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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 c	alenda	r year 2009, or tax year beginning , a	nd ending				
G C	heck all	I that apply Initial return Initial ret	urn of a former public	charity	Ĺ	Final return	
		Amended return Addr	ress change	Name	change		
Hee	the IRS	Name of foundation			A Empl	oyer identification num	ber
	ine iro ibel.	THE BRZEZINSKI FAMILY FOUN	DATION		52-	-6955808	_
		C/O PRICHIEW PRIETINGET			B Telep	hone number (see page 1	0 of the instructions)
	erwise, rint	Number and street (or P O box number if mail is not delivered	to street address)	Room/suite		2-833-2408	
•	type.	1800 K STREET NW		00		mption application is pend	fing check here
	specific					reign organizations, check	
	uctions	Only of to mill state, and any order	20006			5 5	_
						reign organizations meeti % test, check here and at	- 1 1
		pe of organization X Section 501(c)(3) exempt private					
<u> </u>	ection 4		e private foundation			ate foundation status was on 507(b)(1)(A), check her	⊾
l Fa	ır marke	et value of all assets at end J Accounting method	X Cash Acc	rual	Secur	in 507 (b)(1)(A), Gleck her	• •
of	year (fr	om Part II, col (c), Uther (specify)				foundation is in a 60-mon	
lin	e 16) 🕨	\$ 136,059 (Part I, column (d) must	be on cash basis)		under	r section 507(b)(1)(B), che	ck nere
Pa	rt I	Analysis of Revenue and Expenses (The	(a) Revenue and	(h) Net		(a) Advisted and	(d) Disbursements
		total of amounts in columns (b), (c), and (d) may not necessarily equal	expenses per books	(b) Net inv		(c) Adjusted net income	for chantable purposes
		the amounts in column (a) (see page 11 of the instructions))					(cash basis only)
	1 (Contributions, gifts, grants, etc , received (attach schedule)	13,646				
		Check ► I if the foundation is not required to attach Sch B					
		Interest on savings and temporary cash investments	122		122	122	
		Dividends and interest from securities				-	
4.		Gross rents			-		
			-			***************************************	
e		Net rental income or (loss)					
eu		Net gain or (loss) from sale of assets not on line 10					
Revenue		Gross sales price for all assets on line 6a			0		
		Capital gain net income (from Part IV, line 2)	· · · · · · · · · · · · · · · · · · ·			0	
		Net short-term capital gain					
	9	Income modifications				······································	
	10a	Gross sales less returns & allowances					
	b	Less Cost of goods sold					
	С	Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule)					
	12	Total. Add lines 1 through 11	13,768		122	122	
_ (0	13	Compensation of officers, directors, trustees, etc					
benses	14	Other employee salaries and wages				.,	
ë	15	Pension plans, employee benefits					
	16a	Legal fees (attach schedule)					
Operating and/Administrative Ex	b	Accounting fees (attach schedule) Stmt 1	915				
ive	c	Other professional fees (attach schedule)					
at	17	Interest					
SE	18	Taxes (attach schedule) (see page 14 of the instructions) Stmt 2	19		19	19	
Ē	19	Depreciation (attach schedule) and depletion					
Ę	20	Occupancy RECEIVE	D		-		
Ą	21	Travel, conferences, and meetings	- O				
	22	Printing and publications	IOI				
æ≥	23	Printing and publications Other expenses (att. sch.) APR 2 2 2 ()10 9 	<u> </u>	_		
. <u>5</u> 2	24	Total operating and administrative expenses:)10 	<u> </u>			
ie i			JT 934	1	19	19	l o
e e	25		13,595				13,595
ŏ	25	Contributions, gifts, grants paid	14,529		19	19	
)26	Total expenses and disbursements. Add lines 24 and 25	14,323	 			-5,555
5		Subtract line 26 from line 12	-761				
		Excess of revenue over expenses and disbursements	- / 61	 	103		
	L	Net investment income (if negative, enter -0-)	ļ	 	103	103	
	С	Adjusted net income (if negative, enter -0-)		<u>i</u>		1 103	- 000 DE

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	Part II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End o	of year
	t dirt ii	should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing	136,820	136,059	136,059
	2	Savings and temporary cash investments			
	3	Accounts receivable ▶			
		Less allowance for doubtful accounts ▶			
	4	Pledges receivable ▶			
	j	Less allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
	ł	disqualified persons (attach schedule) (see page 16 of the	1		
		instructions)			
	7	Other notes and loans receivable (att. schedule)			
		Less allowance for doubtful accounts ▶			
ţ	8	Inventories for sale or use			
ssets	9	Prepaid expenses and deferred charges			
AS	10a	Investments—U S and state government obligations (attach schedule)			
	l .	Investments—corporate stock (attach schedule)			
		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)			
		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)	136,820	136,059	136,059
_	17	Accounts payable and accrued expenses			
ιħ		Grants payable			_
ě	19	Deferred revenue		-	*
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
ē	21	Mortgages and other notes payable (attach schedule)			
_	22	Other liabilities (describe ▶)			
_	23	Total liabilities (add lines 17 through 22)	0	0	
		Foundations that follow SFAS 117, check here ▶ X			
es		and complete lines 24 through 26 and lines 30 and 31.		ı	
Ç	24	Unrestricted	136,820	136,059	
<u> </u>	25	Temporarily restricted	ļ <u></u>		
m	26	Permanently restricted			
20		Foundations that do not follow SFAS 117, check here ▶			
Net Assets or Fund Balan		and complete lines 27 through 31.			
ទ	27	Capital stock, trust principal, or current funds			
ş	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
Se	29	Retained earnings, accumulated income, endowment, or other funds			
ď	30	Total net assets or fund balances (see page 17 of the			
ë		instructions)	136,820	136,059	
~	31	Total liabilities and net assets/fund balances (see page 17			
_		of the instructions)	136,820	136,059	
-	Part II				
1		net assets or fund balances at beginning of year—Part II, column (a), line 30 (mus	st agree with	}	
		f-year figure reported on prior year's return)		. 1	136,820
		amount from Part I, line 27a		2	
		Increases not included in line 2 (itemize) ▶		3	400 0==
		nes 1, 2, and 3		4	136,059
		rases not included in line 2 (itemize)	-) l 20	5	136.059
- 6	LOTAL	net assets or fund balances at end of year (line 4 minus line 5)—Part II. column (b	or tine 30	I R I	136.U59

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_		ZINSKI FAMILY FOUND			52-6955808		 -	Page	3
	(a) List and describe to	he kind(s) of property sold (e.g., real estate, use, or common stock, 200 shs MLC Co.)	iit iiicoiiie		(b) How acquired P—Purchase		e acquired day, yr)	(d) Date sold	_
18		dise, of confinion stock, 200 shis livide Co)			D—Donation	(110 ,	uay, yi)	(mo , day, yr)	_
ŀ									-
	>								_
_	<u>!</u>	<u>. </u>							_
e	·							L	_
	(e) Gross sales price	(f) Depreciation allowed (or allowable)			other basis nse of sale			or (loss)) minus (g)	
a	1								_
_ <u>t</u>		-							_
9									_
									_
e		ain in column (h) and owned by the for	indation on 1	2/31/6	9			#A	_
	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k)	Exces	s of col (i) (j), if any		(k), but not	(h) gain minus less than -0-) or om col (h))	
									-
b									
									_
d	1								_
e			 						_
	Capital gain net income or (net capi	If (loss), enter -U- in F	art I, line 7			2			
3		as defined in sections 1222(5) and (6)		_					
	*	olumn (c) (see pages 13 and 17 of the	instructions)						
	If (loss), enter -0- in Part I, line 8 Part V Qualification Und	er Section 4940(e) for Reduce	d Tay on	Not I	nvestment Inco	3 ma			-
		undations subject to the section 4940(1110			-
	•	•	a) tax on not		ment meente /				
	section 4940(d)(2) applies, leave this				_	_			
		n 4942 tax on the distributable amount		the b	pase period? 📙 Ye	es 🗶 n	1 0		
If "	Yes," the foundation does not qualify	under section 4940(e) Do not comple	te this part						
1		ch column for each year; see page 18 o	of the instruct	ions b	efore making any en	tries			
	(a) Base penod years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	. Net	value	(c) of noncharitable-use ass	ets	Distr (col (b) d	(d) abution ratio ivided by col (c))	
	2008		531		125,0			0.27473	
	2007		100		127,0			0.07164	-
	2006		800		116,			0.092995	
	2005		171		<u>104,</u> ;			0.126302 0.14453	
	2004	14,	146			5/5		0.14455.	_
	Total of line 1, column (d)		- 0 h - 5 h			_2	!	0.71020	<u>5</u>
3	•	rear base period—divide the total on lir	ie 2 by 5, or b	y tne		.	,	0.142043	1
	number of years the foundation has	been in existence if less than 5 years				- -	<u> </u>	0.14204.	_
4	Enter the net value of noncharitable	-use assets for 2009 from Part X, line	5			4	<u> </u>	135,352	2
5	Multiply line 4 by line 3						<u>;</u>	19,22	6
6	Enter 1% of net investment income	(1% of Part I, line 27b)				_6			1
7	Add lines 5 and 6					7	,	19,22	7
8	Enter qualifying distributions from P	art XII. line 4				[3	13,59	

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

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	rt 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 ▶ ☐ 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			_2
	here ▶ 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-)			0
3	Add lines 1 and 2			2
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			0 2 0 2
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-			2
6	Credits/Payments			
а	2009 estimated tax payments and 2008 overpayment credited to 2009 6a			
b	Exempt foreign organizations—tax withheld at source 6b			
С	Tax paid with application for extension of time to file (Form 8868) 6c			
d	Backup withholding erroneously withheld 6d 6d			
7	Total credits and payments Add lines 6a through 6d			
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			2
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
11	Enter the amount of line 10 to be Credited to 2010 estimated tax ▶ Refunded ▶ 11			
*********	rt VII-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No_
	participate or intervene in any political campaign?	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19			
	of the instructions for definition)?	1b		<u> </u>
	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			
С	Did the foundation file Form 1120-POL for this year?	1c		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 ▶ \$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
	on foundation managers > \$			37
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		<u>X</u>
	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	.		x
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		$\frac{\mathbf{x}}{\mathbf{x}}$
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year? If "Yes " has it filed a tay return on Form 990-T for this year? N/A	4a		
b	it les, has it lied a tax feturi on t of it of the year	4b		X
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	1		
_	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	6	x	
	conflict with the state law remain in the governing instrument?	7	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			
8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the			
_	instructions) VA			
ь	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 See Stmt 3	8b		x
_	(or designate) or each etate as required by a surface as the surfa	55		
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	9		x
40	27)? If "Yes," complete Part XIV Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			
10		10		х
	names and addresses	orm 99	0-PF	

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P	art VII-B Statements Regarding Activities for Which Form	<u>4720 May Be F</u>	Required	(co	<u>ntinue</u>	<u>ed)</u>		,		,
5a	During the year did the foundation pay or incur any amount to			_						
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4	4945(e))?		\sqcup	Yes	X	No			
	(2) Influence the outcome of any specific public election (see section 4955), or	to carry on,		_						
	directly or indirectly, any voter registration drive?			Ц	Yes	X	No			
	(3) Provide a grant to an individual for travel, study, or other similar purposes?			\sqcup	Yes	X	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 inst	ructions)		Ш	Yes	X	No			
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or	r educational		_		_				
	purposes, or for the prevention of cruelty to children or animals?				Yes	X	No			
b	If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under	er the exceptions d	escribed in							
	Regulations section 53 4945 or in a current notice regarding disaster assistance	(see page 22 of the	ne instruction	ıs)?			A\I	5b		ļ
	Organizations relying on a current notice regarding disaster assistance check he	ere			▶	Ш				
C	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from	om the tax				_				
	because it maintained expenditure responsibility for the grant?		N/A	Ш	Yes	Ш	No			
	If "Yes," attach the statement required by Regulations section 53 4945-5(d)									
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pa	ay premiums		_		_				
	on a personal benefit contract?			\sqcup	Yes	X	No			
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a per	rsonal benefit conti	ract?					6b		X
	If "Yes" to 6b, file Form 8870			_		_				
7a	At any time during the tax year, was the foundation a party to a prohibited tax sh	elter transaction?		Ш	Yes	X	No			
b	If yes, did the foundation receive any proceeds or have any net income attributal	ble to the transacti	on?			<u>r</u>	I/A	7b		
P	art VIII Information About Officers, Directors, Trustees, Fo	undation Man	agers, Hiç	ghl	y Paid	l En	ıploy	ees,		
	and Contractors									
1 <u>l</u>	ist all officers, directors, trustees, foundation managers and their compensa	tion (see page 22	of the instru	ectio	ons).					
		(b) Title, and average	(c) Compens	ation			utions to	(a) F::		
	(a) Name and address	hours per week devoted to position	(If not paid, (-0-)	enter	plar	is and	benefit deferred		pense ao r allowar	
		dovoted to position	· · · · ·		cc	ompens	ation			
Se	e Statement 4	ì			1					
		ļ			4			<u> </u>		
			:							
								<u> </u>		
		ł			1			l		
								<u> </u>		
		1	}		1			1		
		<u> </u>								
2	Compensation of five highest-paid employees (other than those included on	line 1—see page	23 of the in:	stru	ctions)).				
	If none, enter "NONE."			-					-	
		(b) Title, and average					utions to benefit	(e) Fx	pense ac	count
	(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compens	ation	plan	is and o	deferred		r allowar	
						mpens	ation			
NC	NE									
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ot a	I number of other employees paid over \$50,000	<u> </u>	L						$\overline{}$	
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Part VIII	Information About Officers, Directors, Trustees, Foundat and Contractors (continued)	tion Managers, Highly Paid Emp	oloyees,
3 Five highe	est-paid independent contractors for professional services (see page 23 c	of the instructions). If none, enter "NON	E."
	(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		
	on's four largest direct charitable activities during the tax year. Include relevant statistical in differences convened, research papers produced, etc.	nformation such as the number of	Expenses
1 N/A			
2			-
3			
4			<u> </u>
Part IX-B	Summary of Program-Related Investments (see page 2	4 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			
. •	n-related investments. See page 24 of the instructions		
3			
Total. Add lines	1 through 3	•	

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P	art X Minimum Investment Return (All domestic foundations must complete this part. For	eign f	
	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		
а	Average monthly fair market value of securities	1a	0
b	Average of monthly cash balances	1b	137,413
С	Fair market value of all other assets (see page 24 of the instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	137,413
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	137,413
4	Cash deemed held for charitable activities Enter 1½ % of line 3 (for greater amount, see page 25 of		
	the instructions)	4	2,061
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	135,352
6	Minimum investment return. Enter 5% of line 5	6	6,768
	art XI Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) private of	peratir	
	foundations and certain foreign organizations check here	•	
1	Minimum investment return from Part X, line 6	1	6,768
2a	Tax on investment income for 2009 from Part VI, line 5		
b	Income tax for 2009 (This does not include the tax from Part VI)	1	
С	Add lines 2a and 2b	2c	2
3	Distributable amount before adjustments Subtract line 2c from line 1	3	<u>2</u> 6,766
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	6,766
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	6,766
P	art XII Qualifying Distributions (see page 25 of the instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	13,595
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		
а	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	13,595
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	13,595
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the found	ation	
	qualifies for the section 4940(e) reduction of tax in those years		

Pa	rt XIV Private Operating For	undations (see p	age 27 of the ins	tructions and Part	VII-A, question 9)		
1a	a If the foundation has received a ruling or determination letter that it is a private operating							
	foundation, and the ruling is effective for 2009, enter the date of the ruling							
b	Check box to indicate whether the found			ribed in section 4	942(j)(3) or 494	l2(j)(5)		
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years				
	income from Part I or the minimum	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total		
	investment return from Part X for							
	each year listed				ļ			
b	85% of line 2a		 					
c	Qualifying distributions from Part XII,			<u></u>				
	line 4 for each year listed							
d	Amounts included in line 2c not used directly	-		 				
•	for active conduct of exempt activities					1		
е	Qualifying distributions made directly			 		- -		
C	for active conduct of exempt activities							
	Subtract line 2d from line 2c							
•			 	 		 		
3	Complete 3a, b, or c for the							
_	alternative test relied upon							
а	"Assets" alternative test—enter							
	(1) Value of all assets			 	<u> </u>	 		
	(2) Value of assets qualifying under							
	section 4942(j)(3)(B)(i)			 				
b	"Endowment" alternative test—enter 2/3					1		
	of minimum investment return shown in							
	Part X, line 6 for each year listed			-				
С	"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							
Ω-	(4) Gross investment income rt XV Supplementary Inform	action (Complet	o this part only if	the foundation h	ad \$5 000 or mor	o in accete et		
Fa	It XV Supplementary Inform any time during the ye				au \$5,000 or mor	e III assets at		
1	Information Regarding Foundation Mai		o or the manach	0113.7				
' a	List any managers of the foundation who	-	re than 2% of the total	contributions received	by the foundation			
	before the close of any tax year (but only				-			
	ZBIGNIEW BRZEZINSKI	ii tiicy nave contribu	ica more man 40,000)	(000 000000 007 (0)(2	, ,			
b	List any managers of the foundation who	own 10% or more of	the stock of a corpora	tion (or an equally large	portion of the			
_	ownership of a partnership or other entity				, postario de ano			
	N/A	, 0, 11	and the control of great					
2	Information Regarding Contribution, G	rant. Gift. Loan. Sch	olarship, etc., Progra	ms:				
	F-7 *				loes not accept	•		
	Check here ► ☐ 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, cor							
a	The name, address, and telephone number			uld be addressed				
_	ZBIGNIEW BRZEZINSKI							
	1800 K STREET, NW WA							
b	The form in which applications should be			ney should include	 _			
	WRITTEN REQUEST			,				
С	Any submission deadlines	. –						
	NONE							
d	Any restrictions or limitations on awards,	such as by geograph	ical areas, charitable t	fields, kinds of institutio	ns, or other factors			
	NONE							
						Form 990-PF (2009)		

▶ 3b

Total

	1003) IIII DINDDDINONI IIIII				<u> </u>	1 490 12
	Analysis of Income-Producing A			1		
Enter gross am	ounts unless otherwise indicated	Unrelated	business income	Excluded by	section 512, 513, or 514	(e) Related or exempt
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See page 28 of
1 Program se	ervice revenue	+		+ +		the instructions)
				+ +		
				 -	_	
				 		
f						
g Fees a	nd contracts from government agencies					
_	p dues and assessments					
3 Interest on	savings and temporary cash investments			14	122	
4 Dividends a	and interest from securities					
5 Net rental ii	ncome or (loss) from real estate					
	nanced property					
	ot-financed property	 				
	ncome or (loss) from personal property			- -		
7 Other inves				 -		
· · · · · · · · · · · · · · · · · · ·	ss) from sales of assets other than inventory	-		+ +-		
	e or (loss) from special events	 			···	
	t or (loss) from sales of inventory		··			
	nue a	_				
е						
	dd columns (b), (d), and (e)			0	122	0
	line 12, columns (b), (d), and (e)	_			13	122
(See workshee	t in line 13 instructions on page 28 to verify calcula	ations)				
Part XVI-E						
Line No. ▼	Explain below how each activity for which incor accomplishment of the foundation's exempt pu instructions)	me is reported in co irposes (other than	olumn (e) of Part XV by providing funds f	I-A contribut for such purp	ed importantly to the loses) (See page 29	of the
N/A	ilistructions)					
N/A						
					**	***-
						
						
-						
						
						-
						
		· · ·				
						
	 					
	- 1931.					
			_			

Date

20877-2609

04/12/10

Check if

self-employed ▶

Form **990-PF** (2009)

Preparer's identifying

EIN ► 52-1373858

Phone no 301-948-9825

number (see Signature on

page 30 of the instructions)

577-54-2513

Sign Here

Paid Preparer's Use Only

Preparer's

signature

Firm's name (or yours if

self-employed), address, and ZIP code

Daniel G. Falk, CPA

DeLeon & Stang, CPA's

Gaithersburg, MD

100 Lakeforest Blvd Ste 650

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

THE BRZEZINSKI FAMILY FOUNDATION

C/O ZBIGNIEW BRZEZINSKI

Employer identification number

52-6955808

Organization type (check one)							
Filers	Filers of: Section:						
Form 9	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 9	90-PF	X 501(c)(3) exempt private foundation					
		4947(a)(1) nonexempt charitable trust treated as a private foundation					
		501(c)(3) taxable private foundation					
	····						
	Only a section 501(c)(7),	overed by the General Rule or a Special Rule . (8), or (10) organization can check boxes for both the General Rule and a Special Rule See					
Genera	al Rule						
X	-	ng Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or contributor. Complete Parts I and II					
Specia	l Rules						
	sections 509(a)(1) and	organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1 Complete Parts I and					
	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.						
990-EZ 990-EZ	aution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 90-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-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, r 990-PF)						

Schedule B (Form 990, 990-EZ, or 990-PF) (2009) of 1 of Part I Page 1 **Employer identification number** Name of organization 52-6955808 THE BRZEZINSKI FAMILY FOUNDATION Part I Contributors (see instructions) (a) (c) No. Name, address, and ZIP + 4 Aggregate contributions Type of contribution 1 ZBIGNIEW BRZEZINSKI Person 1061 SPRING HILL RD Payroll 10,000 \$ Noncash VA 22102 **MCLEAN** (Complete Part II if there is a noncash contribution) (b) (c) (d) (a) No. Name, address, and ZIP + 4 Aggregate contributions Type of contribution Person Payroll \$ Noncash (Complete Part II if there is a noncash contribution) (c) (a) (b) (d) Type of contribution Aggregate contributions No. Name, address, and ZIP + 4 Person Payroll Noncash (Complete Part II if there is a noncash contribution) (a) (b) (c) Name, address, and ZIP + 4 Aggregate contributions Type of contribution No. Person **Payroll** \$ Noncash (Complete Part II if there is a noncash contribution) (c) (a) (b) (d) Aggregate contributions Type of contribution No. Name, address, and ZIP + 4 Person Payroll \$ Noncash (Complete Part II if there is a noncash contribution) (c) (d) (a) (b) Name, address, and ZIP + 4 Aggregate contributions Type of contribution No. Person Payroll \$ Noncash (Complete Part II if there is a noncash contribution)

BRZE5808 THE BRZEZINSKI FAMILY FOUNDATION 52-6955808 FYE: 12/31/2009

4/12/2010 10:59 AM

Fees	
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- Account	
16h	
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Part	
190.PF	
Form	֡
Statement 1	

Charitable Purpose	w w		Charitable Purpose
Adjusted Net	w w	50	Adjusted Net
Net Investment	w w	Statement 2 - Form 990-PF, Part I, Line 18 - Taxes	Net Investment
Total	\$ 915 \$ 915	Statement 2 - Form 990	Total
Description	DELEON AND STANG, CPA'S Total		Description

FORM 990-PF Total BRZE5808 THE BRZEZINSKI FAMILY FOUNDATION

Federal Statements

FYE: 12/31/2009

52-6955808

Statement 3 - Form 990-PF, Part VII-A, Line 8b - Not Filing with Attorney General Explanation

Description

PER VIRGINIA DEPARTMENT OF AGRICULTURE AND CONSUMER SERVICES, RETURN NOT REQUIRED TO BE FILED UNLESS FORM 990-T IS REQUIRED TO BE FILED.

4/12/2010 10:59 AM

BRZE5808 THE BRZEZINSKI FAMILY FOUNDATION	4/12/2010 10:59
52-6955808 Federal Statements	
FYE: 12/31/2009	

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Name and Address	Title	Average Hours	Compensation	Benefits	Expenses
ZBIGNIEW BRZEZINSKI 1061 SPRING HILL RD MCLEAN VA 22102	CO-TRUSTEE	0.00	0	0	0
EMILIE BRZEZINSKI 1061 SPRING HILL RD MCLEAN VA 22102	CO-TRUSTEE	00.00	0	0	0
MARK BRZEZINSKI 1061 SPRING HILL RD MCLEAN VA 22102	CO-TRUSTEE	0.00	0	0	0
IAN BRZEZINSKI 1061 SPRING HILL RD MCLEAN VA 22102	CO-TRUSTEE	0.00	0	0	0
MIKA BRZEZINSKI 1061 SPRING HILL RD MCLEAN VA 22102	CO-TRUSTEE	00.00	0	0	0

BRZE5808 THE BRZEZINSKI FAMILY FOUNDATION
52-6955808 Federal Statements

4/12/2010 10:59 AM

FYE: 12/31/2009

Name of Manager	Amount
ZBIGNIEW BRZEZINSKI	\$
Total	\$0
Form 990-PF, Part XV, Line 2b - Applicat	tion Format and Required Content
Description	
RITTEN REQUEST	
Form 990-PF, Part XV, Line 2c	- Submission Deadlines
Description	
ONE	
Form 990-PF, Part XV, Line 2d - Awa	ard Restrictions or Limitations
Description	
ONE	

BRZE5808 THE BRZEZINSKI FAMILY FOUNDATION

Federal Statements

FYE: 12/31/2009

52-6955808

Statement 5 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the

1,000 1,000 1,000 200 200 1,000 1,000 100 200 100 100 200 1,000 45 50 500 500 1,000 Amount SUPPORT DESIGNATED PURPOSE Purpose Status EXEMPT #1619 2nd Fl. Dr. Richard Okreglak 650 Pennsylvania Ave, SE Lukes Catholic Church 7001 Georgetown Pike 95 Montgomery Ferry 9th St. North, 606 Cherry Hill Rd 124 Mt. Auburn St Seventh Ave., Relationship Address P.O. Box 681366 2025 O St., N.W Department 6057 St P.O. Box 96100 P.O. Box 96231 Box 1870 Amnesty International USA 5 Penn Plaza New York NY 10001-8901 NONE Box 412 34 Kirkland Desert Island Hospita P.O. Box 8 Bar Harbor ME 04609-9974 NONE P.O. 4001 P.O. 333 0/0 Washington DC 20036-5913 Merrifield VA 22116-9646 Washington DC 20090-6231 Washington DC 20090-6100 Washington DC 20042-6057 Doctors Without Borders Substitution Substitution New York NY 10001-5004 Capital Education Partner Carter Papers LLC Atlanta GA 30309-2710 American Association for Kensington MD 20895 Schaumburg IL 60194 Committee for the Blind Washington DC 20001 Cambridge MA 02138 Arlington VA 22203 Catholic Charities USA National Polish Center Cambridge MA 02138 Polish American Health President & Fellows of American Polish Forum New York NY 10028 Broolyn MD 21225 Emilie Plater Polish McLean VA 22101 Address The Salvation Army Name Smile Train

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BRZE5808 THE BRZEZINSKI FAMILY FOUNDATION 52-6955808 FYE: 12/31/2009

Statement 5 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year (continued)

Name	Address				
Address	Relationship	Status		Purpose	Amount
Williams College Alumni Williamstown PA 22314	75 Park St NONE	EXEMPT	SUPPORT	SUPPORT DESIGNATED PURPOSE	800
	675 Third Ave #3210 NONE	EXEMPT	SUPPORT	SUPPORT DESIGNATED PURPOSE	300
14	1224 Princess St. NONE	EXEMPT	SUPPORT	SUPPORT DESIGNATED PURPOSE	300
Piedmont Environmental P. Warrenton VA 20188-9857	P.O. Box 460	EXEMPT	SUPPORT	SUPPORT DESIGNATED PURPOSE	1,000
Virginia Hunters for the P.O. Box 304 Biq Island VA 24526 NONE	P.O. Box 304 NONE	EXEMPT	SUPPORT	SUPPORT DESIGNATED PURPOSE	1,000
-63	P.O. Box 96325 125 NONE	EXEMPT	SUPPORT	SUPPORT DESIGNATED PURPOSE	1,000
Total					13,595