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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

2009

Department of the Treasury Internal Revenue Service Note: The foundation may be able to use a copy of this return to satisfy state reporting requirements For calendar year 2009, or tax year beginning , 2009, and ending Initial return Initial Return of a former public charity Final return G Check all that apply: Amended return Address change Name change Employer Identification number Use the Jacob E. Teitelbaum Family Foundation 76-6326 Kaheiau St IRS label. 52-2139345 Otherwise, В Telephone number (see the instructions) print Kailua Kona, HI 96740 410-562-7409 or type. See Specific If exemption application is pending, check here Instructions 1 Foreign organizations, check here X Section 501(c)(3) exempt private foundation 2 Foreign organizations meeting the 85% test, check here and attach computation Check type of organization: Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation Ε If private foundation status was terminated Accounting method: X Cash Fair market value of all assets at end of year Accrual under section 507(b)(1)(A), check here (from Part II, column (c), line 16) Other (specify) If the foundation is in a 60-month termination under section 507(b)(1)(B), check here 1,101. (Part I, column (d) must be on cash basis) Part Analysis of Revenue and (a) Revenue and (b) Net investment (c) Adjusted net (d) Disbursements Expenses (The total of amounts in expenses per books income ıncome for charitable columns (b), (c), and (d) may not necespurposes sarily equal the amounts in column (a) (cash basis only) (seé the instructions)) SCANNED LUG 189,917 Contributions, gifts, grants, etc, received (att sch) If the foundn is not req to att Sch B Interest on savings and temporary cash investments Dividends and interest from securities 5a Gross rents b Net rental income or (loss) 6a Net gain/(loss) from sale of assets not on line 10 REVENU b Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2) Net short-term capital gain 9 Income modifications 10 a Gross sales less returns and allowances . b Less Cost of goods sold c Gross profit/(loss) (att sch) 11 Other income (attach schedule) Total. Add lines 1 through 11 189,917 0 0 13 Compensation of officers, directors, trustees, etc σ. Office and wages en plansา employee benefits 16 a Legal fees (attach schedule) ULb Accountibilities (altachisch) 650 See St 1 c Other prof fees (attach sch) ᄖ Tes | Texes (Mach schemule)(see.unstit) See Stm 2 50 Depreciation (attach sch) and depletion ١ N G Occupancy Travel, conferences, and meetings 22 Printing and publications. 23 Other expenses (attach schedule) See Statement 146,913. Total operating and administrative expenses. Add lines 13 through 23 147,613 Contributions, gifts, grants paid Part XV 41,203 41,203. Total expenses and disbursements. 188,816 Add lines 24 and 25 0 41,203. Subtract line 26 from line 12: a Excess of revenue over expenses 1,101 and disbursements b Net investment income (if negative, enter -0-) 0. C Adjusted net Income (if negative, enter -0-)

	*****	Balance Sheets	Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End o	f year
	<u> </u>	——	(See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest	bearing .	683.	1,784.	1,101.
	2	Savings and tempora	ary cash investments			
	3	Accounts receivable	•			
		Less: allowance for o	doubtful accounts			
	4	Pledges receivable				
		Less: allowance for o	doubtful accounts >			***************************************
	5	Grants receivable				
	6		ers, directors, trustees, and other			
		disqualified persons (attac	ch schedule) (see the instructions)			
_	7	Other notes and loans rece	eivable (attach sch)			
Ą		Less. allowance for o	doubtful accounts ▶			
Š	8	Inventories for sale of	or use			
A S E T	9	Prepaid expenses ar	nd deferred charges			
Ś	10 a	Investments – U.S. obligations (attach se	and state government chedule)			
	l t	Investments — corporate s	stock (attach schedule)			
	0	: Investments — corporate t	oonds (attach schedule)			
	11	Investments - land,	buildings, and			
		equipment: basis				
		Less: accumulated deprect (attach schedule)	ation . • •			
	12	Investments - morto	gage loans			
	13	Investments - other	(attach schedule)			
	14	Land, buildings, and	equipment: basis			
		Less: accumulated depreci (attach schedule)	ation •			
			ompleted by all filers -	602	1 704	1 101
-	17		o, see page 1, item l)	683.	1,784.	1,101.
ī	17	Accounts payable an	a accrued expenses			
A	18	Grants payable				
В	19	Deferred revenue				
Ļ	20	•	ors, trustees, & other disqualified persons			
† T	21	Mortgages and other notes				
Ī	22	Other liabilities (describ	De)			
E S	23	Total liabilities (add	lines 17 through 22)	0.	0.	
		Foundations that foll	low SFAS 117, check here 4 through 26 and lines 30 and 31.			
ΝF	24	Unrestricted				
N F E U T N	25	Temporarily restricted	d .			
' D	26	Permanently restricted				
A B A L A N		•	not follow SFAS 117, check here ► X	,		
ĚĹ	27		rincipal, or current funds	683.	1,784.	
SNC	28		or land, building, and equipment fund			
0 E	29	• .	lated income, endowment, or other funds.			
R S	30		and balances (see the instructions).	683.	1,784.	
	31	(see the instructions)	et assets/fund balances	683.	1,784.	
7747			ges in Net Assets or Fund Balanc		1,101.	
ı	end-c	net assets or fund ba of-vear figure reported	lances at beginning of year — Part II, colun I on prior year's return)	nn (a), line 30 (must agi	ree with	683.
2		amount from Part I, I			2	1,101.
		increases not included in lin			3	
		ines 1, 2, and 3				1,784.
		ises not included in line 2 (i	temize)		5	
		-	lances at end of year (line 4 minus line 5) -	- Part II, column (b). Iin		1,784.

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(a) List and des	cribe the kind(s) of property sold (e.g., re house; or common stock, 200 shares ML	eal estate,	(b) How acquire P — Purchase D — Donation	d (C) Date acquired (month, day, year)	(d) Date sold (month, day, year)
1a N/A					
b					
С		-			
d					
6			<u> </u>		<u> </u>
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other bas plus expense of sal		(h) Gain or (e) plus (f) m	
a					
<u>b</u>					
<u> </u>					
e					
	owing gain in column (h) and owned by t	the foundation on 12/31/69		(I) Gains (Coli	umn (h)
(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column over column (j), if ar		gain minus column (I than -0-) or Losses (fi	(), but not less
a					
b					
С					
d					
6					
2 Capital gain net income or (_	enter in Part I, line 7 er -0- in Part I, line 7	2		
3 Net short-term capital gain o	or (loss) as defined in sections 1222(5) ai	nd (6):			
ın Part I, line 8	line 8, column (c) (see the instructions).	<u> </u>	. 3		
	der Section 4940(e) for Reducerate foundations subject to the section 49			N/A	
	e this part blank. section 4942 tax on the distributable amo ualify under section 4940(e). Do not com	,	period?	Yes	No
-	nt in each column for each year, see the		ny entries.		
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use ass	ets (c	(d) Distribution olumn (b) divided	
2008					
2007					
2006					
2005					
2004			<u> </u>	- 	
2 Total of line 1, column (d)			2		
3 Average distribution ratio for number of years the foundat	the 5-year base period – divide the totalion has been in existence if less than 5 y	I on line 2 by 5, or by the years	3		
4 Enter the net value of nonch	naritable-use assets for 2009 from Part X,	, line 5	4		
5 Multiply line 4 by line 3			5		
6 Enter 1% of net investment	ıncome (1% of Part I, line 27b)		6		
7 Add lines 5 and 6 .			. 7		
8 Enter qualifying distributions	from Part XII, line 4		8		
If line 8 is equal to or greate Part VI instructions.	r than line 7, check the box in Part VI, lir	ne 1b, and complete that par	t using a 1% t	ax rate. See the	

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	Excise Tax Based on Investment Income (Section 4940(a), 4940	0(b), 4940(e), or 4948	- see the i	nstruction	ıs)
7,	Exempt operating foundations described in section 4940(d)(2), check here and enter 'N/A	A' on line 1			
	Date of ruling or determination letter: (attach copy of letter if necessary	- see instr.)			
ŧ	Domestic foundations that meet the section 4940(e) requirements in Part V,		- <u>1</u>		0.
	check here ▶ and enter 1% of Part I, line 27b				
•	: All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line	12, column (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable				
	foundations only. Others enter -0-)	,	2		0.
3	Add lines 1 and 2	•	3		0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations	=			0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter-	.0-	5	-	0.
6	Credits/Payments:	ا م			
	2009 estimated tax pmts and 2008 overpayment credited to 2009	6a			
	Exempt foreign organizations — tax withheld at source .	6b			
	: Tax paid with application for extension of time to file (Form 8868)	6c 6d			
	Backup withholding erroneously withheld	80	─ ,	P	0.
_	Total credits and payments. Add lines 6a through 6d	20 to attached	8		0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 222 Tax due . If the total of lines 5 and 8 is more than line 7, enter amount owed	o is allached	▶ 9		0.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		► 10	+	
11	Enter the amount of line 10 to be: Credited to 2010 estimated tax	Refunded	► 11	1	
	Statements Regarding Activities	Refullacu	, , , , ,		
		 			Yes No
1 6	During the tax year, did the foundation attempt to influence any national, state, or lo participate or intervene in any political campaign?	ocal legislation or did	Iŧ		1a X
ŀ	Did it spend more than \$100 during the year (either directly or indirectly) for political (see the instructions for definition)?	l purposes			1ь Х
	If the answer is 'Yes' to 1a or 1b , attach a detailed description of the activities and or distributed by the foundation in connection with the activities	copies of any material	's publishe	d	
	Did the foundation file Form 1120-POL for this year?			· · · · · · · · · · · · · · · · · · ·	1c X
•	Enter the amount (if any) of tax on political expenditures (section 4955) imposed du				
	(1) On the foundation \(\bigsis \\$ 0. (2) \) On foundation manage Enter the reimbursement (if any) paid by the foundation during the year for political			0.	
•	foundation managers S S O .	experionare tax impo	sea on		
2	Has the foundation engaged in any activities that have not previously been reported	I to the IRS?			2 X
	If 'Yes,' attach a detailed description of the activities				
2	Has the foundation made any changes, not provide the reported to the IDS, in its gas	vorning instrument or	tiolog		
3	Has the foundation made any changes, not previously reported to the IRS, in its governments of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conforme	ed copy of the change	s		3 X
48	Did the foundation have unrelated business gross income of \$1,000 or more during	the year?			4a X
ŀ	If 'Yes,' has it filed a tax return on Form 990-T for this year?			<u> </u>	4b N/A
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) satisfies	sfied either.			
	By language in the governing instrument, or				
	 By state legislation that effectively amends the governing instrument so that no mi with the state law remain in the governing instrument? 	andatory directions th	at conflict		6 X
7	Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, colu	umn (c), and Part XV			7 X
88	Enter the states to which the foundation reports or with which it is registered (see the MD)	ne instructions)	<u> </u>	_	
k	of the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			— M	o. v
_	(or designate) of each state as required by General Instruction G? If 'No,' attach explanation	•	•	888	8ь Х
9	Is the foundation claiming status as a private operating foundation within the meaning for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Pa	ng of section 4942(j)(3 art XIV)? <i>If 'Yes,' com</i>	3) or 4942(j plete Part)(5) XIV!	9 X
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attack	h a schedule listing th	eir names	1	, v

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3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?

Yes X No

b 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).

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? . . .

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?

3b N/A 4a X 4b X

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Part VII B Statements Regarding Activit	ies for Which For	m 4720 May Be Red	uired (continued)	
5a During the year did the foundation pay or incu	•			
(1) Carry on propaganda, or otherwise attemp	t to influence legislation	n (section 4945(e))?	∐ Yes X	No
(2) Influence the outcome of any specific publi on, directly or indirectly, any voter registra	ic election (see section ition drive?	4955); or to carry		No
(3) Provide a grant to an individual for travel,		·	Yes X	No
(4) Provide a grant to an organization other the in section 509(a)(1), (2), or (3), or section	nan a charitable, etc, or 4940(d)(2)? (see instru	ganization described ctions)	Yes X] No
(5) Provide for any purpose other than religious educational purposes, or for the prevention			Yes X] No
b If any answer is 'Yes' to 5a(1)-(5), did any of the described in Regulations section 53.4945 or in (see instructions)?	he transactions fail to q a current notice regard	ualify under the exception ling disaster assistance	ons	5b N/A
Organizations relying on a current notice regar	ding disaster assistanc	e check here .	▶ []
c If the answer is 'Yes' to question 5a(4), does t tax because it maintained expenditure response	he foundation claim exe	emption from the	N/A Yes]No
If 'Yes,' attach the statement required by Regu	•	5-5(d)		,
6a Did the foundation, during the year, receive ar on a personal benefit contract?			. Yes X]No
b Did the foundation, during the year, pay premi If 'Yes' to 6b, file Form 8870	ums, directly or indirect	tly, on a personal benefi	t contract?	. 6b X
7a At any time during the tax year, was the found	ation a party to a prohil	bited tax shelter transac	tion? Yes X]No
b If yes, did the foundation receive any proceeds				7b N/A
Information About Officers, D and Contractors	irectors, Trustees	, Foundation Mana	igers, Highly Paid	Employees,
1 List all officers, directors, trustees, foundation	managers and their co	ompensation (see instru	ctions).	
(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
Jacob E. Teitelbaum	President	0.	0.	0.
76-6326 Kaheiau Street	0			
Kailua Kona, HI 96740			- · · ·	
2 Compensation of five highest-paid employees	 	 uded on line 1— see inst	ructions). If none, ente	r '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			Semperiodien	
Total number of other employees paid over \$50,000		<u> </u>	-	0
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Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid and Contractors (continued)	l Employees,
3 Five highest-paid independent contractors for professional services – (see instructions). If none, enter 'NONE.'	
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
None	(c) company
Total number of others receiving over \$50,000 for professional services	0
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 <u>N/A</u>	
2	
3	-
4	
Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. 1 N/A	Amount
2	
All other program-related investments. See instructions. 3	
Total. Add lines 1 through 3	_
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Part X Minimum Investm	ent Return (All dor	nestic foundations mus	t complete this part.	Foreign foundat	ions.

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,	see instructions.)	- Orcigit to	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes: Average monthly fair market value of securities.	1a	
ŀ	Average of monthly cash balances	1 b	
•	Fair market value of all other assets (see instructions)	1c	
	i Total (add lines 1a, b, and c)	1 d	0.
	Reduction claimed for blockage or other factors reported on lines 1a and 1c		
	(attach detailed explanation) . 1e		
2	Acquisition indebtedness applicable to line 1 assets	│ 2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	0.
6	Minimum investment return. Enter 5% of line 5.	6	0.
	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private op-	erating fou	ndations
	and certain foreign organizations check here ► and do not complete this	oart.)	
1	Minimum investment return from Part X, line 6	1	
28	Tax on investment income for 2009 from Part VI, line 5		
ŀ	Income tax for 2009. (This does not include the tax from Part VI.)		
(: Add lines 2a and 2b	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	
6	Deduction from distributable amount (see instructions)	6	
	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	0.
Pa	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes: Expenses, contributions, gifts, etc — total from Part I, column (d), line 26	1 a	41,203.
ŀ	Program-related investments – total from Part IX-B	1 b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the: Suitability test (prior IRS approval required)	3a	
	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	41,203.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	41,203.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whe qualifies for the section 4940(e) reduction of tax in those years.	ther the found	lation
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Par XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI, line 7				0.
2 Undistributed income, if any, as of the end of 2009:				0.
a Enter amount for 2008 only			0.	
b Total for prior years: 20, 20, 20		0.		
3 Excess distributions carryover, if any, to 2009				
a From 2004190,540.				
b From 2005 128, 285.				
c From 2006 187, 760.				
d From 2007 106, 334.				
e From 2008 121, 920.	724 020			
f Total of lines 3a through e	734,839.			
4 Qualifying distributions for 2009 from Part XII, line 4: ► \$ 41,203.				
a Applied to 2008, but not more than line 2a			0.	
••			0.	
b Applied to undistributed income of prior years (Election required – see instructions)		0.		
 Treated as distributions out of corpus (Election required — see instructions) 	0.			
d Applied to 2009 distributable amount				0.
e Remaining amount distributed out of corpus	41,203.			
5 Excess distributions carryover applied to 2009	0.			0.
(If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as				
indicated below: a Corpus Add lines 3f, 4c, and 4e. Subtract line 5	776,042.			
	770,042.			
b Prior years' undistributed income. Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistribut-				
ed income for which a notice of deficiency has been issued, or on which the section				
4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions .		0.		
e Undistributed income for 2008. Subtract line 4a from				
line 2a. Taxable amount — see instructions .			0.	
f Undistributed income for 2009. Subtract lines				
4d and 5 from line 1. This amount must be				^
distributed in 2010. 7 Amounts treated as distributions out of				0.
corpus to satisfy requirements imposed				
by section 170(b)(1)(F) or 4942(g)(3) (see instructions)	0.			
,				
8 Excess distributions carryover from 2004 not applied on line 5 or line 7 (see instructions)	190,540.			
,				
9 Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a	585,502.			
10 Analysis of line 9:				
a Excess from 2005 128, 285.				
b Excess from 2006 187,760.				
c Excess from 2007 106, 334.				
d Excess from 2008 121, 920.				
e Excess from 2009 41, 203.				

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Part XIV Private Operating Foundati					N/A
1a If the foundation has received a ruling or our is effective for 2009, enter the date of the					T 40 40 (4 / E)
b Check box to indicate whether the foundate		rating foundation de		4942(j)(3) or	4942(j)(5)
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed	Tax year (a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total
b 85% of line 2a					
 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)			<u> </u>		
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		, and the second			
Supplementary Information assets at any time during the	(Complete this	part only if the	organization h	nad \$5,000 or mo	re in
Information Regarding Foundation Manag List any managers of the foundation who had close of any tax year (but only if they have None	ers: lave contributed mo contributed more t	ore than 2% of the to than \$5,000). (See s			
b List any managers of the foundation who ca partnership or other entity) of which the None	own 10% or more of foundation has a 10	the stock of a corposite or greater interest	oration (or an equa st.	lly large portion of the	e ownership of
2 Information Regarding Contribution, Gran	t, Gift, Loan, Schola	arship, etc, Program		_	
Check here X if the foundation only n requests for funds. If the foundation make	nakes contributions s gifts, grants, etc, (to preselected char (see instructions) to	itable organizations individuals or orga	and does not accept nizations under other	unsolicited conditions,
a The name, address, and telephone number	r of the nerson to w	hom applications st	hould be addressed		
	. 6, 6,6 ps/36/, (6 %	mom approations of			
b The form in which applications should be s	submitted and inform	nation and materials	s they should includ	e:	
c Any submission deadlines:					
d Any restrictions or limitations on awards, s	uch as by geograph	nical areas, charitab	le fields, kinds of in	stitutions, or other fa	ctors.

3 Grants and Contributions Paid During the Ye	ear or Approved for Futu	re Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	substantial contributor	recipient		
a Paid during the year				
See Statement 4				
			İ	
		ł		
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		l :		
Total			<u> </u>	41,203.
b Approved for future payment		I		41,200.
b Approved for fatare payment				
				<u> </u>
				1
7-1-1	1	L		
Total			► 3b	İ

Part XVI-A Analysis of Income-Producing Activities

	<u> </u>					
Ente	gross amounts unless otherwise indicated.	Unrelat	ed business income	Excluded	by section 512, 513, or 514	
1	Program service revenue:	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	(e) Related or exempt function income (see the instructions)
	•			Code		(See the manuchons)
e E				-		
		 		+		
•						
'	Fees and contracts from government agencies	 		 		
	Membership dues and assessments			 		-
3	Interest on savings and temporary cash investments					
4	Dividends and interest from securities			1 - 1		
-	Net rental income or (loss) from real estate:					
	Debt-financed property	***************************************				
	Not debt-financed property .					
	Net rental income or (loss) from personal property		·			
7	Other investment income					
8	Gain or (loss) from sales of assets other than inventory		•			
9	Net income or (loss) from special events					
10	Gross profit or (loss) from sales of inventory					
11	Other revenue:					
a						
b						
c						
d		1				
е						
	Subtotal Add columns (b), (d), and (e)					
13	Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e)				13	0.
13	Subtotal Add columns (b), (d), and (e)				13	0.
1 3 See	Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e)	lculations.)	shment of Exempt	· t Purpos	-, ·	0.
13 See	Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e). worksheet in the instructions for line 13 to verify ca Relationship of Activities to th	e Accompli			6es	
13 See	Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e). worksheet in the instructions for line 13 to verify ca Relationship of Activities to th	e Accompli			6es	
13 See	Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in the instructions for line 13 to verify ca Relationship of Activities to the e No. Explain below how each activity for which in accomplishment of the foundation's exempt	e Accompli			6es	
13 See	Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e). worksheet in the instructions for line 13 to verify ca Relationship of Activities to th	e Accompli			6es	
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13 See	Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in the instructions for line 13 to verify ca Relationship of Activities to the e No. Explain below how each activity for which in accomplishment of the foundation's exempt	e Accompli			6es	
13 See	Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in the instructions for line 13 to verify ca Relationship of Activities to the e No. Explain below how each activity for which in accomplishment of the foundation's exempt	e Accompli			6es	
13 See	Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in the instructions for line 13 to verify ca Relationship of Activities to the e No. Explain below how each activity for which in accomplishment of the foundation's exempt	e Accompli			6es	
13 See	Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in the instructions for line 13 to verify ca Relationship of Activities to the e No. Explain below how each activity for which in accomplishment of the foundation's exempt	e Accompli			6es	
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13 See	Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in the instructions for line 13 to verify ca Relationship of Activities to the e No. Explain below how each activity for which in accomplishment of the foundation's exempt	e Accompli			6es	

Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

		he organization directly ribed in section 501(c) o							Yes No
	relati	ing to political organizat	ions?		o) organiza	1110/13/ 01 111 300	,0011 027,		
	a Tran:	sfers from the reporting	foundation to a	noncharitable exempt	organizatio	on of:			
	(1)	Cash .						1a (1)	X
	(2)	Other assets .						1a (2)	Х
	b Othe	r transactions:							
	(1) 5	Sales of assets to a non	icharitable exemp	ot organization			•	1 b (1)	X
	(2) F	Purchases of assets fror	m a noncharitable	e exempt organization	ı			1b (2)	X
	(3) F	Rental of facilities, equip	oment, or other a	ssets.				1b (3)	Х
	(4) F	Reimbursement arrange	ments					1b (4)	X
	(5) L	oans or loan guarantee	es					1 b (5)	X
	(6) F	Performance of services	or membership	or fundraising solicita	tions			1b (6)	X
	c Shar	ing of facilities, equipme	ent, mailing lists,	other assets, or paid	employees	i.		1c	<u> </u>
(z	the q	e answer to any of the a goods, other assets, or s transaction or sharing at (b) Amount involved	services given by rrangement, sho	the reporting foundat	tion. If the f	oundation rece goods, other as	ived less than fair m	arket value in eived.	
	/A	(0)	(o) manio or y	one in a second of the second		(in or transferor and transaction	of and onering arrain	gomonto
			_	-					
						-		-	
									•
									
				,					
							· · · · · · · · · · · · · · · · · · ·		
				· · ·		· · ·			
						•			
						* "			
	descr	e foundation directly or i ribed in section 501(c) o es,' complete the following	of the Code (othe	d with, or related to, or than section 501(c)(one or more 3)) or in sec	e tax-exempt or ction 527?	ganizations	Yes	XNo
		(a) Name of organizati	on	(b) Type of org	anization		(c) Description	of relationship	
N,	/A								
_									
		·· · · · · · · · · · · · · · · · · · ·							
	Under pena complete	atties of perjury, I declare that I ha Declaration of preparer (other	than tax beyon or fiduc	i, including accompanying schi ary) is based on all informat	edules and state ion of which pr	ements, and to the be reparer has any kno	est of my knowledge and belie owledge	ef, it is true, correct, an	d
s	>		(19-8-15	> > You	J/¥€€	
G N	Sign	ature of officer or trustee		11		Date	Title	- -	
.	Paid	Preparer's signature	al X	- 11/		Date 6/17/10	Check if self-	Preparer's Identifyii (See Signature in t	he instrs)
Ĕ	Pre- parer's	Firm's name (or Kups	tas & Kupsi	as TAC		1 0/11/10		<u> 171-42-23</u> -2284992	<u> </u>
	Use		-F Forest I	E _ R H			EIN ► 52	-4404774	
İ	Only			21401			Phone >	(410) 268-	-5808
BA	ıA						Phone no ►)-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

Hame of the organization		Employer Identification number
Jacob E. Teitelbaum Fami.	ly Foundation	52-2139345
Organization type (check one):		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organizati	ion
	4947(a)(1) nonexempt charitable trust no	t treated as a private foundation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust tre	ated as a private foundation
	501(c)(3) taxable private foundation	·
Check if your organization is covered by Note: Only a section 501(c)(7), (8), or (1)	the General Rule or a Special Rule . 10) organization can check boxes for both the General	Rule and a Special Rule. See instructions.
General Rule —		
X For an organization filing Form 990, contributor. (Complete Parts I and II	990-EZ, or 990-PF that received, during the year, \$5,0	000 or more (in money or property) from any one
Special Rules —		
509(a)(1)/170(b)(1)(A)(vi) and receiv	filing Form 990 or 990-EZ, that met the 33-1/3% suppored from any one contributor, during the year, a contribute 1h or (ii) Form 990-EZ, line 1. Complete Parts I and	bution of the greater of (1) \$5,000 or (2) 2% of the
For a section 501(c)(7), (8), or (10) or aggregate contributions of more that prevention of cruelty to children or a	organization filing Form 990 or 990-EZ, that received fi n \$1,000 for use <i>exclusively</i> for religious, charitable, s animals. Complete Parts I, II, and III.	rom any one contributor, during the year, clentific, literary, or educational purposes, or the
contributions for use exclusively for this box is checked, enter here the t	organization filing Form 990 or 990-EZ, that received fi religious, charitable, etc, purposes, but these contribu total contributions that were received during the year fo e parts unless the General Rule applies to this organiz	itions did not aggregate to more than \$1,000. If or an <i>exclusively</i> religious, charitable, etc.
religious, charitable, etc, contribution	ns of \$5,000 or more during the year.	► \$
990-PF) but it must answer 'No' on Part	rered by the General Rule and/or the Special Rules do TV, line 2 of their Form 990, or check the box on line l the filing requirements of Schedule B (Form 990, 990-E	H of its Form 990-EZ, or on line 2 of its Form
BAA For Privacy Act and Paperwork R for Form 990, 990EZ, or 990-PF.	eduction Act Notice, see the Instructions	Schedule B (Form 990, 990-EZ, or 990-PF) (2009

	•		
	B (Form 990, 990-EZ, or 990-PF) (2009)		of 1 of Part I
Name of orga		' -	ridentification number
	E. Teitelbaum Family Foundation		139345
Patt	Contributors (see instructions.)		
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
	Enzymatic Therapy 825 Challenger Drive Green Bay, WI 54311	\$186,363.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
		-	
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution

Person Payroll Noncash

(Complete Part II if there is a noncash contribution.)

	TOTAL TOTAL TANDETY TOURISMENT OF THE TOURISMENT	100 010	0.10
Part II	Noncash Property (see instructions)		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
· - · · _ ·	N/A		
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		-	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		I.C.	i e

BAA

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

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

(e)

Relationship of transferor to transferee

BAA

009	Federal Statements	Page
lient 2	Jacob E. Teitelbaum Family Foundation	52-213934
Statement 1 Form 990-PF, Part I, Line 16b Accounting Fees		03:40F
	(a) (b) Net (c) Expenses Investment Adjust per Books Income Net Inc \$ 650. Total \$ 650. \$ 0. \$	ed Charitable ome Purposes 0. \$ 0.
Statement 2 Form 990-PF, Part I, Line 18 Taxes		
Property Tax	(a) (b) Net (c) Expenses Investment Adjust per Books Income Net Inc \$ 50. \$ 50. \$ 0.	ed Charitable Purposes 0. \$ 0.
Statement 3 Form 990-PF, Part I, Line 23 Other Expenses	(a) (b) Net (c Expenses Investment Adjust) (d)
	per Books Income Net Inc	ded Charitable
Conference/Research Center	<u>per Books</u> <u>Income</u> <u>Net Inc</u> Development	ed Charitable
Conference/Research Center Contract Labor Fibromyalgia/CFS Education Job Training Grant Office Expense	<u>per Books</u> <u>Income</u> <u>Net Inc</u> Development \$ 63,165. 23,162.	ed Charitable
Contract Labor Fibromyalgia/CFS Education Job Training Grant	<u>per Books</u> <u>Income</u> <u>Net Inc</u> Development \$ 63,165. 23,162. 57,604. 2,500. 482.	ced Charitable ome Purposes
Contract Labor Fibromyalgia/CFS Education Job Training Grant Office Expense Statement 4 Form 990-PF, Part XV, Line 3a Recipient Paid During the Year		Ced Charitable Purposes O. \$ 0.
Contract Labor Fibromyalgia/CFS Education Job Training Grant Office Expense Statement 4 Form 990-PF, Part XV, Line 3a		Ced Charitable Purposes O. \$ 0.

2009	Federal State	ements		Page 2
Client 2	Jacob E. Teitelbaum Fa	mily Founda	ation	52-2139345
6/17/10 Statement 4 (continued) Form 990-PF, Part XV, Line 3a Recipient Paid During the Year				03:40PM
Name and Address	Donee <u>Relationship</u>	Found- ation Status	Purpose of Grant	Amount
SEVA Foundation 1786 5th Street Berkley, CA 94710	None		Refugee Medical Aid	\$ 1,786.
International Myopain Society P.O. Box 690402 San Antonio, TX	None		Medical Education	150.
Native American Toy Fund 9 Durrell Mountain Road Belmont, NH 63220	None		Childrens Aid	180.
ABJDS 1125 Spa Road Annapolis, MD 21403	None		Education	1,000.
International Rescue Committee P.O. Box 5058 Hagerstown, MD 21741	None		Refugee Relief	3,595.
Yeshiva Farm Settlement Pines Bridge Rd RR4 Mt Kisco, NY 10549,	None		Religious Education	1,040.
Intl Campaign For Tibet 1825 Jefferson Pl Washington, DC 20036	None		Education	935.
Families in Need Program Various	None		Relief Service	18,065.
Institute for Natural Healing Elkton, VA	None		Medical Research	9,500.
AHMA 12101 Menaul Blvd NE Albuquerque, NM	None		Medical Research	335.
Jewish National Fund PO Box 800 Rockville Center, NY 1157	None 1		Religious	54.
Hanawaena High School Kona, HI 96790	None		Education	150.
Vitamin Angels PO Box 42029 Santa Barbara, CA 93140	None		Nutrition for Children	1,470.

009	Federal Stat	ements		Page
ent 2	Jacob E. Teitelbaum Fa	mily Founda	ation	52-21393
Statement 4 (continued)				03:40
Statement 4 (continued) Form 990-PF, Part XV, Line 3a Recipient Paid During the Year				
Name and Address	Donee <u>Relationship</u>	Found- ation Status	Purpose of Grant	Amount
ABIHM 614 Daniel Road Wenchieawa, WA 98802	None		Medical Research	\$ 50
Kona Music Society PO Box 390478 Keahoe, HI 93739	None		Promotion of musical excellence	75
Hawaiian Island Pride , HI	None			10
World Wildlife Fund 1250 24th Street, NW Washington, DC 20090	None			5
Endometriosis Assn 8585 & 6th Place Wilwaukee, WI 55223				10
Leukemia & Lymphoma Assn PO Box 9026 Pittsfield, MA 20750				5
Pandora 255 Alahambra Circle #715 Coral Gables, FL 33134				15
			Total	\$ 41,20