

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



# 990-PF

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

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0052 2009 Treated as a Private Foundation

Department of the Treasury Internal Revenue Service

For calendar year 2009, or tax year beginning and ending G Check all that apply Initial return of a former public charity Final return Initial return Amended return Address change Name change A Employer identification number Use the IRS Name of foundation PASQUALE AND ROSE PROCACCI FAMILY 65-6435795 label. CHARITABLE FOUNDATION Otherwise, Telephone number (see page 10 of the instructions) 561-393-8875 print Number and street (or P O box number if mail is not delivered to street address) Room/suite or type. 500 S.E. MIZNER BOULEVARD 408A If exemption application is pending, check here See Specific City or town, state, and ZIP code 1. Foreign organizations, check here Instructions. BOCA RATON 2. Foreign organizations meeting the H Check type of organization X Section 501(c)(3) exempt private foundation 85% test, check here and attach computation Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation If private foundation status was terminated under section 507(b)(1)(A), check here J Accounting method X Cash Fair market value of all assets at end of year (from Part II, col (c), Other (specify) If the foundation is in a 60-month termination under section 507(b)(1)(B), check here 442,696 line 16) ▶ \$ (Part I, column (d) must be on cash basis ) Part I Analysis of Revenue and Expenses (The (d) Disbursements (a) Revenue and expenses per (b) Net investment (c) Adjusted net for charitable total of amounts in columns (b), (c), and (d) may not necessarily equal books ıncome purposes the amounts in column (a) (see page 11 of the instructions) ) (cash basis only) 1 Contributions, gifts, grants, etc., received (attach schedule) 2 Check > X if the foundation is **not** required to attach Sch B 3 Interest on savings and temporary cash investments 16,243 16,243 16,243 Dividends and interest from securities Gross rents Net rental income or (loss) Stmt 1 -63,192 Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a 371,106 155 Capital gain net income (from Part IV, line 2) Net short-term capital gain Income modifications Gross sales less returns & allowances Less Cost of goods sold Gross profit or (loss) (attach schedule) 11 Other income (attach schedule) -46,938 16,409 16,254 12 Total. Add lines 1 through 11 13 Compensation of officers, directors, trustees, etc Operating and Administrative Expenses 14 Other employee salaries and wages Pension plans, employee benefits 15 16a Legal fees (attach schedule) Stmt 2 5,080 5,080 Accounting fees (attach schedule) 2,792 Stmt 3 2,792 C Other professional fees (attach schedule) RECEIVED 17 Interest Taxes (attach schedule) (see page 14 of the instructions) Stmt 4 19 19 18 <u>Š</u> 19 Depreciation (attach schedule) and depletion <del>APR 0 1 2010</del> 20 Occupancy 21 Travel, conferences, and meetings OGDEN 22 Printing and publications 23 Other expenses (att sch) 24 Total operating and administrative expenses. 7,891 7,891 Add lines 13 through 23 90,000 90,000 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 97,891 7,891 0 90,000 27 Subtract line 26 from line 12 -144,829 Excess of revenue over expenses and disbursements 8,518 Net investment income (if negative, enter -0-) 16,254 Adjusted net income (if negative, enter -0-)

Form 990-PF (2009)

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

433,662

5 6

5 Decreases not included in line 2 (itemize) ▶

6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30

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

90,000

8 Enter qualifying distributions from Part XII, line 4

Part VI instructions on page 18

	990-PF (2009) PASQUALE AND ROSE PROCACCI FAMILY 65-6435795			F	age 4
	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instruction	tions)			
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				85
	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-)				0
3	Add lines 1 and 2			_	85
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			_	0
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-				85
6	Credits/Payments				
а	2009 estimated tax payments and 2008 overpayment credited to 2009				
b	Exempt foreign organizations—tax withheld at source				
C	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 X if Form 2220 is attached 8				0.5
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed				85
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid				
11 Da	Enter the amount of line 10 to be Credited to 2010 estimated tax ▶ Refunded ▶ 11   Int VII-A Statements Regarding Activities				
<u>га</u> 1а		<del></del>			
10	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	F	4-	Yes	No X
b		-	1a		1
U	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 of the instructions for definition)?		4		х
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials	-	<u>1b</u>		
	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	<u> </u>	10		-
<b>~</b>	(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 > \$				İ
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				1
•	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
b	- · · · · · · · · · · · · · · · · · · ·	/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5		х
	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		İ		i
	By language in the governing instrument, or				
	By state legislation that effectively amends the governing instrument so that no mandatory directions that				
	conflict with the state law remain in the governing instrument?	L	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) ► FL		1		
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	L	8b	Х	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or		Ī		
	4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV on page	1	ļ		
	27)? If "Yes," complete Part XIV	L	9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			1	
	names and addresses		10		<u> </u>

charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2009?

4b

orn	1990-PF (2009) PASQUALE ANI	D ROSE PROCACCI FA	WILY 62-6	435795				Page <b>6</b>
Pa	art VII-B · Statements Regard	ing Activities for Which Fo	rm 4720 May Be R	equired (cor	ntinue	ed)		
5a	During the year did the foundation pay of	r incur any amount to						
	(1) Carry on propaganda, or otherwise	attempt to influence legislation (sect	ion 4945(e))?		Yes	X No	1 1	
	(2) Influence the outcome of any specific	ic public election (see section 4955)	, or to carry on,	_		_	1	
	directly or indirectly, any voter regist	ration drive?			Yes	X No		
	(3) Provide a grant to an individual for t	ravel, study, or other similar purpose	es?		Yes	X No	1	
	(4) Provide a grant to an organization o	ther than a charitable, etc , organiza	tion described in					
	section 509(a)(1), (2), or (3), or sect	ion 4940(d)(2)? (see page 22 of the	instructions)		Yes	X No		
	(5) Provide for any purpose other than i	religious, charitable, scientific, literar	y, or educational	_				
	purposes, or for the prevention of cr	uelty to children or animals?			Yes	X No		
b	If any answer is "Yes" to 5a(1)-(5), did a	ny of the transactions fail to qualify i	under the exceptions des	cribed in				
	Regulations section 53 4945 or in a curr	ent notice regarding disaster assista	ance (see page 22 of the	instructions)?		N/A	5b	
	Organizations relying on a current notice	e regarding disaster assistance chec	k here		<b>•</b>			
С	If the answer is "Yes" to question 5a(4),	does the foundation claim exemptio	n from the tax			_		
	because it maintained expenditure response			N/A 🗌	Yes	☐ No	i i	
	If "Yes," attach the statement required b	y Regulations section 53 4945-5(d)		_		_		
6a	Did the foundation, during the year, rece	· ·	to pay premiums					
	on a personal benefit contract?	, , , , , , , , , , , , , , , , , , , ,			Yes	X No		
ь	Did the foundation, during the year, pay	premiums, directly or indirectly, on a	a personal benefit contra	ct?			6ь	x
	If "Yes" to 6b, file Form 8870	,	•					
7a	At any time during the tax year, was the	foundation a party to a prohibited ta	x shelter transaction?		Yes	X No	1	
	If yes, did the foundation receive any pro-	, , ,		12		N/A	7b	
		fficers, Directors, Trustees			/ Paid	d Employ	ees.	
•	and Contractors	<b>,</b>	,					
1 1	List all officers, directors, trustees, four	ndation managers and their comp	ensation (see page 22	of the instruction	ns).			
				(c) Compensation		Contributions to		
	(a) Name and	address	(b) Title, and average hours per week	(If not paid, enter		nployee benefit ns and deferred		pense account, r allowances
			devoted to position	-0-)		ompensation	Oute	allowalices
RO	OSE PROCACCI	BOCA RATON	TRUSTEE					
	00 SE MIZNER BLVD #408A	FL 33432	1.00	j ,	ol		o	0
	HILIP PROCACCI	BOCA RATON	TRUSTEE				1	
	25 S FEDERAL HWY #400	FL 33432	1.00		٥		اه	0
				<del></del>	1			
2	Compensation of five highest-paid en	polovees (other than those include	ed on line 1—see page	23 of the instru	ctions	).	1	
-	If none, enter "NONE."	iproyoco (otrior triair trioco morato	oc on mio . oco pago		••	,-		
	·		(L) Tills and success		(d)	Contributions to		
	(a) Name and address of each emp	loyee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	` en	ployee benefit		ense account,
			devoted to position	, , ,		ns and deferred ompensation	otnei	rallowances
NC	ONE	·				<u></u>		
	7712							
					1		1	
					İ			
_		·····			+	····	+	<del></del>
					+		+	
					+-		+	
ota	I number of other employees hald over \$5	50,000	<u>.</u>					$\overline{}$

Form 990-PF (2009) PASQUALE AND ROSE PROCACCI FAMIL	LY 65-6435795	Page <b>7</b>
Part VIII Information About Officers, Directors, Trustees, Formand Contractors (continued)	undation Managers, Highly Paid Em	ployees,
3 Five highest-paid independent contractors for professional services (see pa	ge 23 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		<b>•</b>
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant state organizations and other beneficiaries served, conferences convened, research papers produced, etc.		Expenses
1 N/A		
2		
3		
	•	
4		
Part IX-B Summary of Program-Related Investments (see page 1)	age 24 of the instructions)	
Describe the two largest program-related investments made by the foundation during the tax year	on lines 1 and 2	Amount
1 N/A		
2		
All other program-related investments See page 24 of the instructions		
3		

Total. Add lines 1 through 3

Form 990-PF (2009)

90,000

89,915

3а

3b

4

5

Suitability test (prior IRS approval required)

Cash distribution test (attach the required schedule)

Enter 1% of Part I, line 27b (see page 26 of the instructions)

Adjusted qualifying distributions. Subtract line 5 from line 4

qualifies for the section 4940(e) reduction of tax in those years

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income

<u>Pa</u>	rt XIII Undistributed Income	(see page 26 of t	the instructions)	· · · · · · · · · · · · · · · · · · ·		<del></del>
1	Distributable amount for 2009 from Part X	,	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
•	line 7	·''				21,980
2	Undistributed income, if any, as of the end	1 of 2009			<del> </del>	
- а	Enter amount for 2008 only					
b	Total for prior years 20 , 20	20				
3	Excess distributions carryover, if any, to 2					
	From 2004	43,497				
b	From 2005	268,899				
c	From 2006	12,024				
d	From 2007	83,820				
e	From 2008	84,197				
f	Total of lines 3a through e	01,10	492,437			
4	Qualifying distributions for 2009 from Part	YII	102,101		<del></del>	
7	line 4 ▶ \$ 90,000					
а	Applied to 2008, but not more than line 2a					
	Applied to undistributed income of prior ye	T T				
	(Election required—see page 26 of the in-					
_	Treated as distributions out of corpus (Ele	·				
·	required—see page 26 of the instructions					
а	Applied to 2009 distributable amount	'			<del>-</del>	21,980
e	Remaining amount distributed out of corp	116	68,020			
5	Excess distributions carryover applied to	ī	00,020			
5	(If an amount appears in column (d), the	T T	·			
	amount must be shown in column (a)	Same				
6	Enter the net total of each column as					
Ü	indicated below:					
а	Corpus Add lines 3f, 4c, and 4e Subtrac	t line 5	560,457	1		
	Prior years' undistributed income Subtrac		200,101			
b	line 4b from line 2b	^				
_	Enter the amount of prior years' undistribi	uted.				
·	income for which a notice of deficiency ha					1
	been issued, or on which the section 494					
	tax has been previously assessed	2(a)		1		İ
A	Subtract line 6c from line 6b Taxable					
u	amount—see page 27 of the instructions					
	Undistributed income for 2008 Subtract li	ine				
-	4a from line 2a Taxable amount—see pa					
	27 of the instructions	lge l				
f		inee				
'	4d and 5 from line 1. This amount must be					
	distributed in 2010	<b>`</b>				
7	Amounts treated as distributions out of co	irnus				
•	to satisfy requirements imposed by section	-				
	170(b)(1)(F) or 4942(g)(3) (see page 27 of					
	instructions)					
8	Excess distributions carryover from 2004	not	· · · · · · · · · · · · · · · · · · ·		<del></del>	
•	applied on line 5 or line 7 (see page 27 of					
	instructions)		43,497			
9	Excess distributions carryover to 2010	_	,		<del></del>	
•	Subtract lines 7 and 8 from line 6a	•	516,960			
10	Analysis of line 9	ł	320,300			
	Excess from 2005	268,899				
a b	Excess from 2006	12,024				1
C	Excess from 2007	83,820				
d	Excess from 2008	84,197				1
e	Excess from 2009	68,020				
	EVOCOO HOLLI EOOO	00,020				<u> </u>

Pa	rt XIV Private Operating Fou	ndations (see pa	age 27 of the inst	ructions and Part	VII-A, question 9)	
1a	If the foundation has received a ruling or o	determination letter that	at it is a private operati	ng		
	foundation, and the ruling is effective for 2	009, enter the date of	the ruling	<b>&gt;</b>		
ь	Check box to indicate whether the founda			ed in section 4	942(j)(3) or 4942(	i)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years	Ī	
	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		· · · · · · · · · · · · · · · · · · ·			
þ	85% of line 2a					
С	Qualifying distributions from Part XII,					
	line 4 for each year listed				<del> </del>	
d	Amounts included in line 2c not used directly					
	for active conduct of exempt activities	<del></del>				
е	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		i.			
а	"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					
b	of minimum investment return shown in					
	Part X, line 6 for each year listed		<del></del>			
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)			İ		
	(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					
Pa	ert XV Supplementary Inform	nation (Complete	this part only if	the foundation h	ad \$5,000 or more	in assets at
	any time during the ye					
1	Information Regarding Foundation Mar					
а	List any managers of the foundation who	-	e than 2% of the total of	contributions received	by the foundation	
_	before the close of any tax year (but only					
	N/A	ii tiiby navo oontiibato	a more man 40,000, 1	,400 000	,	
	List any managers of the foundation who	own 10% or more of th	he stock of a corporate	on (or an equally large	portion of the	·
U	ownership of a partnership or other entity				portion of the	
	N/A	of which the loundad	on has a 1070 or great	er interest		
		t Cift Loon Sobe	lambia eta Brogra			
2	Information Regarding Contribution, G Check here ▶     X   If the foundation only				loos not assert	
	unsolicited requests for funds. If the found			of the instructions) to	individuals or	
	organizations under other conditions, con					<del></del>
а	The name, address, and telephone numb	er of the person to wh	om applications should	d be addressed		
	N/A					
b	The form in which applications should be	submitted and informa	ation and materials the	y should include		
	N/A	·	··-			
С	Any submission deadlines					
	N/A					
d	Any restrictions or limitations on awards,	such as by geographic	al areas, charitable fie	lds, kinds of institution	s, or other factors	
	N/A					
						Form <b>990-PF</b> (2009

Form 990-PF (2009) PASQUALE AND ROSE PROCACCI FAMILY 65-6435795

Page 10

Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Foundation Recipient show any relationship to Purpose of grant or status of Amount any foundation manager contribution recipient Name and address (home or business) or substantial contributor a Paid during the year 501 (C) 3 BRCH FOUNDATION INC. COMMUNITY HEALTHCARE SERVICES 745 MEADOWS ROAD 50,000 BOCA RATON FL 33486 ST JOAN OF ARC CHURCH 501 (C) 3 370 SW THIRD STREET SUPPORT MINISTRY FAMILY LIFE & SPORT 30,000 BOCA RATON FL 33432 501 (C) 3 DREXEL UNIVERSITY COLLEGE 3141 CHESTNUT STREET #310 SUPPORT MEDICAL EDUCATION & RESEARCH 10,000 PHILADELPHIA PA 19104 90,000 ▶ 3a Total **b** Approved for future payment N/A Total **▶** 3b

DAA

	. Analysis of income-Producing A	ctivities				
-	ts unless otherwise indicated	(a) Business code	usiness income (b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income (See page 28 of
1 Program service	æ revenue		···			the instructions )
		_				
		_	_ <del>-</del> -			
	·····	-	<del></del>			
e		_		<del></del>		
f	<del></del>	-				<u> </u>
_	contracts from government agencies					
· · · · · · · · · · · · · · · · · · ·	ues and assessments	<del></del>	- <del></del>	14		<del></del>
	ings and temporary cash investments		<del></del>	14	16 242	
	interest from securities	<b>—</b>	<del></del>	14	16,243	
	me or (loss) from real estate	<del></del>		-+		
	ced property nanced property	<del> </del>		<del></del>		
	me or (loss) from personal property		<del></del>			<del>,, , , , , , , , , , , , , , , , , , ,</del>
7 Other investme		<del> </del>		<del></del>		
	rom sales of assets other than inventory			18	155	-63,34
•	(loss) from special events	<del></del>	-	<del>  -   -    </del>		
	(loss) from sales of inventory			<del></del>		<del></del>
•	a			- <del> </del>		······································
						· · · · · · · · · · · · · · · · · · ·
е						
	columns (b), (d), and (e)			0	16,409	-63,34
13 Total. Add line	12, columns (b), (d), and (e)				13	-46,931
(See worksheet in	line 13 instructions on page 28 to verify calculat	tions)	<u> </u>			
Part XVI-B	Relationship of Activities to the	Accomplishme	nt of Exempt	Purposes		
	Explain below how each activity for which incom					
	accomplishment of the foundation's exempt pur	poses (other than by	providing funds f	or such purpos	ses) (See page 29 o	of the
	nstructions)	<del> </del>		<del> </del>		
N/A		<del>- · - · ·</del>			<del></del>	
				-		
				·····		
		<del></del>				·
					<del></del>	· · · · · · · · · · · · · · · · · · ·
				·· <del>···</del>	<del></del>	
		·	···			
				<del></del>	<del></del>	<del></del>
	· · · · · · · · · · · · · · · · · · ·			<del></del>	- <del></del>	
<del></del>					·	
					<del></del>	
<del></del>		<del></del>	<del></del>		······································	
		· <u> </u>	<del></del>			
	<del></del>	<del></del>		<del></del>		<del></del>
			<del></del>			
		<del></del>	<del></del>			
				- <del>1</del>		<del></del>

DAA

Part XVII	Information Regarding Transfers To and Transactions and Relationships With Noncharit	table
	Exempt Organizations	

1	Did the o	rganization directly or ind	irectly engag	e in any of the following	with any other	organization described			Yes	No
						n 527, relating to political				
	organizat			( ), ( )	•	, ,				
2	_	from the reporting found	lation to a no	ncharitable evernit orga	nization of					
ű	(1) Cash	· -		nonanabio oxomptorge	inzalon o			1a(1)		х
	(2) Other									X
L	• •							1a(2)		-
D	Other trai									<b>.</b>
		s of assets to a noncharit		-				1b(1)		X
		nases of assets from a no						1b(2)		X
		al of facilities, equipment,		ets				1b(3)	<b>_</b>	X
	(4) Reim	bursement arrangements	s					1b(4)		X
	(5) Loan	s or loan guarantees						1b(5)		X
	(6) Perfo	rmance of services or mo	embership or	fundraising solicitations	;			1b(6)		X
С	Sharing o	of facilities, equipment, m	ailing lists, ot	her assets, or paid emp	loyees			1c		<u> </u>
d	If the ans	wer to any of the above is	s "Yes," com	olete the following sched	dule Column (I	b) should always show the fa	r market			
	value of t	he goods, other assets, o	or services giv	ven by the reporting four	ndation If the f	foundation received less than	faır market			
	value in a	iny transaction or sharing	arrangemen	it, show in column (d) th	e value of the	goods, other assets, or service	es received			
(	(a) Line no	(b) Amount involved	(c) Name	of noncharitable exempt org	ganization	(d) Description of transfers, tr	ansactions, and shar	ing arrangi	ements	
N/	A		1							
					_					
						· · · · · · · · · · · · · · · · · · ·				
						· · · · · ·				
				,,						
			<b></b>	<del></del>		<del></del>	_			
		-	<del> </del>							
-			†		<del></del>					
			+			•			*** ***	
			<del>                                     </del>				<del></del>			
			<del> </del>			<del></del>				
	In the fee		-Alice affiliate at a	with an related to one o			<del></del>			
Za		indation directly or indirect	-	•		· •		ΠYe	. T	1
		d in section 501(c) of the		than section 501(c)(3)) (	or in section 52			☐ T	3S A	j NO
D	If "Yes," (	complete the following sc	nedule	(h) 7 (		(0) 0				
	NT / N	(a) Name of organization		(b) Type of organiz	ation	(C) Descrip	otion of relationship	<del></del>		
	N/A					<del>.</del>				
	<u></u>		<del></del>							
		<del> </del>		<u> </u>						
ł	Under pen	alties of perjury, I declare tha	at I have exami	ned this return, including ac	companying sch	edules and statements, and to the based on all information of which	best of my knowledg	ge and		
	bellet, it is	P. Onect, and complete	Decialation of p	preparer (other than taxpay)			preparer has any kin	wicago		
		are Trace	icci		3-29-9					
5	Signa	ture of officer or trustee	<del></del>	· · · · · · · · · · · · · · · · · · ·	Date	Title				
운ㅣ						Date	1 "	arer's identif ber (see <b>Sig</b>		าก
드	ح ئ	Preparer's		<u>^</u>		Check r		30 of the ins		
Sign Here	Paid Preparer's Use Only	signature /	ach L.	Cohen CP.	<b>4</b>	03/21/10	P(	01048	204	<u> </u>
-	Pai epa Se (	Firm's name (or yours if	M. COH			.A.				
	£ 5	self-employed), address,	2101 W	EST COMMERC	•	D., SUITE 4800	EIN ▶ 59	-265	993	4
		and ZIP code		LAUDERDALE,		309		4-73		
								Form <b>99</b> (		
										/

Federal Statements	
65-6435795	

Assets	
뜅	
0	
픩	
Sale	
6a -	
ø	
Ē	
-	
Part	
art	
4	
Ľ.	
쇽	
30-P	
96	
_	
Ε	
0	
F	
4	
7	
ent,	
9	
딣	
ž	
ij	
S	

.

Det	Description		How Received				
Whom Sold	Date Acquired	Date Sold	Sale Price	Cost	Expense	Depreciation	Net Gain / Loss
AT&T	2/25/03	\$ 60/62/6	Purchase 12,254 \$	7,253 \$		<b>‹</b>	\$ 5,001
ALTRIA GROUP INC	3/17/04			2,163			885
	3/27/07	7/23/09	Purchase 9,841	13,870			-4,029
COLUMBIA MARISCO 21ST	12/18/08	10/01/09	Furchase 19,276 Phrchase	16,479			2,797
	3/27/07	2/23/09	23,047 Purchase	45,719			-22,672
	6/22/07	2/23/09	176	376			-200
COLUMBIA MAKISCO ZISI	6/22/07	2/23/09	309	099			-351
COLUMBIA MAKISCO ZIST	12/14/07	2/23/09	Furchase 76	175			66-
COLUMBIA MARISCO 21ST	r 12/14/07	2/23/09	Purchase 362	833			-471
EXECUT CORPORAL TON	2/25/03	9/53/09	Furchase 12,007	6,095			5,912
FED MOT SMI CAD CDWTH	11/13/03	8/19/09	Furchase 13, 616 Directore	7,198			6,418
HARRIS ASSOC OAKMRK	6/10/03	10/01/09	13,725 Durchase	12,202			1,523
TSHARES TR MSCT EMERGING	2/25/03	2/23/09	16,198 Phrchase	21,832			-5,634
	8/29/08	2/23/09	16,050 Burghage	30,127			-14,077
SO CO	8/29/08	2/23/09	Furchase 16,861 Dirchase	41,729			-24,868
TNTI REAL	6/26/08	2/23/09	rurciiase 144 Dirchase	325			-181
TNTI REAL	5/15/06	2/23/09	13,926 Durchase	35,000			-21,074
	12/18/06	2/23/09	33	100			-67

2
79
135
9
65

# **Federal Statements**

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

•	Net Gain / Loss	-386		-108	<u> </u>	-1,408	2,967	1,378	616	1,212	1,542	7,347	4,999	2,894	-8,564	-22	-63	-255	-17
	Depreciation	Ś	-																
	Expense																		
	Cost	580 \$		160	117	2,231	7,835	086'9	41,537	30,630	18,123	11,175	8,699	4,349	25,000	46	130	470	26
How Received	Sale Price	Purchase 194 S		Purchase 52	Purchase 43	Purchase 823	Purchase 10,802	Furchase 8,358	furchase 42,153	Furchase 31,842	Purchase 19, 665	Furchase 18,522	Furchase 13,698	7,243	Furchase 16,436	Furchase 24	Furchase 67	Purchase 215	Purcilase 9
	Date Sold	\$ 60/86/6		2/23/09	2/23/09	60/53/6	9/53/09	10/01/09	6/10/03	7/16/09	11/13/09	8/19/09	8/19/09	9/29/09	2/23/09	2/23/09	2/23/09	2/23/09	2/23/09
Description	Date Acquired	, h <del>r</del> i ,	EST 1/04/07	1,04/0/ EST 7/02/07	EST 12/27/07	12/27/07	3/17/04	6/10/09	2/23/09	2/23/09	2/23/09	2/25/03	3/17/04	3/17/04	6/21/06	12/19/06	INVT BRIC 12/19/06	5/17/07	12/12/07
Ŏ	Whom	KENSINGTON INTL REAL	KENSINGTON INTL REAL	KENSINGTON INTL REAL	KENSINGTON INTL REAL EST 12/27/07	KRAFT FOODS CL A		HEIMER DEV	TOTA		FIMCO FDS IOIL KET	1	I TINI SICUCM CITITU	FILLS MOKKIS INIT INC	GLBL	GLBL	TEMPLIN GLBL INVI BR	TEMPELIN GEBE INVI BE	iemetin Gebe invi Bric 12/12/07

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

Description		How Received					
Whom Date Sold Acquired	Date Sold	Sale Price	Cost	Expense	Depreciation	Gain	Net Gain / Loss
TEMPLIN GLBL INVT BRIC		Purchase					İ
12/12/07	2/23/09 \$	51 \$	152 \$		<b>ئر</b>	ᡐ	-101
TEMPLIN GLBL INVT BRIC		Purchase					
12/12/07	, 2/23/09	220	658				-438
THIRD AVE VALUE FD INC		Purchase					
10/01/09	12/14/09	13,481	12,738				743
TWEEDY BROWNE GLBL VALUE		Purchase					
3/31/03	3 2/23/09	10,379	10,667				-288
TWEEDY BROWNE GLBL VALUE		Purchase					
12/30/03	3 2/23/09	501	693				-192
TWEEDY BROWNE GLBL VALUE		Purchase					
12/29/04	1 2/23/09	296	487				-191
TWEEDY BROWNE GLBL VALUE		Purchase					
	5 2/23/09	258	485				-227
TWEEDY BROWNE GLBL VALUE		Purchase					
	5 2/23/09	216	475				-259
TWEEDY BROWNE GLBL VALUE		Purchase					
12/29/06	5 2/23/09	265	583				-318
TWEEDY BROWNE GLBL VALUE		Purchase					
12/31/0	7 2/23/09	309	657				-348
TWEEDY BROWNE GLBL VALUE		Purchase					
12/31/0	7 2/23/09	1,865	3,970				-2,105
TWEEDY BROWNE GLBL VALUE		Purchase					
	3 2/23/09	525	583				-58
TWEEDY BROWNE GLBL VALUE		Purchase					
1/02/09	3 2/23/09	1,348	1,495				-147
Total	S.	370,951 \$	434,298 \$	0	\$	\$ 0	-63,347
							!

### Statement 5 - Form 990-PF, Part II, Line 10b - Corporate Stock Investments

Description Beginning End of Basis of Fair Market of Year Year Valuation Value ALTRIA GROUP INC Ś 7,635 \$ 8.441 Market 8,441 AT&T INC 14,491 12,614 Market 12,614 BANK OF AMERICA CORP 9,864 22,496 9,864 Market EXELON CORPORATION 12,190 11,729 Market 11,729 EXXON MOBIL CORP 20,457 Market 20,457 17,995 FOSTER WHEELER LIMITED 14,720 14,720 Market 11,030 FREEPORT MCMORAN COPPER & GOLD 8,253 10,759 Market 10,759 FULTON FINANCIAL CORP PA 22,890 33,361 22,890 Market I SHARES TR DOW JONES US RE INDEX FD 41,729 Cost I SHARES TR MSCI EMERGING MKT IND FD 30,127 Cost KRAFT FOODS CL A 7,836 Cost MEDCO HEALTH SOLUTIONS INC 25,564 25,564 Market 5,248 PHILIP MORRIS INTERNATIONAL INC 7,228 Market 7,228 17,397 PPL CORP Cost 11,174 ARTIO GLOBAL INVT FUND INTL EQUITY 8,831 8,831 Market ARTISAN MID CAP FUND 28,103 Market 28,103 47,909 BRIDGEWAY FDS INC AGGRESSIVE INV II 18,057 Market 18,057 COLUMBIA FUNDS MARISCO 21ST CENTURY 47,764 Cost FEDERATED MDT SERIES SMALL CAP GRWTH 13,149 13,149 Market HARRIS ASSOC INVT TR OAKMARK INTL FD 21,832 Cost HIGHMARK FDS SMALL CAP VAL CL FIDUC 26,139 Market 26,139 33,373 IVY FUND GLOBAL NAT RES FD 27,705 27,705 Market JULIUS BAER INV FDS INTL EQUITY FDII 23,805 Cost MAINSTAY FUNDS HIGH YIELD CORP BOND 71,801 Market 71,801 TWEEDY BROWNE FUND INC GLOBAL VALUE 18,016 Cost KENSINGTON FUNDS INTL REAL ESTATE A 38,944 Cost OPPENHEIMER DEVELOPING MKTS FUNDS 17,744 Market 17,744

65-6435795

# **Federal Statements**

### Statement 5 - Form 990-PF, Part II, Line 10b - Corporate Stock Investments (continued)

Description							
		Beginning of Year	_	End of Year	Basis of Valuation	_	Fair Market Value
PIMCO FD PAC INVT MGMT TOTL TEMPLETON GLOBAL INVESTMNT	\$		\$	69,944	Market	\$	69,944
		26,481	_		Cost	_	
Total	\$ <u></u>	499,086	\$	425,739		\$_	425,739

# Statement 6 - Form 990-PF, Part II, Line 22 - Other Liabilities

Description	B	End of Year		
DUE TO ROSE PROCACCI	\$	9,034	\$	9,034
Total	\$ <u></u>	9,034	\$	9,034

### Statement 7 - Form 990-PF, Part III, Line 3 - Other Increases

Description	 Amount
ADJUST INVESTMENTS TO TAX BASIS	\$ 34,548
Total	\$ 34,548

65-6435795	Federal Statem	ents		
•				
	Taxable Interest on Inve			
Description	Amount	Unrelated Business Code	Exclusion Code	Posta Code
LPL FINANCIAL	\$ 11		14	
Total	\$ 11			
<del>-</del> .	Taxable Dividends from S	Securities		
Description	Amount	Unrelated Business Code	Exclusion Code	Posta Code
LPL FINANCIAL	\$ 16,243		14	
Total	\$ 16,243			