/02/09	11/02/09		PURCHASE				
					7,748				357
ACTIVISION		4/13/09	11/02/09		PURCHASE				
					20,332				-351
PRAXAIR		2/18/09	11/02/09		PURCHASE				
					15,044				2,601
PRAXAIR		3/02/09	11/02/09		PURCHASE				
					9,502				2,949
CVS		2/18/09	12/18/09		PURCHASE				
					11,255				1,320
CVS		3/02/09	12/18/09		PURCHASE				
					7,247				1,280
CVS		4/13/09	12/18/09		PURCHASE				
					16,806				647
ORACLE		2/18/09	12/18/09		PURCHASE				
					17,782				5,286
ORACLE		3/02/09	12/18/09		PURCHASE				
					11,814				4,408
ORACLE		4/13/09	12/18/09		PURCHASE				
					25,090				5,625
XTO		2/18/09	12/18/09		PURCHASE				
					13,654				3,730
XTO		3/02/09	12/18/09		PURCHASE				
					9,416				3,493

Federal Statements

35-2042978

FYE: 12/31/2009

Statement 1 - Form 990-PF, Part I, Line 6a - Sale of Assets (continued)

Whom Sold	Description	Date Acquired	Date Sold	How Received		Cost	Expense	Depreciation	Net Gain / Loss
				Sale Price	PURCHASE				
XTO		4/13/09	12/18/09	\$	26,601 \$	18,266 \$		\$	8,335
TD AMERITRADE		2/18/09	12/21/09		PURCHASE	12,393			5,720
TD AMERITRADE		3/02/09	12/21/09		PURCHASE	7,468			4,333
TD AMERITRADE		4/13/09	12/21/09		PURCHASE	16,963			2,889
STAPLES		2/18/09	12/21/09		PURCHASE	9,931			5,923
STAPLES		3/02/09	12/21/09		PURCHASE	6,037			3,475
STAPLES		4/13/09	12/21/09		PURCHASE	4,282			840
TEVA		2/18/09	12/21/09		PURCHASE	12,425			2,073
TEVA		3/02/09	12/21/09		PURCHASE	1,536			343
FRANKLIN UTILITIES A		11/11/08	3/02/09		PURCHASE	20,000			-3,035
FRANKLIN UTILITIES A		12/03/08	3/02/09		PURCHASE	220			-28
FRANKLIN UTILITIES A		12/03/08	3/02/09		PURCHASE	150			-18
FRANKLIN UTILITIES A		12/04/08	3/02/09		PURCHASE	30,000			-3,682
FEDERATED OPPORTUNITY A		2/10/09	3/02/09		PURCHASE	78,034			-7,635
FRANKLIN UTILITIES A		3/04/09	4/21/09		PURCHASE	505			34

Federal Statements

35-2042978

FYE: 12/31/2009

Statement 1 - Form 990-PF, Part I, Line 6a - Sale of Assets (continued)

Whom Sold	Description	Date Acquired	Date Sold	How Received		Cost	Expense	Depreciation	Net Gain / Loss
					Sale Price				
TOTAL				\$	1,285,645	\$ 1,758,070	\$	0	\$ -472,425

Statement 2 - Form 990-PF, Part I, Line 16b - Accounting Fees

Description	Total	Net Investment	Adjusted Net	Charitable Purpose
ACCOUNTING AND TAX PREP SERVICES	\$ 8,826	\$ 4,413	\$	\$
TOTAL	\$ 8,826	\$ 4,413	\$ 0	\$ 0

Statement 3 - Form 990-PF, Part I, Line 16c - Other Professional Fees

Description	Total	Net Investment	Adjusted Net	Charitable Purpose
INVESTMENT ADVISORY FEES	\$ 10,015	\$ 10,015	\$	\$
TOTAL	\$ 10,015	\$ 10,015	\$ 0	\$ 0

Statement 4 - Form 990-PF, Part I, Line 18 - Taxes

Description	Total	Net Investment	Adjusted Net	Charitable Purpose
FOREIGN TAXES	\$ 92	\$ 92	\$	\$
US TREASURY	1,157	1,157		
TOTAL	\$ 1,249	\$ 1,249	\$ 0	\$ 0

Federal Statements**Statement 5 - Form 990-PF, Part II, Line 10b - Corporate Stock Investments**

<u>Description</u>	<u>Beginning of Year</u>	<u>End of Year</u>	<u>Basis of Valuation</u>	<u>Fair Market Value</u>
DETAILED SCHEDULES MAINTAINED	\$ 1,359,711	\$ 1,163,324	COST	\$ 1,484,823
TOTAL	<u>\$ 1,359,711</u>	<u>\$ 1,163,324</u>		<u>\$ 1,484,823</u>

Statement 6 - Form 990-PF, Part II, Line 13 - Other Investments

<u>Description</u>	<u>Beginning of Year</u>	<u>End of Year</u>	<u>Basis of Valuation</u>	<u>Fair Market Value</u>
INVESTMENT IN STEPHENS (27640014)	\$ 200,000	\$ 200,000	COST	\$ 211,406
TOTAL	<u>\$ 200,000</u>	<u>\$ 200,000</u>		<u>\$ 211,406</u>

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Statement 7 - Form 990-PF, Part VIII, Line 1 - List of Officers, Directors, Trustees, Etc.

Name and Address	Title	Average Hours	Compensation	Benefits	Expenses
LOUIS L. HOLTZ 9209 CROMWELL PARK PLACE ORLANDO FL 32827	CHAIRMAN/DIR	0.00	0	0	0
BETH B. HOLTZ 9209 CROMWELL PARK PLACE ORLANDO FL 32827	PRES/DIR	0.00	0	0	0
LUANNE E ALTENBAUMER 3430 N GUNNISON DR. FAYETTEVILLE AR 72703	DIRECTOR	0.00	15,000	0	0
LOUIS L. (SKIP) HOLTZ 3103 COPPERFIELD RD. GREENVILLE NC 27834	DIRECTOR	0.00	15,000	0	0
KEVIN R HOLTZ 6223 POPLAR GROVE DR. PORT ORANGE FL 32127	SEC/TR/DIR	0.00	15,000	0	0
ELIZABETH H MASSAGLIA 9453 NORTH STATE RD 267 BROWNSBURG IN 46112	DIRECTOR	0.00	15,000	0	0

Federal Statements**Form 990-PF, Part XV, Line 1a - Managers Who Contributed Over 2% or \$5,000**

<u>Name of Manager</u>	<u>Amount</u>
LOUIS L. HOLTZ	\$
TOTAL	\$ 0

Federal Statements

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Statement 8 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the
Year

Name	Address	Relationship	Status	Purpose	Amount
2ND MILE	1402 SOUTH ALLERTON STREE				
STATE COLLEGE PA 16801			PUBLIC CHAR.	CHARITABLE	1,500
ALIVE IN CHRIST	C/O DIOCESE;50 E ROBINSON		PUBLIC CHAR.	CHARITABLE	25,000
ORLANDO FL 32801					
CATSKILLS AREA HOSPICE	1 BIRCHWOOD DRIVE		PUBLIC CHAR.	CHARITABLE	1,500
ONEONTA NY 13820					
CCFB-NY	CORNELL UNIVERSITY		PUBLIC CHAR.	CHARITABLE	1,000
ITHACA NY 14853					
DELTA UPSILON EDUC FOUNDA	8705 FOUNDERS ROAD		PUBLIC CHAR.	CHARITABLE	10,000
INDIANAPOLIS IN 46268					
KENT STATE UNIV ATHLETICS	P O BOX 5190		PUBLIC CHAR.	CHARITABLE	1,000
KENT OH 44242					
MEDTRONIC	710 MEDTRONIC PARKWAY			MEDICAL DEVICES FOR NEEDY	2,490
FRIDLEY MN 55432					
MOFFITT CANCER CENTER	12902 MAGNOLIA DRIVE		PUBLIC CHAR.	CHARITABLE	1,000
TAMPA FL 33612					
MULTIPLE MYELOMA RESEARCH	383 MAIN AVENUE		PUBLIC CHAR.	CHARITABLE	5,000
NORWALK CT 06851					
ORLANDO SENTINEL CAMPAIGN	633 N ORANGE AVE		PUBLIC CHAR.	CHARITABLE	1,000
ORLANDO FL 32801					
OUR CATHOLIC APPEAL	C/O DIOCESE;50 E ROBINSON		PUBLIC CHAR.	CHARITABLE	1,500
ORLANDO FL 32801					
PAN-MASSACHUSETTS CHALLENGE	DANAFARBER CANCER;44 BINN		PUBLIC CHAR.	CHARITABLE	1,000
BOSTON MA 02115					
SACRED HEART SCHOOL					
SALVATION ARMY	615 SLATERS LANE				
ALEXANDRIA VA 22313			PUBLIC CHAR.	CHARITABLE	1,500
UPPER VALLEY HALL OF FAME	P O BOX 60				
EAST LIVERPOOL OH 43920			PUBLIC CHAR.	CHARITABLE	70,000
URBAN YOUTH LEAGUE	8815 CONROY-WINDEMERE#332				
ORLANDO FL 32835					
VARIOUS, LESS THAN \$500 EA					
2,500					
1,255					
1,000					
WOMEN CARE CENTER	4574 EAST MICHIGAN ST		PUBLIC CHAR.	CHARITABLE	1,000
ORLANDO FL 32812					

Federal Statements

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**Statement 8 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the
Year (continued)**

Name	Address	Relationship	Status	Purpose	Amount
TOTAL					129,245

8868

Application for Extension of Time To File an
Exempt Organization Return

OMB No 1545-1709

File a separate application for each return

Department of the Treasury
Internal Revenue ServiceIf you are filing for an Automatic 3-Month Extension, complete only Part I and check this box ☐

If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form)

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed)

If you are a corporation required to file Form 990-T and requesting an automatic 6-month extension—check this box and complete

Part I only ☐

Other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns

Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 990-T. For more details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Charities & Nonprofits

Name of Exempt Organization HOLTZ CHARITABLE FOUNDATION, INC. Number, street, and room or suite no. If a P.O. box, see instructions 9209 CROMWELL PARK PLACE City, town or post office, state, and ZIP code. For a foreign address, see instructions ORLANDO FL 32827	Employer identification number 35-2042978
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Check type of return to be filed (file a separate application for each return)

<input type="checkbox"/> Form 990	<input type="checkbox"/> Form 990-T (corporation)	<input type="checkbox"/> Form 4720
<input type="checkbox"/> Form 990-BL	<input type="checkbox"/> Form 990-T (sec 401(a) or 408(a) trust)	<input type="checkbox"/> Form 5227
<input type="checkbox"/> Form 990-EZ	<input type="checkbox"/> Form 990-T (trust other than above)	<input type="checkbox"/> Form 6069
<input type="checkbox"/> Form 990-PF	<input type="checkbox"/> Form 1041-A	<input type="checkbox"/> Form 8870

The books are in the care of ☐Telephone No ☐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

for the whole group, check this box ☐If it is for part of the group, check this box ☐

and attach

List the names and EINs of all members the extension will cover

I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time

until _____, to file the exempt organization return for the organization named above. The extension is

for the organization's return for

☐ calendar year

or

☐ tax year beginning

, and ending

If this tax year is for less than 12 months, check reason ☐Initial return ☐Final return ☐Change in accounting period ☐

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

3a

\$

If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax

payments made. Include any prior year overpayment allowed as a credit

3b

\$

Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required,

deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment

System). See instructions

3c

\$

Note: If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO

For payment instructions

Privacy Act and Paperwork Reduction Act Notice, see Instructions.

Form 8868 (Rev 4-2009)

If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this box ☒

Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868

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 copies needed)

Name of Exempt Organization	Employer identification number
HOLTZ CHARITABLE FOUNDATION, INC.	35-2042978
Number, street, and room or suite no. If a P.O. box, see instructions	For IRS use only
9209 CROMWELL PARK PLACE	
City, town or post office, state, and ZIP code. For a foreign address, see instructions	
ORLANDO FL 32827	

Check type of return to be filed (File a separate application for each return)

<input type="checkbox"/> Form 990	<input checked="" type="checkbox"/> Form 990-PF	<input type="checkbox"/> Form 1041-A	<input type="checkbox"/> Form 6069
<input type="checkbox"/> Form 990-BL	<input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust)	<input type="checkbox"/> Form 4720	<input type="checkbox"/> Form 8870
<input type="checkbox"/> Form 990-EZ	<input type="checkbox"/> Form 990-T (trust other than above)	<input type="checkbox"/> Form 5227	

Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

The books are in the care of **BETH B. HOLTZ**

Telephone No **407-240-8403**

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

the whole group, check this box ☐ If it is for part of the group, check this box

☐ and attach a

with the names and EINs of all members the extension is for

I request an additional 3-month extension of time until **11/15/10**

For calendar year **2009**, or other tax year beginning , and ending

If this tax year is for less than 12 months, check reason ☐ Initial return ☐ Final return ☐ Change in accounting period

State in detail why you need the extension

ADDITIONAL TIME IS REQUESTED TO GATHER INFORMATION TO PREPARE A COMPLETE AND ACCURATE 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	8a	\$	0
If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868	8b	\$	2,100
Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions	8c	\$	0

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature  CPA

Title **CPA**

Date **08/10/10**

Form **8868** (Rev 4-2009)