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990-PF

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

OMB No 1545-0052 _

Depart	ment of the T Il Revenue Se	reasury rvice	Note: The foundation may	Treated as a Priv be able to use a copy of			orting requirements	2009
For	calendar		r tax year beginning			and ending		, 20
G C	heck all t	hat apply	Initial return	Initial return	of a former pu	ublic charity	_	Final return
			Amended return	Addr	ess change		Name change	
		Name of four	ndation				A Employer identific	cation number
Use	the IRS	ł					1	
	label,	LAVIN FA	AMILY FOUNDATION				36-	6106074
Otl	nerwise,	Number and	street (or P O box number if	mail is not delivered to street	et address)	Room/suite	B Telephone number (see p	age 10 of the instructions)
	print	1						
	r type	5001 SW	27TH AVE				() –
	Specific ructions.	City or town,	state, and ZIP code				C If exemption application pending check here	on is
	ructions.	ł					D 1 Foreign organization	►
		OCALA, E	FL 34474				2 Foreign organization	
H C	heck type	of organizat		(c)(3) exempt private t	oundation		85% test, check he computation	
	1 ''	-	exempt charitable trust	Other taxable r		on		
i E						crual	E If private foundation s under section 507(b)(. .
		om Part II, co						
	6) ► \$	58,70	. F If the foundation is in under section 507(b)(
			nue and Expenses (The	I, column (d) must be	1		1	(d) Disbursements
للنقصي	total c	of amounts in c	columns (b), (c), and (d)	(a) Revenue and expenses per	(b) Net inve		(c) Adjusted net	for charitable
			requal the amounts in ie 11 of the instructions))	books	incon	ne	income	purposes (cash basis only)
T_1		<u> </u>		<u> </u>	_	_	· · · · · · · · · · · · · · · · · · ·	(00011 00010 0111)
'2		f the f	etc , received (attach schedule) . oundation is not required to		1			
3		allacii	Sch B	1,170,976	1.17	0,976.		ATCH 1
		•	st from securities	304,539		04,539		ATCH 2
				·	1	,,,,,,,,,,		AICH Z
`								
			ss)	134,379				
<u>اڇ</u>	b Gross s	ales price for all	ale of assets not on line 10 3,741,873.			-		
ē١,		on line 6a			13	34,379.		
ê 7	•	-	me (from Part IV, line 2) .			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	55.	
8		ort-term capita e modifications		WED 1				· · · · · · · · · · · · · · · · · · ·
10	a Gross s	ales less returns	1 ∞	70				
-		wances · · · ost of goods sold	: 10 JUN 25					
110		•	(attach schedule)	2010 6				
11	Othor	pront of (loss)	schedule)	<u> </u>		-		
12		Add lines 1 thr		17,609,894	1.60)9,894.	55.	
13			s, directors, trustees, etc				······································	
14	•		nes and wages					
- 1			oyee benefits					L
use 1			hedule) ATCH 3		7.	1,258.	0.	
Operating and Administrative Expenses			ach schedule) ATCH 4	10,000		5,000.	0.	
ŭΙ			es (attach schedule)					
۔ ا		,	, , , , , ,					
te 17			*	* 49,912	, 	-		
18 15t			(see page 14 of the instructions)		•			
E 19			schedule) and depletion .		 	-		
된 20					 	-		
된 21			and meetings	1	-			<u> </u>
E 22			ons					
gi 23			ich schedule)		 			
24			administrative expenses.		, [6 250	^	
ō		es 13 through				6,258.	0.	2 744 7
25			grants paid			C 250		2,744,7
_ 26			rsements Add lines 24 and 25	2,807,179	<u>' · </u>	6,258.	0.	2,744,7
27	Subtra	ct line 26 from	line 12		1			
			penses and disbursements	-1,197,285				
			me (if negative, enter -0-)		1,60	3,636.		
- 1	c Adjust	ed net income	e (if negative, enter -0-).	. [l .		55.	

ATCH 5 20526

_	الفعدة	Ralanco Shoots	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End o	of year
L	artii	Dalatice Stieets	amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	ng			
	2		ash investments	1,494,091.	1,877,009.	1,877,009.
	3	Accounts receivable				
		Less allowance for doubt	ful accounts			
	4					
		Less allowance for doubt	ful accounts			
	5					
	6	Receivables due from offic	cers, directors, trustees, and other			
		disqualified persons (attac	h schedule) (see page 16 of the instructions)			
	7		eivable (attach schedule)			
			ful accounts			
, 0	8	Inventories for sale or use				
sets	9		ferred charges			
Ass	10 a		government obligations (attach schedule) *.*	22,500,000.	22,500,000.	23,215,977.
_	b	Investments - corporate st	tock (attach schedule) ATCH 7	19,524,124.	15,916,575.	33,667,899.
			onds (attach schedule)			
	11	Investments - land, buildings, and equipment basis	-			
		Less accumulated depreciati (attach schedule)	on \			
	12	Investments - mortgage lo	pans			
	13		h schedule)			
	14	Land, buildings, and equipment basis				
		Less accumulated depreciation (attach schedule)	on >			
	15	Other assets (describe)			
	16	Total assets (to be compl		_		
_			ge 1, item l)	43,518,215.	40,293,584.	58,760,885.
	17	Accounts payable and acc	crued expenses			
	18					
es	19	Deferred revenue				
Liabilities	20	· · · · · · · · · · · · · · · · · · ·	trustees, and other disqualified persons			
iab	21		s payable (attach schedule)			
_	22	Other liabilities (describe	>)			
	23	Total liabilities (add lines	17 through 22)			
_			w SFAS 117, check here			
			through 26 and lines 30 and 31.			
S	24	Unrestricted				
۳	25					
aja	26					
or Fund Balances		Foundations that do n				
Š			lete lines 27 through 31.			
F	27	Capital stock, trust princip		43,518,215.	40,293,584.	
Si	28	• • • •	and, bldg, and equipment fund			
Net Assets	29	•	ted income, endowment, or other funds	0.	0.	
Ä	30	•	balances (see page 17 of the]
Š				43,518,215.	40,293,584.	
	31	Total liabilities and net a	ssets/fund balances (see page 17]
		of the instructions)		43,518,215.	40,293,584.	
G	art I		inges in Net Assets or Fund	Balances		
			inces at beginning of year - Part II, co		gree with	
			on prior year's return)			43,518,215.
2		er amount from Part I, lin			1 -	-1,197,285.
		er increases not included				
						42,320,930.
5	Dec	reases not included in lir	ne 2 (itemize) ▶ATTACH	IMENT 8	5	2,027,346.
6	Tota	I net assets or fund bala	inces at end of year (line 4 minus line	e 5) - Part II, column (b),	line 30 6	40,293,584.

** ATCH 6

Part IV Capital Gains	and Losses for Tax on Inv	estment Income	T-150	r———	
• •	describe the kind(s) of property sold (e ck warehouse, or common stock, 200 s		(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a SEE PART IV SCHED	ULE				
b			ļ <u>.</u>		
_c					
_d			ļ		
<u>e</u>		Г	 	<u> </u>	<u> </u>
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) mini	
а					
_ b			ļ		
<u>c</u>					
<u>d</u>			1		
Complete only for assets show	ung gain in column (h) and owned	by the foundation on 12/31/69		0 (0.1.45)	
Complete only for assets snov	ving gain in column (h) and owned (i) Adjusted basis	(k) Excess of col (i)		Gains (Col (h) g (k), but not less t	
(i) F M V as of 12/31/69	as of 12/31/69	over col (j), if any		Losses (from co	
b b			·		
С					
d					
e					
2 Capital gain net income or (i		gain, also enter in Part I, line 7 (loss), enter -0- in Part I, line 7	2		134,379.
3 Net short-term capital gain o	'' or (loss) as defined in sections 1222	· · ·	- 		10.7,072.
	ne 8, column (c) (see pages 13 and				
•	ne 8		3		55.
		ced Tax on Net Investment Inc	ome		
		able amount of any year in the base	period?	□	Yes X No
		ee page 18 of the instructions before	e 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 ra (col (b) divided by	
2008	1,087,095.	56,580,555.	ļ	(cor (b) divided by	0.019213
2007	835,950.	55,681,556.	1		0.015013
2006	2,936,588.	44,667,774.	1		0.065743
2005	492,785.	47,413,687.			0.010393
2004	5,254,331.	47,076,854.			0.111612
		-			
2 Total of line 1, column (d)			2		0.221974
3 Average distribution ratio for	or the 5-year base period - divide th	ne total on line 2 by 5, or by the			
number of years the founda	ation has been in existence if less t	han 5 years	3		0.044395
4 Enter the net value of nonc	haritable-use assets for 2009 from	Part X, line 5	4	56,	534,960.
			1		
5 Multiply line 4 by line 3			5	2,	509,870.
			1 1		
6 Enter 1% of net investment	income (1% of Part I, line 27b)		6		16,036.
				_	505 005
7 Add lines 5 and 6			7	2,	525,906.
				^	744 750
8 Enter qualifying distribution If line 8 is equal to or green		in Part VI, line 1b, and complete	8 that part		744,750. x rate See the

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Par	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of the ins	ructio	ons)	
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1			
	Date of ruling or determination letter(attach copy of ruling letter if necessary - see instructions)			
þ	Domestic foundations that meet the section 4940(e) requirements in Part V, check		16,0	36.
	here ► X and enter 1% of Part I, line 27b			
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4%			
	of Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 2			
3	Add lines 1 and 2		16,0	<u> 36.</u>
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 4			<u>0.</u>
5	Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0		16,0	<u>36.</u>
6	Credits/Payments			
а	2009 estimated tax payments and 2008 overpayment credited to 2009 6a 64, 163.			
b	Exempt foreign organizations-tax withheld at source			
C	Tax paid with application for extension of time to file (Form 8868) 6c 0 .			
d	Backup withholding erroneously withheld		c a 1	6 2
7	Total credits and payments Add lines 6a through 6d		64,1	63.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		40 1	27
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		48,1	21.
11	Enter the amount of line 10 to be Credited to 2010 estimated tax 48,127. Refunded 11			
	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	1a	105	No X
	participate or intervene in any political campaign? Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19	-1a		
D		1b		Х
	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	-10		
	published or distributed by the foundation in connection with the activities			
	Did the foundation file Form 1120-POL for this year?	1c		
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
ŭ	(1) On the foundation \$ (2) On foundation managers \$			
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
Ī	on foundation managers \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
-	If "Yes," attach a detailed description of the activities			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of			
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
ь	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	_5		_X_
	If "Yes," attach the statement required by General Instruction T			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
	By language in the governing instrument, or			
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that	ł		
	conflict with the state law remain in the governing instrument?	_6	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	7	X	
8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the			
	instructions) IL,			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	_8b	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			v
	27)? If "Yes," complete Part XIV	9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			Х
	names and addresses	10		

Х

X No

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Did the foundation hold more than a 2% direct or indirect interest in any business

Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

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?

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

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Part VIII	Information About Officers, Directors, Trustees, Foundation Managers, Highly P and Contractors (continued)	aid Employ	ees,	
3 Five high	est-paid independent contractors for professional services (see page 23 of the instructions	s) If none, e	nter "NO	NE."
	(a) Name and address of each person paid more than \$50,000 (b) Type of sen		(c) Comp	
NOT APPL	ICABLE			
			2.1	
Total number	er of others receiving over \$50,000 for professional services	<u></u>	▶	NONE
Part IX-A	Summary of Direct Charitable Activities			
	ation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number ins and other beneficiaries served, conferences convened, research papers produced, etc		Expe	enses
1 DISTE	RIBUTES FUNDS TO OTHER CHARITABLE ORGANIZATIONS			
			2,7	744,750
2				
3				
4				
Part IX-B	Summary of Program-Related Investments (see page 23 of the instructions)			
Describe the	two largest program-related investments made by the foundation during the tax year on lines 1 and 2		Ame	ount
1 NOT F	APPLICABLE			
2				
All other prog	ram-related investments. See page 24 of the instructions			
3 NONE				
Total. Add I	ines 1 through 3	<u></u>		

Pa	rt X	Minimum Investment Return (All domestic foundations must complete this part. Foreig see page 24 of the instructions.)	n foundatio	ins,
1	Fairn	market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purpo	oses		
а	Avera	age monthly fair market value of securities	1a	56,882,881.
b	Avera	age of monthly cash balances	1b	513,017.
С	Fairn	market value of all other assets (see page 24 of the instructions)	1c	0.
d	Total	(add lines 1a, b, and c)	1d	57,395,898.
е	Redu	iction claimed for blockage or other factors reported on lines 1a and		
	1c (at	ttach detailed explanation)		
2	Acqui	isition indebtedness applicable to line 1 assets	2	0.
3	Subtr	ract line 2 from line 1d	3	57,395,898.
4	Cash	deemed held for charitable activities Enter 1 1/2 % of line 3 (for greater amount, see page 25		
	of the	e instructions)	4	860,938.
5	Net v	value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V. line 4.	5	56,534,960.
6	Minin	num investment return. Enter 5% of line 5	6	2,826,748.
Pa	rt XI			
1	Minin	num investment return from Part X, line 6	1	2,826,748.
		on investment income for 2009 from Part VI, line 5 2a 16, 036.		
b		ne tax for 2009 (This does not include the tax from Part VI)	1	
_		ince 2a and 2h	2c	16,036.
3		butable amount before adjustments Subtract line 2c from line 1	3	2,810,712.
4		overies of amounts treated as qualifying distributions	4	· · · · · · · · · · · · · · · · · · ·
5		lines 3 and 4	5	2,810,712.
6		iction from distributable amount (see page 25 of the instructions)	6	
7		ibutable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
		·	7	2,810,712.
Pa		Qualifying Distributions(see page 25 of the instructions)	,	
=	A === 0	husto had (valuding administrative avanages) to accomplish charitable, atc. numbers		
1		ounts paid (including administrative expenses) to accomplish charitable, etc., purposes enses, contributions, gifts, etc total from Part I, column (d), line 26	1a	2,744,750.
a			1b	2,744,750.
b	Prog	gram-related investments - total from Part IX-B punts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.	10	<u> </u>
2			2	0.
_		ooses	-	0.
3		ounts set aside for specific charitable projects that satisfy the	20	0.
a		ability test (prior IRS approval required)	3a 3b	0.
b		h distribution test (attach the required schedule)	4	2,744,750.
4		lifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	+	2,144,130.
5		ndations that qualify under section 4940(e) for the reduced rate of tax on net investment income	_	16,036.
•		er 1% of Part I, line 27b (see page 26 of the instructions)	6	2,728,714.
6	-	usted qualifying distributions. Subtract line 5 from line 4	<u> </u>	
	Note	e: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whetlequalifies for the section 4940(e) reduction of tax in those years	ner the tound	auon

Pa	rt XIII Undistributed Income (see page	26 of the instruction	ns)		
		(a)	(b)	(c)	(d)
1	Distributable amount for 2009 from Part XI,	Corpus	Years prior to 2008	2008	2009
	line 7				2,810,712.
2	Undistributed income, if any, as of the end of 2009				
а	Enter amount for 2008 only			1,667,744.	
	Total for prior years 20 07 .20 06 20 05				
3	Excess distributions carryover, if any, to 2009				
а	From 2004				
	From 2005				
С	From 2006				
đ	From 2007				
е	From 2008				
f	Total of lines 3a through e				
4	Qualifying distributions for 2009 from Part XII,				
	line 4 ▶ \$ 2,744,750.				
а	Applied to 2008, but not more than line 2a			1,667,744.	
b	Applied to undistributed income of prior years (Election				
	required - see page 26 of the instructions)				···
С	Treated as distributions out of corpus (Election				
	required - see page 26 of the instructions)				1 077 006
d	Applied to 2009 distributable amount				1,077,006.
	Remaining amount distributed out of corpus	0.			· · · · · · · · · · · · · · · · · · ·
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:	0.			
	Corpus Add lines 3f, 4c, and 4e Subtract line 5	.			
b	Prior years' undistributed income Subtract line 4b from line 2b				
С	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				
	· ·				· · · · · · · · · · · · · · · · · · ·
a	Subtract line 6c from line 6b Taxable amount - see page 27 of the instructions				
е	Undistributed income for 2008 Subtract line				
	4a from line 2a Taxable amount - see page 27 of the instructions				
ī	Undistributed income for 2009 Subtract lines 4d and 5 from line 1 This amount must be				
	distributed in 2010				1,733,706.
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see page 27 of the				
	instructions)				
8	Excess distributions carryover from 2004 not applied on line 5 or line 7 (see page 27 of the				
	instructions)				
9	Excess distributions carryover to 2010.	_			
	Subtract lines 7 and 8 from line 6a	0.	•		·
10	Analysis of line 9				
	Excess from 2005				
	Excess from 2006				
C					
ď	Excess from 2008				
	LACESS HOITI 2003 U.		l	<u>1</u> l	

			artha data af the miliae		▶ I	
	foundation, and the ruling	•				(1)(2) or 1 1042(1)(1
b	Check box to indicate whet	······	onvate operating foundat		4942	(J)(3) or 4942(J)(5
а	Enter the lesser of the ad-	Tax year		Prior 3 years	1,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(e) Total
	Justed net income from Part I or the minimum investment return from Part X for each year listed	(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		<u> </u>			
ď						
	of exempt activities					
е	Qualifying distributions made directly for active conduct of exempt activities Subtract line					
	2d from line 2c					
а	Complete 3a, b, or c for the alternative test relied upon "Assets" alternative test - enter					
	(1) Value of all assets (2) Value of assets qualifying					-
	under section 4942(j)(3)(B)(i)			_		
b	"Endowment" alternative test- enter 2/3 of minimum invest-					
	ment return shown in Part X,		1			
С	"Support" alternative test - enter		-	-		
٠	(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		<u> </u>	<u> </u>		
Pa			Complete this par se page 28 of the i		dation had \$5,000	or more in ass
	Information Regarding					
а	List any managers of before the close of any	the foundation who tax year (but only if	have contributed mo they have contributed	ore than 2% of the to more than \$5,000)	tal contributions rece (See section 507(d)(2)	ived by the foundati)
	LEONARD H.					
b	List any managers of ownership of a partner	the foundation who ship or other entity)	own 10% or more of which the foundation	of the stock of a cor on has a 10% or great	poration (or an equal er interest	ly large portion of
_	NONE Information Regarding	Contribution Grant	Gift Loan Scholars	hin etc Programs:		
?					vritable arganizations	and door not con
	Check here ▶ if the unsolicited requests for organizations under other contents.	or funds If the fou	ndation makes gifts,	grants, etc (see pa	ge 28 of the instruct	ions) to individuals
а	The name, address, an ATTACHME	d telephone number of			e addressed	
b	The form in which appli		omitted and informatio	n and materials they sl	hould include	
	NO REQUIRED	FORM.				
С	Any submission deadlin	nes				-
		ON DEADLINES.			······································	
_	Any restrictions or lifactors	mitations on award	s, such as by geog	raphical areas, char	itable fields, kinds of	institutions, or ot
a						
u ISA		TIONS OR LIMITA	ATIONS.			Form 990-PF (2

Form 990-PF (2009)			36-6106074	Page 11
Part XV Supplementary Information (co	ontinued)			
3 Grants and Contributions Paid Durin Recipient Name and address (home or business)	ng the Year or App	oved for I	Future Payment	
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	
a Paid during the year				
ATTACHMENT 11				
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Total			▶ 3a	2,744,750.
b Approved for future payment		1		
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		İ		
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Total			▶ 2h	1

r gross an	nounts unless otherwise indicated	Unrela	ted business income	Excluded by	section 512, 513, or 514	(e) Related or exempt
Program s	ervice revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See page 28 of the instructions)
a a	ervice revenue					the metrodions y
c				<u> </u>		
 e						
 F						
Fees ar	nd contracts from government agencies					
-	up dues and assessments					<u> </u>
	savings and temporary cash investments			14	1,170,976.	
	and interest from securities			14	304,539.	
	income or (loss) from real estate					
Debt-fi	inanced property					
Not de	ebt-financed property					
	acome or (loss) from personal property					
	stment income					
	s) from sales of assets other than inventory			18	134,379.	
Net incomi	e or (loss) from special events					
	fit or (loss) from sales of inventory					
•	enue a					
•						
					1,609,894.	
Subtotal A	Add columns (b), (d), and (e)				·	1,609,8
Total. Add workshee	Add columns (b), (d), and (e)	verify calcula	tions)	xempt Purp		1,609,8
Subtotal A Total. Add workshee T XVI-B ne No.	Add columns (b), (d), and (e)	verify calcula to the Ac	ntions) complishment of E	Exempt Purpled in column	ooses (e) of Part XVI-A con	tributed importantl
Subtotal A Total. Add workshee T XVI-B ne No.	Add columns (b), (d), and (e)	verify calcula to the Ac	ntions) complishment of E	Exempt Purpled in column	ooses (e) of Part XVI-A con	tributed important
Subtotal A Total. Add workshee TI XVI-B e No.	Add columns (b), (d), and (e)	verify calcula to the Ac	ntions) complishment of E	Exempt Purpled in column	ooses (e) of Part XVI-A con	tributed important
Subtotal A Total. Add workshee TI XVI-B e No.	Add columns (b), (d), and (e)	verify calcula to the Ac	ntions) complishment of E	Exempt Purpled in column	ooses (e) of Part XVI-A con	tributed important
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Subtotal A Total. Add workshee 1 XVI-B e No.	Add columns (b), (d), and (e)	verify calcula to the Ac	ntions) complishment of E	Exempt Purpled in column	ooses (e) of Part XVI-A con	tributed important
iubtotal A otal. Add workshee t XVI-B e No.	Add columns (b), (d), and (e)	verify calcula to the Ac	ntions) complishment of E	Exempt Purpled in column	ooses (e) of Part XVI-A con	tributed important
iubtotal A otal. Add workshee t XVI-B e No.	Add columns (b), (d), and (e)	verify calcula to the Ac	ntions) complishment of E	Exempt Purpled in column	ooses (e) of Part XVI-A con	tributed important
iubtotal A otal. Add workshee t XVI-B e No.	Add columns (b), (d), and (e)	verify calcula to the Ac	ntions) complishment of E	Exempt Purpled in column	ooses (e) of Part XVI-A con	tributed important
ubtotal A otal. Add workshee t XVI-B e No.	Add columns (b), (d), and (e)	verify calcula to the Ac	ntions) complishment of E	Exempt Purpled in column	ooses (e) of Part XVI-A con	tributed important
iubtotal A otal. Add workshee t XVI-B e No.	Add columns (b), (d), and (e)	verify calcula to the Ac	ntions) complishment of E	Exempt Purpled in column	ooses (e) of Part XVI-A con	tributed important
Subtotal A Total. Add workshee 1 XVI-B e No.	Add columns (b), (d), and (e)	verify calcula to the Ac	ntions) complishment of E	Exempt Purpled in column	ooses (e) of Part XVI-A con	tributed important
Subtotal A Total. Add workshee 1 XVI-B e No.	Add columns (b), (d), and (e)	verify calcula to the Ac	ntions) complishment of E	Exempt Purpled in column	ooses (e) of Part XVI-A con	tributed important
Subtotal A Total. Add workshee 1 XVI-B e No.	Add columns (b), (d), and (e)	verify calcula to the Ac	ntions) complishment of E	Exempt Purpled in column	ooses (e) of Part XVI-A con	tributed important
Subtotal A Total. Add workshee Tt XVI-B e No.	Add columns (b), (d), and (e)	verify calcula to the Ac	ntions) complishment of E	Exempt Purpled in column	ooses (e) of Part XVI-A con	tributed important
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Subtotal A Total. Add workshee Tt XVI-B e No.	Add columns (b), (d), and (e)	verify calcula to the Ac	ntions) complishment of E	Exempt Purpled in column	ooses (e) of Part XVI-A con	tributed important
Subtotal A Total. Add workshee 1 XVI-B e No.	Add columns (b), (d), and (e)	verify calcula to the Ac	ntions) complishment of E	Exempt Purpled in column	ooses (e) of Part XVI-A con	tributed important
Subtotal A Total. Add workshee Tt XVI-B e No.	Add columns (b), (d), and (e)	verify calcula to the Ac	ntions) complishment of E	Exempt Purpled in column	ooses (e) of Part XVI-A con	tributed important
Subtotal A Total. Add workshee TI XVI-B e No.	Add columns (b), (d), and (e)	verify calcula to the Ac	ntions) complishment of E	Exempt Purpled in column	ooses (e) of Part XVI-A con	tributed important
Subtotal A Total. Add workshee T XVI-B ne No.	Add columns (b), (d), and (e)	verify calcula to the Ac	ntions) complishment of E	Exempt Purpled in column	ooses (e) of Part XVI-A con	tributed important
Subtotal A Total. Add workshee TI XVI-B e No.	Add columns (b), (d), and (e)	verify calcula to the Ac	ntions) complishment of E	Exempt Purpled in column	ooses (e) of Part XVI-A con	tributed important
Subtotal A Total. Add workshee TI XVI-B e No.	Add columns (b), (d), and (e)	verify calcula to the Ac	ntions) complishment of E	Exempt Purpled in column	ooses (e) of Part XVI-A con	tributed important

Pa	rt XVII	Information Exempt Orga		sfers To and	Transaction	ns and Relat	ionships With	Nonc	harit	able
1	Did th	ne organization directly	or indirectly enga	age in any of the	following with	n any other org	ganization described		Yes	No
	organi	zations? ers from the reporting fou	•			,, 300,0,, 02,,	rollating to political		l	ŀ
а		ers from the reporting four		. •				1a(1)		х
		her assets						1a(2)		Х
b	Other	transactions						Ì		
	(1) Sa	ales of assets to a noncha	ritable exempt organi	zation	. .			1	 	X
		irchases of assets from a								X
		ental of facilities, equipme							├	X
		eimbursement arrangeme eans or loan guarantees							1	X
		erformance of services or						1	1	Х
С		g of facilities, equipment,						١		Х
đ	If the	answer to any of	he above is "Yes,	" complete the fo	llowing schedu	le Column (b)	should always show	v the	fair i	markei
		of the goods, other								
	value	in any transaction or	sharing arrangeme	ent, show in colur	nn (d) the va	lue of the good	ds, other assets, or	servic	es red	ceived
(0)		(b) Amount involved	(a) Name of neach	aritable exempt organiza	ation (d)	Description of transfe	ers, transactions, and shar	ing arra	ngemer	nts
(a)	Line no	N/A	(c) Name of Honor	arrable exempt organize	N/		515, 1121134410115, 4115 5114	ing arra	, igo i i o i	
						·				
										
										
										
				·						
										
		foundation directly or	and receive officered	with as salated to		av avamat araan	rations described in			
Za		n 501(c) of the Code (oth							es 🗔	X No
b		s," complete the following		5/(0/) G G.G	-·					
		(a) Name of organization		(b) Type of orga	nization		(c) Description of relation	ship		
		······································								
							 			
	Linder	penalties of penjury, I decl	are that I have examin	ed this return, including	g accompanying	schedules and state	ments, and to the best	of my	knowled	lge and
	belief,	it is true, correct, and com	plete Declaration of pr	eparer (other than taxp	ayer or fiduciary)	is based on all info	rmation of which prepare	er has a	any kno	wledge
		Plato.	19. Les		14/	23//0 1	PRESIDEN	T		
ē	Sı	gnature of efficer or trustee			Date		Tdle			
He			_ ^		Date	Check if	Preparer's number (\$			ก
Sign Here	خَ∹َ	Preparer's		NI.	-6-22-1	self-employ	/ed ▶ page 30 of	the instr	uctions)	
S	Paid reparer's Use Only	signature	we U, V	UV-	ナレール	U	365-		038	<u>صا</u>
	Paid Preparer's Use Only	Firm's name (or yours if self-employed), address	$\frac{\text{KPMG LLP}}{303 \text{ E. W}}$	ACKER DRIVE			EIN ▶ 13-5565	20/		
		and ZIP code	CHICAGO,	IL		60601	Phone no 312-6	65-1	.000	

(Rev April 2009)

Application for Extension of Time To File an Exempt Organization Return

Department of the Treasury

OMB No 1545-1709

nternal Revenue S	Service			File a sepai	rate applica	tion for each re	eturn.		ŀ			
		utomatic 3-l	Month Ext	tension, com	plete only	Part I and ch	eck this b	ox				X
 If you are f Do not comple 	filing for an A	dditional (N	ot Automa	atic) 3-Month	Extension	i, complete d	only Part I	II (on pag	e 2 of this viously file	s form)	 1 8868	- النا
Part Auto	matic 3-Mc	onth Extens	sion of Ti	ime. Only su	ıbmıt orıgı	nal (no copi	es neede	=d)				
A corporation					_			•	oox and co	mplete	!	
Part I only												▶ ∐
All other corp time to file inc)-C filers),	partnerships	, REMICs,	and trusts r	must use	Form 7	004 to re	equest	an exter	nsion of
Electronic Filing one of the respective of the respective of the respective of the returns, or a cape of the returns, or a cape of the returns, or a cape of the returns of	turns noted if (1) you wa omposite or	below (6 m ant the addi consolidated	nonths for itional (not d From 99	r a corporation t automatic) (90-T Instead,	on require 3-month e you must	d to file For xtension or (submit the fi	m 990-T) (2) you fil ully comp	Howev le Forms leted and	er, you c 990-BL, signed p	annot 6069, page 2	file Form or 8870 (Part II)	n 8868 . group
Type or	Name of Exe	empt Organiza	ation				*		Employe	r ident	fication n	umber
print	LAVI	N FAMILY	FOUNDA	NOITA					36-	6106	074	
File by the	Number, str	eet, and room	or suite no	If a P O box, s	see instruction	ns					 -	
due date for	411 1	LAKESIDE	TERRAC	CE								
filing your return See instructions	1	r post office.	•	ZIP code For a f	foreign addre	ss, see instruct	tions					
Check type o	f return to b	e filed (file a	separate	application fo	or each retu	ırn)			· · · · · · · · · · · · · · · · · · ·			
Form 990	ס	[Form	n 990-T (corpora	ation)			For	m 4720			
Form 990)-BL	{	Form	1 990-T (sec 40	01(a) or 408(a) trust)		For	m 5227			
Form 990	-EZ		Form	n 990-T (trust of	ther than abo	ove)		For	m 6069			
X Form 990	-PF		Form	1 1041-A				For	m 8870			
If the organIf this is for the whole g	a Group Ret	urn, enter th	e organiza		git Group E	xemption Nu	mber (GE	N)	nd attach		lf this	ls
names and Elf												
unu	et an autor 08 ganization's calendar yea tax year beg	return for ar 2009 o		months for file the exemp	n organiza	ration requir tion return fo , and ending	red to	file For	m 990-T n named a	extended	ension of the exte	of time ension is
2 If this tax	year is for le	ess than 12 r	months, ch	neck reason	Initia	l return	Final re	eturn	Change	e in ac	counting	period
	dable credits	See instruc	ctions	·		· · · · · · · · · · · · · · · · · · ·			<u> </u>	3 a	\$	
=	=			90-T, enter an illowed as a cr	•	ole credits ar	nd estima	ted tax p	ayments	3 ь	\$	
c Balance	Due. Subtrac	t line 3b fro	om line 3a	a Include you	ır paymen	with this fo	rm, or, if	required	, deposit	- 3		
				sing EFTPS (-			-				
instructio		•	•	- '			,	,	•	3 c	s	
Caution. If you	are going to	make an el	lectronic fi	und withdrawa	al with this	Form 8868,	see Form	8453-E	O and For			
for payment in			-41 6 - 1	Nation	-4				Es and V	120 m		
For Privacy A	ct and Paper	work Reduc	ction Act I	NOTICE, SEE IN	structions.				SE	∦ F j om}	5668 (Re	v 4-2009)
									VALE	* ^ ^		

MAY 13 2010

FORM 990-PF - PART IV

Kind of P	roperty	AINS AND L	Desc	cription		7 9 7	Date acquired	Date sold
GIUSS SAIR I	Depreciation	Cost or	FMV	Adi basis	T EXCESS OF	4 -	Gain	
price less	allowed/	other	as of	as of	FMV over		or	
price less expenses of sale	allowable	basis	12/31/69	Adj basis as of 12/31/69	FMV over adj basis	$\bot\!\!\!\bot$	or (loss)	
		SBH						
41,873.		3,607,549.					134,324.	
11,075.		3,007,349.					134,324.	
		BANC OF AME	CRICA				VAR	Į
							55.	
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TAL GAIN (L	OSS)						134,379.	
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ATTACHMENT 1

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

	NET	INVESTMENT	INCOME	2 2 3	1,170,011.	1,170,976.
REVENUE	AND	EXPENSES	PER BOOKS	9	1,170,011.	1,170,976.
						TOTAL
			DESCRIPTION	NORTHERN TRUST COMPANY	BANK OF AMERICA CORPORATION	

- DIVIDENDS AND INTEREST FROM SECURITIES	
FROM	
S AND INTEREST FROM S	
AND	
- DIVIDENDS	
PART I -	
M 990PE, 1	
FORM	

NET INVESTMENT INCOME	619. 303,920.	304,539.
REVENUE AND EXPENSES PER BOOKS	619. 303,920.	304,539.
		TOTAL
DESCRIPTION	MERRILL LYNCH ALBERTO CULVER	

	NET ADJUS INVESTMENT NET	1,258.	1,258.
	REVENUE AND EXPENSES PER BOOKS	2,517.	2,517.
FORM SSUPE, PART 1 - LEGAL FEES	DESCRIPTION	LEGAL FEES	TOTALS

JSTED ET COME

CHARITABLE PURPOSES

PAGE 19

FEES
ACCOUNTING
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FORM

CHARITABLE PURPOSES		0
ADJUSTED NET INCOME		0
NET INVESTMENT INCOME	.000.	5,000.
REVENUE AND EXPENSES PER BOOKS	10,000.	10,000.
		TOTALS
DESCRIPTION	ACCOUNTING FEES	

20526

FORM 990PF, PART I - TAXES

REVENUE AND

EXPENSES

<u>DESCRIPTION</u> <u>PER BOOKS</u>

FEDERAL TAX PAYMENTS 49,897. ILLINOIS STATE TAX FEES 15.

TOTALS 49,912.

PART II - U.S. AND STATE OBLIGATIONS

FORM 990PF,

	977.		ATTACHMENT
ENDING <u>FMV</u>	23,215,977.	•	PAGE 22
ENDING BOOK VALUE	22,500,000.		
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			V 09-6.4
	US OBLIGATIONS TOTAL		
DESCRIPTION	FEDERAL BONDS		5GH09J 1353

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FORM 990PE,

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CORPORATE STOCK PART II

DESCRIPTION

ALBERTO CULVER- 1,013,067 SHS SALLY BEAUTY - 522,244 SHS

ENDING BOOK VALUE

ENDING FMV

29, 672, 732. 3, 995, 167.

TOTALS

15,916,575.

12,078,082. 3,838,493.

33,667,899.

ATTACHMENT 7

PAGE 23

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

<u>DESCRIPTION</u> <u>AMOUNT</u>

CURRENT YEAR DECREASE 2,027,346.

TOTAL 2,027,346.

20526

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS

TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION

LEONARD H. LAVIN 5001 SW 27TH AVE OCALA, FL 34474

PRESIDENT

CAROL L. BERNICK 909 ASHLAND AVENUE RIVER FOREST, IL 60305

VICE PRES.

GRAND TOTALS

ATTACHMENT 9

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

LEONARD H. LAVIN 5001 SW 27TH AVE OCALA, FL 34474

FOUNDATION	
FAMILY	
LAVIN	

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

RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR

PURPOSE OF GRANT OR CONTRIBUTION FOUNDATION STATUS OF RECIPIENT

REHABILITATION INSTITUTE OF CHICAGO

RECIPIENT NAME AND ADDRESS

525,000

AMOUNT

ATTACHMENT 11

3,000

10,000

90,006

60,000

35,000

INTERNATIONAL COMMITTEE OF ARTISTS FOR PEACE

AMERICAN JEWISH COMMITTEE

YMCA OF SAN DIEGO

AMERICA RED CROSS - CENTENNIAL CHAPTER

FARM AID

PAGE 27 ATTACHMENT 11

20526

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ATTACHMENT 11 (CONT'D)

LAVIN FAMILY FOUNDATION

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RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND

RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
LEGAL MOMENTUM			80,000
JUNIOR ACHIEVEMENT OF CHICAGO			5,000
MARINE CORPS SCHOLARSHIP FOUNDATION			3,500
THE UNITED STATES NAVY MEMORIAL			5,850
THE MUSEUM OF SCIENCE AND INDUSTRY			1,000
CHICAGO SYMPHONY ORCHESTRA			10,000

20526

5GH09J 1353

FOUNDATION	
FAMILY 6	
LAVIN	

ATTACHMENT 11 (CONT'D)

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

RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR	AND

RE	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		
	AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
SHRINERS HOSPITALS FOR CHILDREN			200
CHILDREN'S CANCER CENTER			3,000
HARVEST INTERNATIONAL			3,000
JEWISH FEDERATION OF PALM BEACH COUNTY		9	2,000
NEIGHBORHOOD HEALTH CLINIC			3,000.
PHILHARMONIC CENTER FOR THE ARTS			3,000

ATTACHMENT 11 PAGE 29

20526

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

RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR

FOUNDATION STATUS OF RECIPIENT

RONALD MCDONALD HOUSE OF CHARITIES OF TAMPA

RECIPIENT NAME AND ADDRESS

BOYS & GIRLS CLUB OF MARION COUNTY

THE FLORIDA SCHOOL CHOICE FUND

FOR THE CHILDREN

CHILDREN'S HOME SOCIETY OF FLORIDA

HEALTH FOR HUMANITY

ATTACHMENT 11 (CONT'D)

AMOUNT PURPOSE OF GRANT OR CONTRIBUTION

3,000 5,000 5,000 3,000 3,000

50,000

ATTACHMENT 11

FOUNDATION
FAMILY
LAVIN

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

RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR

ATTACHMENT 11 (CONT'D)

PURPOSE OF GRANT OR CONTRIBUTION FOUNDATION STATUS OF RECIPIENT

RECIPIENT NAME AND ADDRESS

209,300

1,000

AMOUNT

5,000

5,000

10,000

100

TOWN OF PALM BEACH UNITED WAY

NATIONAL KIDNEY FOUNDATION

RESERVATION FOUNDATION OF PALM BEACH

CHICAGO BOTANIC GARDEN

USO OF ILLINOIS

THE ARK

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ATTACHMENT 11
PAGE 31

5GH09J 1353

FOUNDATION	
FAMILY	
LAVIN	

FORM 990PF PART XV - GRANIS AND CONTRIBUTIONS PAID DURING THE YFAR

500,000 400,000 5,000 7,500 5,000 10,000 AMOUNT ATTACHMENT 11 (CONT'D) PURPOSE OF GRANT OR CONTRIBUTION RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR FOUNDATION STATUS OF RECIPIENT RECIPIENT NAME AND ADDRESS UNIVERSITY OF WASHINGTON THE CAMPANILE FOUNDATION JUNIOR ACHIEVEMENT MILLENIUM PARK INC LIVE 4 LALI INC PAWS

ATTACHMENT 11 PAGE 32

V 09-6 4

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ATTACHMENT 11 (CONT'D)

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

RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR

FOUNDATION STATUS OF RECIPIENT

PURPOSE OF GRANT OR CONTRIBUTION

100,000

100,000

AMOUNT

7,000

50,000

400,000

15,000

ART INSTITUTE OF CHICAGO

CHICAGO INTERNATIONAL CHARTER SCHOOL

JEWISH FEDERATION METRO CHICAGO

NORTHWESTERN UNIVERSITY

RECIPIENT NAME AND ADDRESS

JEWISH UNITED FOUNDATION

AMERICAN RED CROSS - CENTENNIAL CHAPTER

TOTAL CONTRIBUTIONS PAID

2,744,750

20526

V 09-6 4

5GH09J 1353

PAGE 33 ATTACHMENT 11

SCHEDULE D (Form 1041)

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

Capital Gains and Losses

► Attach to Form 1041, Form 5227, or Form 990-T. See the instructions for Schedule D (Form 1041) (also for Form 5227 or Form 990-T, if applicable).

OMB No 1545-0092

Employer identification number

	AVIN FAMILY FOUNDATION			<u> </u>	36-610607	7 4	
Note	: Form 5227 filers need to complete onlyPar						
Par	Short-Term Capital Gains and Los	sses - Assets	Held One Yo	ear or Less			
	(a) Description of property (Example 100 shares 7% preferred of "Z" Co)	(b) Date acquired (mo , day, yr)	(c) Date sold (mo , day, yr)	(d) Sales price	(e) Cost or other b (see page 4 of the instructions)		(f) Gain or (loss) for the entire year Subtract (e) from (d)
1a							
							·
b	Enter the short-term gain or (loss), if any, from	n Schedule D-1	, line 1b		· · · · · · ·	1b	55.
2	Short-term capital gain or (loss) from Forms 4	1684, 6252, 678	1, and 8824		<i>.</i>	2	
3	Net short-term gain or (loss) from partnership	s, S corporation	ns, and other e	states or trusts		3	
4	Short-term capital loss carryover Enter the air	mount, if any, fr	om line 9 of the	e 2008 Capital Loss		4	(
5	Carryover Worksheet	s 1a through 4 i	n column (f) E	nter here and on line	13,		55.
Par	column (3) on the back					5	33.
rai	(a) Description of property (Example 100 shares 7% preferred of "Z" Co)	(b) Date acquired (mo , day, yr)	(c) Date sold (mo , day, yr)	(d) Sales price	(e) Cost or other b (see page 4 of the instructions)		(f) Gain or (loss) for the entire year Subtract (e) from (d)
6a							· · · · · · · · · · · · · · · · · · ·
	1111		. ,				
b	Enter the long-term gain or (loss), if any, from	Schedule D-1,	line 6b			6b	134,324.
7	7 Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824					7	
8	8 Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts					8	
9	9 Capital gain distributions					9	
10	Gain from Form 4797, Part I					10	
11	Long-term capital loss carryover Enter the ar Carryover Worksheet	mount, if any, fr	om line 14 of th	ne 2008 Capital Loss		11	(
12	Net long-term gain or (loss). Combine lines column (3) on the back	6a through 11	n column (f) E	nter here and on line	14a,		134,324.
Eor F	Paperwork Reduction Act Notice, see the Instruction			<u></u>			D (Form 1041) 2009

JSA 9F1210 2 000

For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

Schedule D (Form 1041) 2009

33

JSA 9F1220 2 000

34

Figure the tax on the amount on line 17 Use the 2009 Tax Rate Schedule for Estates and Trusts

Tax on all taxable income. Enter the smaller of line 32 or line 33 here and on Form 1041, Schedule

(see the Schedule Ginstructions in the instructions for Form 1041)

G, line 1a (or Form 990-T, line 36)

SCHEDULE D-1 (Form 1041)

Department of the Treasury Internal Revenue Service

Continuation Sheet for Schedule D (Form 1041)

► See instructions for Schedule D (Form 1041).

► Attach to Schedule D to list additional transactions for lines 1a and 6a.

OMB No 1545-0092

2009

Name of estate or trust

Employer identification number

36-6106074 LAVIN FAMILY FOUNDATION Short-Term Capital Gains and Losses - Assets Held One Year or Less Part I (d) Sales price (see page 4 of the instructions) (e) Cost or other basis (see page 4 of the instructions) (b) Date (a) Description of property (Example 100 sh 7% preferred of "Z" Co) (c) Date sold (f) Gain or (loss) acquired (mo , day, yr) Subtract (e) from (d) (mo, day, yr) 1a 55. BANC OF AMERICA

For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

Schedule D-1 (Form 1041) 2009

1b Total. Combine the amounts in column (f) Enter here and on Schedule D, line 1b

55.

Name of estate or trust as shown on Form 1041 Do not enter name and employer identification number if shown on the other side Employer identification number Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year (e) Cost or other basis (see page 4 of the instructions) (d) Sales price (see page 4 of the (b) Date (a) Description of property (Example 100 sh 7% preferred of "Z" Co) (c) Date sold (mo , day, yr) (f) Gain or (loss) Subtract (e) from (d) acquired (mo , day, yr) instructions) 6a SBH 3,741,873. 3,607,549. 134,324. 6b Total. Combine the amounts in column (f) Enter here and on Schedule D, line 6b 134,324.

5GH09J 1353