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SCANNED SEP 27 2010

Return of Private Foundation
or Section 4947(a)(1) Nonexempt Charitable Trust
Treated as a Private Foundation
on may be able to use a copy of this return to satisfy state reporting require

OMB No 1545-0052 2009

-							30 abio (0	<u> </u>				orang requirements	
F	or ca	alendar	year 2009,	or to	ax year beg	inning	··		, 2009	, and en	ding		, 20
G	Ch	eck all t	hat apply	T	Initial retu	rn		Initial return	of a former	oublic ch	arıty		Final return
					Amended	return		Addre	ess change		[ ] N	Name change	_
_			Name of for	ındat								A Employer identif	ication number
	lien t	the IRS	THE BRO	DSK	Y FOUNDA	MOITA							
		bel.	1		W. BROD							74	-6089484
		rwise,	<del></del> _		et (or P O box			d-1		Room/s	····to		<del></del>
		rint	Number and	3 5116	et (or P O box	numberij	man is not	Jenvered to stre	et address)	10011/3	uite	D Telephone number (se	ee page 10 of the instructions)
	•	type.			T		0.00			1		,,	121 751 1600
,		pecific			IANA, SU		000						13) 751-1600
1	nstru	ictions.	City or town	, stat	te, and ZIP co	de						<ul> <li>If exemption application pending, check her</li> </ul>	e · · · · · · · ·
												D 1 Foreign organiza	<b>▶</b>
			HOUSTON	, Т	X 77002							2 Foreign organiz	ations meeting the
Н	Che	Check type of organization X Section 501			on 501(	c)(3) exe	mpt private	foundation			85% test, check computation		
Ĭ			1947(a)(1) no			-			rivate founda	tion		computation -	
+			t value of all					ethod X (		crual		E if private foundation	
•						11			Jasii Acc	Juai		under section 507(	b)(1)(A), check here . P
	_		m Part II, col				her (spe					1	s in a 60-month termination
7		▶ \$			397.	<del></del>	COIUITITI (	a) must be o	n cash basis )			under section 507(I	o)(1)(B), check here
	art.	U Analy	sis of Reve	nue	and Expens	es (The	(a) Re	venue and	(b) Net inve	estment	1 6	c) Adjusted net	(d) Disbursements for charitable
		may n	ot necessarily	equa	al the amount:	s in		nses per	incom		1 `	ıncome	purposes
_	-	colum	n (a) (see pag	e 11	of the instruct	tions))		ooks			<u> </u>		(cash basis only)
	1	Contribut	ions, gifts grants,	etc , re	eceived (attach sch	nedule)			ļ		L		
	2	Check	If the f	found Sch	ation is <b>not</b> requ B	uired to					<u>L</u>		1
	3	Interest	on savings and			- 1		74	1	74		<i>,,</i>	ATCH 1
	4		nds and intere		•	г		149,633	14	9,633		·	ATCH 2
	ł		ents			ł					1		, ,
						F		-			<del> </del>		
			at income or (los				<u> </u>	-3,998	<del> </del>		<del> </del>		
Revenue			or (loss) from all		of assets not on t 399			3,755	1		<del> </del>		
/en	-		n line 6a .			<del>, , , , , ,</del> ,			<del> </del>				<del> </del>
è	7	Capital	gain net inco	me (	from Part IV, I	ine 2) .				<del>B</del> I	$\cap$	EIVED	ļ. ————
_	8		ort-term capita						<del> </del>		<u>. U i</u>		
_	9		modifications			[				잃	<u></u>	200	
	10 a		les less retums wances							φ  <u>S</u> [	P 2	<b>0</b> 2010   우	
	Ь		st of goods sold	- 1					11	EZ		73	
	l c	Gross i	profit or (loss)	(atta	ch schedule)						<u></u>	- R 1 1 1 7 -	-
	11		ncome (attach							UU	DE	IV, UI	<u> </u>
	12		Add lines 1 thi					145,709	14	9,707			<del></del>
_			sation of officer			-		0			<b>-</b>	<del></del>	
	13										+		
S	14		employee sala		-				· · · · · · · · · · · · · · · · · · ·				
us.	15		n plans, emplo										
Expenses	16a	Legal fe	ees (attach scl iting fees (atta	hedu	le) <u></u> .	⊦	·····	2 505		1 752	<b>├</b>		1 750
	b							3,505		1,753.	<b></b>	0.	1,752
e <	С	Other p	professional fe	es (a	attach schedul	e) .* L		6,908	<u> </u>	6,908.	<u> </u>		
rat	17	Interest	·			<u>.</u> L			<u> </u>				
st	18	Taxes (a	ttach schedule)	(see p	age 14 of the inst	ructions) * *		2,046	<del></del>	473.	<u></u>		
Operating and Administrative	19	•	iation (attach		_	· · ·							
卢	20	•	incy			· · ·							
۷,	21		conferences,										
and a	22		and publicat		-		·	<del> </del>	-				
6								188	<del> </del>		<del> </del>		188
틸	23		xpenses (atta					100	<del>                                     </del>		<del>                                     </del>	<del></del>	- 100
era	24		perating and		-	1		10 647	}	0 124		^	1 040
힑			es 13 through					12,647	<b>!</b>	9,134.	1	0.	1,940
~	25	Contrib	utions, gifts, (	grant	s paid			164,054	1			·	164,054
$\Box$	26	Total expe	enses and disburs	seme <u>n</u>	ts. Add lines 24	and 25		176,701	1	9,134.		0.	165,994
	27	Subtrac	t line 26 from	ı lıne	12			1,	1		J	` ' '	J
			revenue over exp			nts		-30,992		.,	′		
			estment inco			· · · -	<i>;</i> , , , ,	- 31 h	14	0,573.			
			ed net income		_	· -	<del> </del>	133 3		1/2	<b></b>	-0-	7 7 7
		~ujus(t		• VII 11	Cyanve, Cillel	<u> </u>	<u> </u>			<u> </u>	L		

For Privacy Act and Paperwork Reduction Act Notice, see page 30 of the instructions. \* ATCH 4 JSA \*\* ATCH 5 9E1410 1 000 8230 90 2917 7/21/2010 2:44:58 PM V 09-7 1240-020

Form 990-PF (2009)

PAGE 1

	Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year		Beginning of year	End o	f year
_		amounts only (See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			· · · · · · · · · · · · · · · · · · ·
	2	Savings and temporary cash investments	319,954.	290,245.	290,245
	3	Accounts receivable		***	
	,	Less allowance for doubtful accounts ▶			
	4	Pledges receivable	, '		
		Less allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
	ĺ	disqualified persons (attach schedule) (see page 16 of the instructions)			
	7	Other notes and loans receivable (attach schedule)		ξ '	
	j	Less allowance for doubtful accounts ▶			
S	8	Inventories for sale or use			
sets	9	Prepaid expenses and deferred charges			
As	ı	Investments - U S and state government obligations (attach schedule) *.*	1,349,955.		1,046,846
	Ь	Investments - corporate stock (attach schedule) ATCH 8	505,137.		723,866
	c	Investments - corporate bonds (attach schedule) ATCH 9	963,894.	1,266,066.	1,334,440
	11	Investments - land, buildings, and equipment basis	,		
		Less accumulated depreciation (attach schedule)			
	12	Investments - mortgage loans			
	13	Investments - other (attach schedule)			
	14	Land, buildings, and equipment basis	,		<del></del>
		Less accumulated depreciation (attach schedule)	ĺ		
	15	Other assets (describe			
	16	Total assets (to be completed by all filers - see the			
		instructions Also, see page 1, item l)	3,138,940.	3,110,948.	3,395,397
	17	Accounts payable and accrued expenses		-	
	18	Grants payable			
Ś	19	Deferred revenue			
ë	20	Loans from officers, directors, trustees, and other disqualified persons			-
Liabilities	21	Mortgages and other notes payable (attach schedule)			,
≝.	22	Other liabilities (describe ATCH 10 )	-5,880.	-2,880.	
		Office madmitted (describe > Alch_LQ/		<u> </u>	
	23	Total liabilities (add lines 17 through 22)	-5,880.	-2,880.	
		Foundations that follow SFAS 117, check here		<del></del>	
		and complete lines 24 through 26 and lines 30 and 31.			
Sa	24	Unrestricted	3,144,820.	3,113,828.	
Š	25				
뎚	25 26 27 28 29 30	Temporarily restricted			
e E	40				
Ë		Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.			
ř	27	Capital stock, trust principal, or current funds			
S	20	Paid-in or capital surplus, or land, bldg , and equipment fund			
set	20	Retained earnings, accumulated income, endowment, or other funds			
As	29				
iet	30	Total net assets or fund balances (see page 17 of the	3,144,820.	3,113,828.	
_	31	Instructions)  Total liabilities and net assets/fund balances (see page 17			
	,	of the instructions)	3,138,940.	3,110,948.	
Е	art.i	Analysis of Changes in Net Assets or Fund E			
		I net assets or fund balances at beginning of year - Part II,		t agree with	
•		of-year figure reported on prior year's return)			3,144,820.
2					-30,992
					3,113,828
		lines 1, 2, and 3			3,113,020
		eases not included in line 2 (itemize) ▶	no 5) Port II column (h)	June 30	3,113,828.
0	Tota		ne 5) - Fart II, column (b)	), line 30   6	
		** ATCH 7			Form <b>990-PF</b> (2009)

JSA

	art IV Capital Gains	s and Losses for Tax on Inv	estment income			
	(a) List an 2-story b	(b) How acquired P-Purchase D-Donation		(d) Date sold (mo , day, yr )		
1:	CEE DADE TH COLL			D-DOTIA(IO)		
	<u>b</u>					
	<u> </u>					
_	<u>d</u>					
_	9		(g) Cost or other basis		<u> </u>	
	(e) Gross sales price		(h) Gain or (lo (e) plus (f) mini			
	a			 	<u> </u>	
_	b					
	<u> </u>		<del>-</del>			
	<u>d</u>				<del></del>	
_	Complete only for assets s	howing gain in column (h) and owr	l ned by the foundation on 12/31/69	(1)	Cours (Cal. (b) a	
_		(j) Adjusted basis	(k) Excess of col (i)	(I)	Gains (Col (h) g. (k), but not less t	ain minus han -0-) <b>or</b>
	(i) F M V as of 12/31/69	as of 12/31/69	over col (j), if any		Losses (from co	
- 6	1					
_	)					
_						
_	<u> </u>					
	•					
2	Capital gain net income or	(net capital loss) $\left\{ \begin{array}{c} \text{If} \\ \text{If} \end{array} \right.$	gain, also enter in Part I, line 7 (loss), enter -0- in Part I, line 7	2		-3,998.
3	Net short-term capital gain	or (loss) as defined in sections 12				
	-	line 8, column (c) (see pages 13 a	<b>6</b> 1			
	If (loss), enter -0- in Part I, I	ine 8	<u> </u>	3		
			iced Tax on Net Investment Inc e section 4940(a) tax on net investr			
W			utable amount of any year in the ba Do not complete this part	ase perio	d?	Yes X No
1	Enter the appropriate amo	ount in each column for each year,	see page 18 of the instructions be	fore mak	ing any entries	
	(a) Base penod years	(b)	(c)		(d) Distribution ra	tio
_	Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of nonchantable-use assets		(col (b) divided by	col (c))
_	2008	174,587.	3,435,775.			0.050814
_	2007	172,331. 166,483.	3,506,313. 3,395,436.			0.049149
	2006	154,567.	3,379,764.			0.045733
	2005	168,605.	3,357,517.			0.050217
_	2004	100,003.	3,33,,31,.		<del></del>	0.030217
2	Total of line 1, column (d)			2	1	0.244944
		for the 5-year base period - divide				
•	<u> </u>	lation has been in existence if less	-	3		0.048989
	·					
4	Enter the net value of non	charitable-use assets for 2009 fror	m Part X, line 5	4	3,:	268,842.
5	Multiply line 4 by line 3 .			5		160,137.
6	Enter 1% of net investmen	nt income (1% of Part I, line 27b)		6		1,406.
-	201 170 31 1100 11110 30 1101	( , , , o , , a , , , , , , , , , , , , ,		<del></del>	·	
7	Add lines 5 and 6			7		161,543.
8	Enter qualifying distribution of line 8 is equal to or green Part VI instructions on page	ater than line 7, check the box in	n Part VI, line 1b, and complete th	8   nat part	using a 1% tax	rate See the

SECTION 1	9 15 1 2 2			. <u>~go</u> .
	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of t	he ins	tructi	ons)
1 a	Exempt operating foundations described in section 4940(d)(2), check here   and enter "N/A" on line 1		_ ` ' •	
	Date of ruling or determination letter(attach copy of ruling letter if necessary - see instructions)			400
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			106.
	here X and enter 1% of Part I, line 27b  All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4%	· `,	٠.	, -
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4%			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			
3	Add lines 1 and 2		1,4	106.
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-		1,4	106.
6	Credits/Payments	۲. ,	4, ,	7,7%
а	2009 estimated tax payments and 2008 overpayment credited to 2009 6a 1,600.	•		
b	Exempt foreign organizations-tax withheld at source 6b 0.	•		-
	1 250 1'			
	Backup withholding erroneously withheld 6d			
7	Total credits and payments Add lines 6a through 6d		2,8	350.
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			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		1,4	144.
11	Enter the amount of line 10 to be Credited to 2010 estimated tax ▶ 1,444 · Refunded ▶ 11			<del></del>
Pai	t VII-A Statements Regarding Activities			
1 a	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?	1 a		_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		X
	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?	1 c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year	\	,	٠.
	(1) On the foundation ►\$(2) On foundation managers ►\$			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed	1.7	<b></b>	,
_	on foundation managers  \$			Х
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		<del></del>
•	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of			
3	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		Х
4 a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4 a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?		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) satisfied either		, ]	
-	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that			
	conflict with the state law remain in the governing instrument?	6	Х	
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	Х	
8 a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the			
	Instructions) ► TX,	ľ	1	
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General		. I	
_	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			
	4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV on page			Х
	27)? If "Yes," complete Part XIV	9		
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	45		Х
	names and addresses	10	- 1	

If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here

Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its

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

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

3a Did the foundation hold more than a 2% direct or indirect interest in any business

Form **990-PF** (2009)

2b

3 b

4 a

X No

Pa	t VII-B Statements Regarding Activities f	or Which Form 4	720 May Be Requ	ired (continued)			r age t
5 a	During the year did the foundation pay or incur any amout (1) Carry on propaganda, or otherwise attempt to influe		n 4945(e))?	. Yes X N	0 3	,	
-	(2) Influence the outcome of any specific public election	n (see section 4955);	or to carry on,		3	24	`
•	directly or indirectly, any voter registration drive?			Yes X N	o   ` ·		
	(3) Provide a grant to an individual for travel, study, or of				o   .		,
	(4) Provide a grant to an organization other than a char	itable, etc., organizati	on described in				
	section 509(a)(1), (2), or (3), or section 4940(d)(2)?	(see page 22 of the in	structions)	Yes X N	o   · `	\	ļ
	(5) Provide for any purpose other than religious, charita	ble, scientific, literary,	or educational			-	
	purposes, or for the prevention of cruelty to children	or animals?		Yes X N	o   . '	1 .	١,
b	If any answer is "Yes" to 5a(1)-(5), did any of the trans					1	
	Regulations section 53 4945 or in a current notice regard				5b	N	VA
	Organizations relying on a current notice regarding disas	ter assistance check I	nere	X	-		,
С	If the answer is "Yes" to question 5a(4), does the found						
_	because it maintained expenditure responsibility for the g	•		Yes N	o		
	If "Yes," attach the statement required by Regulations sec				,		
6.2	Did the foundation, during the year, receive any funds, of	• •	nav premiums				l
va	on a personal benefit contract?	•		Yes X N	0		
h	Did the foundation, during the year, pay premiums, direct			• 🖵 🖳	6 Ь		Х
ŭ	If "Yes" to 6b, file Form 8870	city of fridirectly, off a	personal benefit contra	· · · · · · · · · · · · · · · · · · ·			
7 2	At any time during the tax year, was the foundation a pa	rty to a probibited tax	shelter transaction?	Yes X N			j
	If yes, did the foundation receive any proceeds or have			• — —			X
	Information About Officers, Directors						
	and Contractors						
	List all officers, directors, trustees, foundation m	anagers and their (b) Title, and average	(c) Compensation (see	(d) Contributions to	·		
	(a) Name and address	hours per week devoted to position	(If not paid, enter	employee benefit plans and deferred compensation	(e) Expenother al	se accoi Iowance	
		devoted to position		and deserted compensation			
 ΤΔ	TACHMENT 11		0.	0.			0
411	THOMADIVI II						
					<del></del>		
				ŀ			
	Compensation of five highest-paid employees (ot	han Aban Abana ina	luded on line 4	22 of the inc			
	Compensation of five nignest-paid employees (or If none, enter "NONE."	ner than those the	nadea on line 1 - Se	e page 23 of the ins	tructions).		
	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) Expens		
-			<del></del>	Join portugues.			
	NONE						
		}					
- <b></b>							
	<del></del>						
		ļ		<del> </del>			
					ı		
T-4-	I number of other employees and eyes \$50,000			<u> </u>			
rota	I number of other employees paid over \$50,000 .	<u> </u>	<u> </u>	<u> </u>	<u> </u>		

3 Five highe	st-paid independent contractors for professional services (see page 23 of the instructions). If none,	enter "NO	NE."
· -	(a) Name and address of each person paid more than \$50,000 (b) Type of service		pensation
NONE			
			-
otal numbe	of others receiving over \$50,000 for professional services		NONI
Part IX-A	Summary of Direct Charitable Activities		
List the found of organization	ation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number is and other beneficianes served, conferences convened, research papers produced, etc.	Ехре	enses
1 N/A			
2			
3			
~			
4			
<b></b>			
<del></del>			
Part IX-B	Summary of Program-Related Investments (see page 23 of the instructions)		_
	wo largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amı	ount
1 NONE			
·			
2			
All other proa	am-related investments. See page 24 of the instructions		
3 NONE	• •		
J			

Pa	Minimum Investment Return (All domestic foundations must complete this part see page 24 of the instructions.)	Foreign foundati	ons,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,	4 . '	
	purposes		
а	a Average monthly fair market value of securities	1a	2,938,757.
b	b Average of monthly cash balances	1b	376,984.
C	c Fair market value of all other assets (see page 24 of the instructions)	1c	2,880.
ď	Total (add lines 1a, b, and c)  Reduction claimed for blockage or other factors reported on lines 1a and	1d	3,318,621.
е		28	
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	3,318,621.
4	Cash deemed held for charitable activities Enter 1 1/2 % of line 3 (for greater amount, see page 25	5	
	of the instructions)	4	49,779.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	4 5	3,268,842.
6	Minimum investment return. Enter 5% of line 5	6	163,442.
Ŗa	Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5 foundations and certain foreign organizations check here ▶ and do not complete	b) private operating	
1	Minimum investment return from Part X, line 6	1	163,442.
2 a	Tax on investment income for 2009 from Part VI, line 5	406.	
b	b Income tax for 2009 (This does not include the tax from Part VI) 2b	* !	
		2c	1,406.
3	Distributable amount before adjustments Subtract line 2c from line 1		162,036.
4	Recoveries of amounts treated as qualifying distributions		<del> </del>
5		1 _ 1	162,036.
6	Add lines 3 and 4  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,	• • • • • • • • • • • • • • • • • • • •	<del></del>
•	line 1 · · · · · · · · · · · · · · · · · ·	7	162,036.
		,	
Lit	art XIII Qualifying Distributions (see page 25 of the instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes	,,,	
а			165,994.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	0.
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	0.
b		26	0.
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4		165,994.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment inco		
	Enter 1% of Part I, line 27b (see page 26 of the instructions)		1,406.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	164,588.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calcula qualifies for the section 4940(e) reduction of tax in those years		oundation

74-6089484

4.4	Undistributed Income (see pag	(a)	(b)	(c)	(d)
1	Distributable amount for 2009 from Part XI,	Corpus	Years prior to 2008	2008	2009
•	line 7	11 - 11 - 15 - 1	\$ 16 mm 19	1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1	162,036.
2	Undistributed income, if any, as of the end of 2009	- , ,		1	,
a			5,7		, j., j
b	07 06 05	, 33° 8° 11		8- 10-	1,"
3	Excess distributions carryover, if any, to 2009		1 1	, Y	13 0 125
а	From 2004 3, 675.			, ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	
b	From 2005				
С	From 2006			, ,	
d		7			
е	From 2008				
f	Total of lines 3a through e	12,882.			
4	Qualifying distributions for 2009 from Part XII, line 4 > \$ 165,994.	-	-	-	,
а	Applied to 2008, but not more than line 2a	v da			
b	Applied to undistributed income of prior years (Election required - see page 26 of the instructions)	, .		,	
С	Treated as distributions out of corpus (Election required - see page 26 of the instructions)				
ď	Applied to 2009 distributable amount			-	162,036.
	Remaining amount distributed out of corpus	3,958.			
5 6	Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a)) Enter the net total of each column as indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	16,840.			r , ,
b	Prior years' undistributed income Subtract line 4b from line 2b			•	,
С	Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed.				
d	Subtract line 6c from line 6b Taxable amount - see page 27 of the instructions				
е	Undistributed income for 2008 Subtract line 4a from line 2a Taxable amount - see page 27 of the instructions				
f	Undistributed income for 2009 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2010.	ļ			
7	Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see page 27 of the				
8	Excess distributions carryover from 2004 not applied on line 5 or line 7 (see page 27 of the instructions)	3,675.			
9	Excess distributions carryover to 2010.				
	Subtract lines 7 and 8 from line 6a	13,165.			
	Analysis of line 9				
	Excess from 2005	,			
	Excess from 2006				
	Excess from 2007				·
	Excess from 2008		`	- ,	

P	art XIV Private Ope	rating Foundations	(see page 27 of the	instructions and Pa	art VII-A, question 9)	NOT APPLICABI
1 a	If the foundation has					
	foundation, and the rulin				I I	
b	Check box to indicate wh	·	a private operating found		1 4942(j)	(3) or 4942(j)(5)
2 a		Tax year		Prior 3 years	T	(e) Total
	justed net income from Part  I or the minimum investment	(a) 2009	(b) 2008	(c) 2007	(d) 2006	
	return from Part X for each					
	year listed		<u> </u>			
b	85% of line 2a			<del></del>	<del> </del>	
C	Qualifying distributions from Part XII, line 4 for each year listed					
ď	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			<u></u>		
3	Complete 3a, b, or c for the alternative test relied upon					
а	"Assets" alternative test - enter					
	(1) Value of all assets					
	(2) Value of assets qualifying under section		İ			
b	4942(j)(3)(B)(i)					
D	"Endowment" alternative test- enter 2/3 of minimum invest-					
	ment return shown in Part X,					
_	line 6 for each year listed "Support" alternative test - enter					
С	(1) Total support other than					1
	gross investment income					
	(interest, dividends, rents, payments on securities					, •
	loans (section 512(a)(5)),					1
	or royalties)			<u> </u>		<del></del>
	public and 5 or more exempt organizations as					1
	provided in section 4942 (j)(3)(B)(III)					
	(3) Largest amount of sup-					
	port from an exempt organization					· <del></del>
	(4) Gross investment income,				L	
Pε	Supplement	ary Information (C	omplete this part	only if the found	ation had \$5,000	or more in assets
_		luring the year - se		structions.)		
1	Information Regarding List any managers of			a than 20% of the tota	l contributions receive	d by the foundation
a	before the close of any	tax year (but only if th	ney have contributed r	more than \$5,000) (S	ee section 507(d)(2))	d by the loundation
	RUTH W. BRO		•	, , ,	, , , , ,	
	List any managers of		own 109/ or more of	the stock of a corp	oration (or an equally	large postion of the
D	ownership of a partner					large portion of the
	51111515111p 51 a partire	op				
	N/A					
2	Information Regarding	g Contribution, Grant	, Gift, Loan, Scholarsh	nip, etc., Programs:		
	Check here ► X If the	he foundation only i	nakes contributions	to preselected charit	table organizations ar	nd does not accept
	unsolicited requests for	or funds. If the foun	dation makes gifts, g	rants, etc (see page	28 of the instruction	is) to individuals or
	organizations under ot	her conditions, comple	ete items 2a, b, c, and	d		
а	The name, address, ar	nd telephone number	of the person to whon	n applications should b	e addressed	
b	The form in which appl	ications should be sul	omitted and information	on and materials they	should include	
C	Any submission deadlii	nes				
d	Any restrictions or lin	mitations on awards.	such as by geogra	aphical areas, charita	ble fields, kinds of ir	nstitutions, or other
	factors		, 59	, , , , , , , , , , , , , , , , , , , ,	-,	

Form 990-PF (2009)			74-6089484	Page 11
Part XV Supplementary Information (c	ontinued)			
3 Grants and Contributions Paid Duri	ing the Year or App		Future 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)	or substantial contributor	recipient	CONTRACT	<del></del>
<b>a</b> Paid during the year SEE ATTACHMENT			SEE ATTACHMENT	164,054.
				•
Total	L	<u> </u>	▶ 3a	164,054.
b Approved for future payment		<u> </u>		
		}		
		}		
Total			▶ 3b	
			· · · · · · · · · · · · · · · · · · ·	

Part XVI-A Analysis of Income-Produ			T: :::::		, (a)
nter gross amounts unless otherwise indicated		ated business income		/ 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 service revenue					the instructions)
a					
b					
c					
d	<u> </u>				
e					
f					
g Fees and contracts from government agencies		-	-		
2 Membership dues and assessments			14	74.	<del></del>
Interest on savings and temporary cash investments	ļ		14	149,633.	
Dividends and interest from securities	•, *	, .		140,000.	
Net rental income or (loss) from real estate	·	1.18.	· <del> </del>	· - · · · ·	
a Debt-financed property					
b Not debt-financed property			<del>                                     </del>		
Net rental income or (loss) from personal property					
Other investment income			1.0	2.000	
B Gain or (loss) from sales of assets other than inventory			18	-3,998.	
Net income or (loss) from special events					
Gross profit or (loss) from sales of inventory			1		
Other revenue a			<u> </u>		
b					
c					
d					
d				145,709.	
e Subtotal Add columns (b), (d), and (e)					145,709
e 2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) iee worksheet in line 13 instructions on page 28  Relationship of Activities	to verify calcusto to the Ac	ulations) complishment of Ex	empt Purp	13	
e 2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) see worksheet in line 13 instructions on page 28	to verify calcusto to the Ac	ulations) complishment of Ex	empt Purp	oses  (e) of Part XVI-A cont	tributed importantly t
d e 2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) iee worksheet in line 13 instructions on page 28  ATLEXIES Relationship of Activities  Line No. Explain below how each activities the accomplishment of the form	to verify calcusto to the Ac	ulations) complishment of Ex	empt Purp	oses  (e) of Part XVI-A cont	tributed importantly t
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d e 2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) iee worksheet in line 13 instructions on page 28  ATLEXIES Relationship of Activities  Line No. Explain below how each activities the accomplishment of the form	to verify calcusto to the Ac	ulations) complishment of Exch income is reported exempt purposes (c	tempt Purp	oses  (e) of Part XVI-A cont	tributed importantly t
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d e 2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) iee worksheet in line 13 instructions on page 28  ATLEXIES Relationship of Activities  Line No. Explain below how each activities the accomplishment of the form	to verify calcusto to the Ac	ulations) complishment of Exch income is reported exempt purposes (c	tempt Purp	oses  (e) of Part XVI-A cont	tributed importantly
d e 2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) iee worksheet in line 13 instructions on page 28  ATLEXIES Relationship of Activities  Line No. Explain below how each activities the accomplishment of the form	to verify calcusto to the Ac	ulations) complishment of Exch income is reported exempt purposes (c	tempt Purp	oses  (e) of Part XVI-A cont	tributed importantly t
d e 2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) iee worksheet in line 13 instructions on page 28  ATLEXIES Relationship of Activities  Line No. Explain below how each activities the accomplishment of the form	to verify calcusto to the Ac	ulations) complishment of Exch income is reported exempt purposes (c	tempt Purp	oses  (e) of Part XVI-A cont	tributed importantly
d e 2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) iee worksheet in line 13 instructions on page 28  ATLEXIES Relationship of Activities  Line No. Explain below how each activities the accomplishment of the form	to verify calcusto to the Ac	ulations) complishment of Exch income is reported exempt purposes (c	tempt Purp	oses  (e) of Part XVI-A cont	tributed importantly t
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d e 2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) iee worksheet in line 13 instructions on page 28  ATLEXIES Relationship of Activities  Line No. Explain below how each activities the accomplishment of the form	to verify calcusto to the Ac	ulations) complishment of Exch income is reported exempt purposes (c	tempt Purp	oses  (e) of Part XVI-A cont	tributed importantly t

1 0110 230-11 (2005)								_
Part XVII	Information Regarding	Transfers	To and	<b>Transactions</b>	and Relatio	nships With	n Noncharitable	•
	<b>Exempt Organizations</b>							

	·									· · · · · · · · · · · · · · · · · · ·		
1		the organization directly								1	Yes	No
		ection 501(c) of the C	ode (other than	section 501(c)(3) or	ganizations	s) or in se	ection 527,	relating	to political			,
a	orga Tran	inizations? isfers from the reporting f	oundation to a no	ncharitable exempt orga	anızation of					٨.	, *	v
	(1)	Cash								1a(1)		X
	(2)	Other assets								1a(2)		
b		er transactions:										3.7
		Sales of assets to a nonch								1b(1)		X
		Purchases of assets from								1b(2)		X
	(3) F	Rental of facilities, equipm	ent, or other asset	ts						1b(3)		X X
	(4) F	Reimbursement arrangeme	ents							1b(4)		X
		Loans or loan guarantees								1b(5)		X
	(6) f	Performance of services of	r membership or	fundraising solicitations						1b(6)		X
		ring of facilities, equipmen	-		-					1 c	_	X
d		ne answer to any of t										
	value	e of the goods, other	assets, or servi	ces given by the re	eporting for	oundation	If the foun	dation re	ceived less	than	faır r	narket
	value	e in any transaction or	sharing arrang	jement, show in coli	ımn <b>(d)</b> t	the value of	of the good	s, other	assets, or	service	s rec	erved
					<del>-</del>	T						
(a) l	Line no	(b) Amount involved	(c) Name of n	oncharitable exempt organ	ization	+ · · · · · · · · · · · · · · · · · · ·	ription of trans	ers, transac	tions, and shar	ing arra	ngemei	nts
	_	N/A	 			N/A						
						<u> </u>		-				
			<del></del>				<del></del>					
		ļ									_	
				<del></del>								
				<del> </del>								
				<del></del>								
2 a	ls th	e foundation directly or	indirectly affiliate	ed with, or related to	, one or r	more tax-ex	empt organi	zations de	scribed in	_	<u></u>	1
	secti	on 501(c) of the Code (oth	er than section 50	01(c)(3)) or in section 5	27?				L	Ye	s LX	No
b	If "Ye	es," complete the following										
		(a) Name of organization	·	(b) Type of org	anization		· · · · · · · · · · · · · · · · · · ·	c) Descript	ion of relations	hib		
					<u>.</u>							
								-				
			-									
- т	13 1.								4- 41- 1-4 -4			
		r penalties of perjury, ! decla , it is true, correct, and comp										
	. (	2 as w	Burle	_		1 al.	2 1.2	1),,	0 1		2 1	,
۱.				-}		D=4=	<u>~//~</u>	Total -	<u> </u>	711	7	
<u>ا</u> ھ		Signature of officer or trustee		<del>-}</del>	1	Date	<u> </u>	Title	Bronoror's	dostifi		
Sign Here				/	Date		Check if		Preparer's number (See	e Signá	tu <b>re</b> on	
<u>5</u>	er's ⊳l<	Preparer's	NR.	ıt —	JUL	<b>2 3</b> 2010	self-employ	ed 🗖 🔛	page 30 of th P000545		ctions)	
<b>က</b>	Paid Preparer's Use Only	signature / lett	MARGOL	™ IS, PHIPPS &		P.C.	L	CIN S	76-03240			<del></del>
	Pre Usi	Firm's name (or yours if self-employed), address,	1400 P	<del>.</del>				EIN ►	,0 03240	,50		
		and ZIP code	HOUSTO		י טוני י		56-3009	Dhana ==	713-62	5-21	500	
		1 2 3340	1100510	11/ 1/		770	30 3009	Phone no	<u></u>	m 990		2000

### SCHEDULE D (Form 1041)

**Capital Gains and Losses** 

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

OMB No 1545-0092

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

THE BRODSKY FOUNDATION

C/O DONALD W. BRODSKY

Employer identification number

74-6089484

	(a) Description of property (Example 100 shares 7% preferred of "Z" Co)	(b) Date acquired (mo, day, yr)	(c) Date sold (mo , day, yr )	(d) Sales price	(e) Cost or other (see page 4 of instructions	the	(f) Gain or (loss) for the entire year Subtract (e) from (d)
1a							
				<u> </u>			
	<del></del>						<del></del>
b	Enter the short-term gain or (loss), if any,	, from Schedule D	-1, line 1b			1b	1,619
2	Short-term capital gain or (loss) from For	ms 4684. 6252. (	6781, and 882	4		2	
	Net short-term gain or (loss) from partne Short-term capital loss carryover Enter t					3	
5	Carryover Worksheet	noe 1a through 4	in column (f)		13	4	(
	column (3) on the back	<u> </u>	<u> </u>	<u> </u>		5	1,619
Pårt	Long-Term Capital Gains and Loss  (a) Description of property	(b) Date acquired	(c) Date sold		(e) Cost or other		(f) Gain or (loss) for the entire year
	(Example 100 shares 7% preferred of "Z" Co)	(mo, day, yr)	(mo, day, yr)	(d) Sales price	(see page 4 of instructions)		Subtract (e) from (d)
	<del>- "' " - " - " - " - " - " - " - " - "</del>						
6a							
6a							
6 a							
6a							
6 a							
6a							
	Enter the long-term gain or (loss), if any	from Schedule D-	1. line 6b				-5,617
b	Enter the long-term gain or (loss), if any,					6b	-5,617
b	Enter the long-term gain or (loss), if any, i						-5,617
b		ms 2439, 4684, 6	252, 6781, an	d 8824		6b	-5,617
b   7   188   1	ong-term capital gain or (loss) from Fori	ms 2439, 4684, 6	252, 6781, an	d 8824 estates or trusts		6b	-5,617
b   77     88   199   (	ong-term capital gain or (loss) from Fori	ms 2439, 4684, 6	252, 6781, an	d 8824		6b 7 8	-5,617
b   7   8   1   9   0   0   1   1	Long-term capital gain or (loss) from Form  Net long-term gain or (loss) from partners  Capital gain distributions  Gain from Form 4797, Part I  Long-term capital loss carryover Enter the	ms 2439, 4684, 6 ships, S corporation	ons, and other o	d 8824		6b 7 8 9	
b   7   4   8   1   9   0   0   1   1   0	ong-term capital gain or (loss) from Fori Net long-term gain or (loss) from partners Capital gain distributions	ms 2439, 4684, 6 ships, S corporation	ons, and other of	d 8824		6b 7 8	-5,617 -5,617

	dule D (Form 1041) 2009			Page
Pa	Summary of Parts I and II	(1) Beneficiaries'	(2) Estate's	(3) Total
	Caution: Read the instructions before completing this part.	(see page 5)	or trust's	
	Net short-term gain or (loss)			1,619
	Net long-term gain or (loss):			E C17
a	Total for year			-5,617
	Unrecaptured section 1250 gain (see line 18 of the wrksht) 14b			
_ C	28% rate gain			-3,998
	Total net gain or (loss). Combine lines 13 and 14a ▶ 15	F. Dord I lime (a) If line	140 and 45 antimon	
to Pa	e: If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4 (or Form 990-7 art V, and <b>do not</b> complete Part IV If line 15, column (3), is a net loss, complete Part IV an			
Pa	t IV Capital Loss Limitation		<del></del>	· · · · · · · · · · · · · · · · · · ·
16	Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, Part I, line		1 1	2 222
a	The loss on line 15, column (3) or b \$3,000	00 /or Form 000 T /or	16 (	3,000
Can	e: If the loss on line 15, column (3), is more than \$3,000, or if Form 1041, page 1, line rover <b>Worksheet</b> on page 7 of the instructions to figure your capital loss carryover	22 (or Form 990-1, III	le 34), is a loss, compl	iete the Capital Loss
-	Tax Computation Using Maximum Capital Gains Rates			···-
For	n 1041 filers. Complete this part only if both lines 14a and 15 in column (2)	are gains, or an am	ount is entered in P	art I or Part II and
	e is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is more than			
	tion: Skip this part and complete the worksheet on page 8 of the instructions if			
	other line 14b, col. (2) or line 14c, col. (2) is more than zero, or			
	oth Form 1041, line 2b(1), and Form 4952, line 4g are more than zero	an accalificad dissida		Dort I
	n <b>990-T trusts.</b> Complete this part <b>only</b> if both lines 14a and 15 are gains orm 990-T, <b>and</b> Form 990-T, line 34, is more than zero. Skip this part and c			
	er line 14b, col (2) or line 14c, col (2) is more than zero	complete the works	neet on page o or	the matructions n
		47	- I I	
17	Enter taxable income from Form 1041, line 22 (or Form 990-T, line 34)	. 17		
18	Enter the smaller of line 14a or 15 in column (2)	] - <u>.</u>	_	
	but not less than zero 18			
19	Enter the estate's or trust's qualified dividends		1 1	
	from Form 1041, line 2b(2) (or enter the qualified	7 -		
	dividends included in income in Part I of Form 990-T)		-	
20	Add lines 18 and 19	44 1		
21	If the estate or trust is filing Form 4952, enter the	1	-	
	amount from line 4g, otherwise, enter -0 ▶ 21	<b>→</b>		
22	Subtract line 21 from line 20 If zero or less, enter -0-	`		
23	Subtract line 22 from line 17 If zero or less, enter -0-	. 23		
	5 · 11 · 12 · 13 · 10 000		"	
	Enter the smaller of the amount on line 17 or \$2,300	. 24		
25	Is the amount on line 23 equal to or more than the amount on line 24?			
	Yes. Skip lines 25 and 26, go to line 27 and check the "No" box		,	
	No. Enter the amount from line 23			
26	Subtract line 25 from line 24	. 26		
27	Are the amounts on lines 22 and 26 the same?			
	Yes. Skip lines 27 thru 30, go to line 31 No. Enter the smaller of line 17 or line 22	27		
	5 1 1 20 (11 20 11 20 11 20 20 20 20 20 20 20 20 20 20 20 20 20			
28	Enter the amount from line 26 (If line 26 is blank, enter -0-)	. 28		
29	Subtract line 28 from line 27			
30	Multiply line 29 by 15% (15)		30	
31	Figure the tax on the amount on line 23 Use the 2009 Tax Rate Scheo			
	(see the Schedule Ginstructions in the instructions for Form 1041)		31	
_				
32	Add lines 30 and 31		32	
33	Figure the tax on the amount on line 17 Use the 2009 Tax Rate School	lule for Estates and	ırusts	

Schedule D (Form 1041) 2009

33

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

### **SCHEDULE D-1** (Form 1041)

**Continuation Sheet for Schedule D** 

(Form 1041)
► See instructions for Schedule D (Form 1041). ▶ Attach to Schedule D to list additional transactions for lines 1a and 6a. OMB No 1545-0092

2009

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

THE BRODSKY FOUNDATION

Employer Identification number

74-6089484

Part I Short-Term Capital Gains	(h) Data		(d) Sales nace	(e) Cost or other basis	
(a) Description of property (Example 100 sh 7% preferred of "Z" Co)	(b) Date acquired (mo , day, yr )	(c) Date sold (mo , day, yr )	(d) Sales pnce (see page 4 of the instructions)	(e) Cost or other basis (see page 4 of the instructions)	(f) Gain or (loss) Subtract (e) from (d
CEE COMMENSON D 1	MADIONE	MADIOUS	5 102	3,483.	1 61
SEE STATEMENT D-1	VARIOUS	VARIOUS	5,102.	3,483.	1,61
					<u>.</u>

1b Total. Combine the amounts in column (f) Enter here and on Schedule D, line 1b . . . . . For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

Schedule D-1 (Form 1041) 2009

1,619.

Name of estate or trust as shown on Form 1041 Do not enter name and employer identification number if shown on the other side

Employer identification number

Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year							
(a) Description of property (Example 100 sh 7% preferred of "Z" Co)	( <b>b)</b> Date acquired (mo , day, yr )	(c) Date sold (mo , day, yr )	(d) Sales price (see page 4 of the instructions)	(e) Cost or other basis (see page 4 of the instructions)	(f) Gain or (loss) Subtract (e) from (d)		
6a		III D TOUG	202 225	400 202	6 077		
SEE STATEMENT D-1	VARIOUS	VARIOUS	393,325.	400,202.	-6,877.		
RETURN OF CAPITAL	VARIOUS	VARIOUS	89.	89.			
LONG TERM CAPITAL GAIN							
DISTRIBUTION		,	1,260.	0.	1,260.		
			<u> </u>				
	<u> </u>				<del></del>		
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		-					
				}			
	<u> </u>		·				
6b Total. Combine the amounts in column	nn (f) Enter here ar	nd on Schedule D,	line 6b		-5,617.		

FORM 990-PF - PART IV

Kınd of Pr		INS AND LO	Desc	cription		P or D	Date acquired	Date sold
Gross sale price less expenses of sale	Depreciation allowed/ allowable	Cost or other basis	FMV as of 12/31/69	Adj basis as of 12/31/69	Excess of FMV over adj basis		Gain or (loss)	
5,102.		SEE STATEME PROPERTY TY 3,483.		TIES		Р	VARIOUS	VARIOUS
393,325.		SEE STATEME PROPERTY TY 400,202.		TIES		P	VARIOUS -6,877.	VARIOUS
89.		RETURN OF C		TIES		Р	VARIOUS	VARIOUS
1,260.				N DISTRIBUT TIES	ION	Р	VAR 1,260.	VA
	GG)						-3,998.	
OTAL GAIN(LO	55)							
								ı

INVESTMENTS	
CASH	
ON TEMPORARY CASH INVEST	
NO O	
INTEREST	
ı H	
PART	
990PF,	
FORM	

NET INVESTMENT INCOME	69.	74.
REVENUE AND EXPENSES PER BOOKS	69.	74.
		TOTAL
DESCRIPTION	UBS OTHER INTEREST U.S. TREASURY	

## - DIVIDENDS AND INTEREST FROM SECURITIES PART I FORM 990PF,

NET INVESTMENT INCOME	732. 121,183. 121,158. 14,183. 339.
REVENUE AND EXPENSES PER BOOKS	732. 13,183. 121,158. 14,183. 339.
DESCRIPTION	STATE OF ISRAEL BONDS - OID BANK OF NEW YORK - INT ON US SECURITIES BANK OF NEW YORK - INTEREST INCOME UBS FINANCIAL SERVICES UBS FINANCIAL SERVICES-STCG DISTR'NS BANK OF NEW YORK - BOND ACCRETION

ATTACHMENT 2

N. H. H.
CALFALICULA
1
PART T
ART T

CHARITABLE	1,752.	1,752.
ADJUSTED NET INCOME		0
NET INVESTMENT INCOME	1,753.	1,753.
REVENUE AND EXPENSES PER BOOKS	3,505.	3,505.
		TOTALS
DESCRIPTION	ACCOUNTING FEES	

PAGE 17

## FORM 990PF, PART I - OTHER PROFESSIONAL FEES

NET TMXVO CHARDAR	INCOME	6,908.	6,908.
REVENUE AND	PER BOOKS	6,908.	6,908.
			TOTALS
	DESCRIPTION	INVESTMENT FEES	

Ŋ

ATTACHMENT 5

FORM 990PF, PART I - TAXES

THE BRODSKY FOUNDATION

REVENUE	AND	EXPENSES	PER BOOKS

NET INVESTMENT INCOME

473.

1,573.

EXCISE TAX FOREIGN TAX

DESCRIPTION

TOTALS

2,046.

PAGE 19

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2:44:58 PM V 09-7 823090 2917 7/21/2010

9

### PART I - OTHER EXPENSES FORM 990PE,

REVENUE AND

PER BOOKS EXPENSES

DESCRIPTION MISC ADMIN EXPENSE

188.

TOTALS

CHARITABLE PURPOSES 18.

188.

PAGE 20

823090 2917 7/21/2010

# FORM 990

DESCRIPTION  BOOK VALUE
-------------------------

DING

990,157.

1,046,846.

1,046,846.

US OBLIGATIONS TOTAL

THROUGH BANK OF NEW YORK

990,157.

ATTACHMENT 7

FORM 990PF,

ATTACHMENT

ω

ATTACHMENT 8

- CORPORATE STOCK PART II

DESCRIPTION

THROUGH UBS FINANCIAL SERVICES

BOOK VALUE ENDING

ENDING FMV

564,480.

723,866.

564,480.

TOTALS

723,866.

BONDS
CORPORATE
ı
- II
PART II -
ART II

	ATTACHMENT 9	6
DESCRIPTION	ENDING BOOK VALUE	ENDING FMV
THROUGH BANK OF NEW YORK ISRAEL BONDS	1,256,885.	1,325,262

1,334,440.

1,266,066.

TOTALS

FORM 99QPF, PART II - OTHER LIABILITIES

ATTACHMENT 10

DESCRIPTION

ENDING BOOK VALUE

EXCISE TAX PAYABLE

-2,880.

TOTALS

-2,880.

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

					_	
EXPENSE ACCT AND OTHER ALLOWANCES	.0	O	Ö	O	Ö	.0
CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	.0	Ö	Ö	Ö	O	
COMPENSATION	·	Ö	.0	·	Ö	.0
TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	PRESIDENT 2.00	VICE-PRES 0.00	VP/SEC-TRE 0.00	VICE-PRES 0.00	DIRECTOR 0.00	DIRECTOR 0.00
NAME AND ADDRESS	RUTH W. BRODSKY 1000 LOUISIANA, SUITE 2000 HOUSTON, TX 77002	JAMES W. BRODSKY, M.D. 1000 LOUISIANA, SUITE 2000 HOUSTON, TX 77002	DONALD W. BRODSKY 1000 LOUISIANA, SUITE 2000 HOUSTON, TX 77002	ELLEN BRODSKY GABER 1000 LOUISIANA, SUITE 2000 HOUSTON, TX 77002	HARRIS ELLIOT BRODSKY 1000 LOUISIANA, SUITE 2000 HOUSTON, TX 77002	CHARLES ALEXANDER BRODSKY 1000 LOUISIANA, SUITE 2000 HOUSTON, TX 77002

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ATTACHMENT 11 (CONT'D)

- LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES	•
LELA ALEXIS BRODSKY 1000 LOUISIANA, SUITE 2000 HOUSTON, TX 77002	DIRECTOR 0.00	.0	.0	.0	
MAX EMMANUIL SCHNEIDLER BRODKSY 1000 LOUISIANA, SUITE 2000 HOUSTON, TX 77002	DIRECTOR 0.00	.0	.0	.0	
GREGOR LANG BRODSKY 1000 LOUISIANA, SUITE 2000 HOUSTON, TX 77002	DIRECTOR 0.00	• 0	· o	.0	
LEONORE ELIZABETH BRODSKY 1000 LOUISIANA, SUITE 2000 HOUSTON, TX 77002	DIRECTOR 0.00	.0	.0	.0	
NATHAN SOLMAN GABER 1000 LOUISIANA, SUITE 2000 HOUSTON, TX 77002	DIRECTOR 0.00	.0		·	
ALICIA LEONORE GABER 1000 LOUISIANA, SUITE 2000 HOUSTON, TX 77002	DIRECTOR 0.00	.0	.0	·	
	GRAND TOTALS	0	0.	0	

823090 2917

1240-020

### Brodsky Foundation-Capital Gains 1/1/09 Through 12/31/09

4/21/10

Page 1

Account	Security	Shares	Bought	Sold	Gross Proceeds	Cost Basis	Realized Gain
	SHORT TERM						
2050-UBS	VALIDUS HOLDINGS LTD	0.844	9/8/09	9/8/09	21.28	18 14	3 14
2050-UBS 2050-UBS	AIM BASIC VALUE A AIM BASIC VALUE A	231 852 26.736	12/16/08 12/11/09	12/14/09 12/14/09	4,555 89 525.36	2,946.85 518 41	1,609 04 6 95
	TOTAL SHORT TERM				5,102.53	3,483.40	1,619 13
	LONG TERM						
2020-BK OF NY	FED NATL MTG 05/16	1,300 000	7/31/06	5/12/09		130,000 00	0.00
2020-BK OF NY	FED HOME LN BKS 08/12	1,300 000	8/14/07	8/14/09	130,000 00	130,000 00	0 00
2020-BK OF NY	FED HOME LOAN MTG 09/09	1,000.000	10/5/04	9/22/09 12/14/09	100,000 00 1,427,47	100,000 00 2,661 01	0.00 -1,233 54
2050-UBS 2050-UBS	AIM BASIC VALUE A AIM BASIC VALUE A	72 645 230.627	12/19/06 12/18/07	12/14/09	4,531 82	7,227 84	-1,233 54 -2,696 02
	TOTAL LONG TERM				365,959 29	369,888.85	-3,929.56
	SUPER LONG TERM						
2050-UBS	IPC HOLDINGS LTD	10.000	11/24/99	9/8/09	75 00	0.00	75.00
2050-UBS	IPC HOLDINGS LTD	33 000	11/24/99	9/8/09	247 50	0.00	247 50
2050-UBS	IPC HOLDINGS LTD	10.000	11/24/99	9/8/09	75 00	0 00	75 00
2050-UBS	IPC HOLDINGS LTD	10.000	11/24/99	9/8/09	75.00	0 00	75 00
2050-UBS 2050-UBS	IPC HOLDINGS LTD IPC HOLDINGS LTD	201.000 51 000	11/24/99 11/24/99	9/8/09 9/8/09	1,507.50 382.50	0.00 0 00	1,507 50 382 50
2050-UBS	IPC HOLDINGS LTD	41,000	11/24/99	9/8/09	307 50	0 00	307.50
2050-UBS	IPC HOLDINGS LTD	5.000	11/24/99	9/8/09	37.50	0 00	37 50
2050-UBS	IPC HOLDINGS LTD	11.000	11/24/99	9/8/09	82.50	0.00	82 50
2050-UBS	AIM BASIC VALUE A	1.239 157	3/22/00	12/14/09	24,349 43	30.000 00	-5,650 57
2050-UBS	AIM BASIC VALUE A	10 769	12/18/00	12/14/09	211 61	292 81	-81.20
2050-UBS	AIM BASIC VALUE A	0 725	12/17/01	12/14/09	14 25	19 99	-5 74
	TOTAL SUPER LONG TERM				27,365.29	30,312 80	-2,947 51
	OVERALL TOTAL				398,427.11	403,685 05	-5,257 94

	RELATION TO		
	SUBSTANTIAL CONTRIBUTOR AND FOUNDATION	PURPOSE OF GRANT	
RECIPIENT NAME AND ADDRESS	STATUS OF RECIPIENT	OR CONTRIBUTION	AMOUNT
ATTENTION DEFICIT DISORDERS ASSOCIATION 12345 JONES ROAD #28707 HOUSTON, TX 77070	N/A PUBLIC	MEDICAL	100 00
AISHEL HOUSE 1955 UNIVERSITY BLVD HOUSTON, TX 77030	N/A PUBLIC	SOCIAL SERVICES	500 00
ALZHEIMERS DISEASE RESEARCH 22512 GATEWAY CENTRE DR CLARKSBURG, MD 20871	N/A PUBLIC	MEDICAL	375 00
AMERICAN ASSOC BEN-GURION UNIV P O BOX 70305 MILWAUKEE, WI 53217	N/A PUBLIC	RELIGIOUS	350 00
AMERICAN CANCER SOCIETY-VICTORY 6301 RICHMOND HOUSTON, TX 77057	N/A PUBLIC	MEDICAL	100 00
AMERICAN CIVIL LIBERTIES UNION FOUNDATION 125 BROAD STREET 18TH FLOOR NEW YORK, NY 10004	N/A PUBLIC	SOCIAL SERVICES	300 00
AMERICAN FRIENDS SERVICE COMMITTEE P O BOX 98015 WASHINGTON, DC 20090	N/A PUBLIC	RELIGIOUS	500 00
AMERICAN JEWISH COMMITTEE 165 EAST 56 STREET NEW YORK, NY 01026	N/A PUBLIC	RELIGIOUS	1,000 00
AMERICAN JEWISH COMMITTEE 3355 W ALABAMA #930 HOUSTON, TX 77098	N/A PUBLIC	RELIGIOUS	1,800 00
AMERICAN ORTHOPEDIC FOOT & ANKLE SOCIETY 6300 N RIVER ROAD #510 ROSEMONT, IL 60018	N/A PUBLIC	MEDICAL	1,000 00
ANTI-DEFAMATION LEAGUE 823 UNITED NATIONAL PLAZA NEW YORK, NY 10017-3560	N/A PUBLIC	RELIGIOUS	500 00
ARMY EMERGENCY RELIEF 200 STOVAL ST, ROOM 5-N-13 ALEXANDRIA, VA 22332	N/A PUBLIC	SOCIAL SERVICES	1,000 00
C A M E R A P O BOX 35040 BOSTON, MA 02135-9940	N/A PUBLIC	EDUCATIONAL	500 00
CAMP JOUNG JUDEA 9647 HILLCROFT HOUSTON, TX 77096	N/A PUBLIC	RELIGIOUS	250 00

RECIPIENT NAME AND ADDRESS	RELATION TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
CANCARE OF HOUSTON INC 9575 KATY FREEWAY #428 HOUSTON, TX 77024	N/A PUBLIC	SOCIAL SERVICES	100 00
CHILD BUILDERS 7000 REGENCY SQUARE #230 HOUSTON, TX 77036	N/A PUBLIC	SOCIAL SERVICES	5,000 00
COLLABORATIVE FOR CHILDREN 3800 BUFFALO SPEEDWAY #300 HOUSTON, TX 77098	N/A PUBLIC	SOCIAL SERVICES	700 00
CONGREGATION BETH ISRAEL 5600 NORTH BRAESWOOD BLVD HOUSTON, TX 77096	N/A PUBLIC	RELIGIOUS	5,775 00
CONGREGATION BETH YESHURUN 4525 BEECHNUT HOUSTON, TX 77096	N/A PUBLIC	RELIGIOUS	100 00
CRISIS HOTLINE OF HOUSTON 3701 KIRBY #540 HOUSTON, TX 77098	N/A PUBLIC	SOCIAL SERVICES	500 00
DOCTORS WITHOUT BORDERS P O BOX 5022 HAGERSTOWN, MD 21741	N/A PUBLIC	MEDICAL	250 00
DRESS FOR SUCCESS HOUSTON 3915 DACOMA #A HOUSTON, TX 77092	N/A PUBLIC	SOCIAL SERVICES	100 00
ENVIRONMENTAL DEFENSE FUND 1875 CONNECTICUT AVE NW WASHINGTON, DC 20009	N/A PUBLIC	SOCAIL SERVICES	1,000 00
FISHER HOUSE FOUNDATION 2002 HOLCOMBE HOUSTON, TX 77030	N/A PUBLIC	MEDICAL	1,000 00
FOUNDATION FOR FIGHTING BLINDNESS 11435 CRONHILL DR OWINGS MILLS, MD 21117-2220	N/A PUBLIC	MEDICAL	500 00
FOUNDATION FOR THE RETARDED P O BO X130564 HOUSTON, TX 77219	N/A PUBLIC	SOCIAL SERVICES	500 00
FRIENDS OF KUHF UNIVERSITY OF HOUSTON P O BOX 988 HOUSTON, TX 77001-0988	N/A PUBLIC	CULTURAL	500 00

### 74-6089484

RECIPIENT NAME AND ADDRESS	RELATION TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
HADASSAH HOUSTON CHAPTER OF HADASSAH 9647 HILLCROFT HOUSTON, TX 77096	N/A PUBLIC	RELIGIOUS	385 00
HARVARD COLLEGE FUND 124 MOUNT AUBURN STREET CAMBRIDGE, MD 01238	N/A PUBLIC	EDUCATIONAL	500 00
HEIFER INTERNATIONAL P O BOX 1692 MERRIFIELD, VA 22116	N/A PUBLIC	SOCIAL SERVICES	500 00
HELEN G SIMON HILLEL CENTER 703 E THIRD STREET BLOOMINGTON, IN 47401	N/A PUBLIC	RELIGIOUS	(1,000 00)
HENRY S JACOBS CAMP P O BOX 327 UTICA, MS 39175	N/A PUBLIC	RELIGIOUS	(1,000 00)
HILLEL THE FOUNDATION FOR JEWIS CAMPUS P O BOX 92994 WASHINGTON, DC 20090-2994	N/A PUBLIC	RELIGIOUS	500 00
HOLOCAUST EDUCATION MUSEUM 5401 CAROLINE HOUSTON, TX 77004	N/A PUBLIC	CULTURAL	170 00
HOUSTON ACHIEVEMENT PLACE 245 WEST 17th STREET HOUSTON TX 77008	N/A PUBLIC	SOCIAL SERVICES	400 00
HOUSTON AREA WOMEN'S CENTER 1010 WAUGH DRIVE HOUSTON, TX 77019-9891	N/A PUBLIC	SOCIAL SERVICES	1,000 00
HOUSTON BALLET P O BOX 130487 HOUSTON, TX 77219-9983	N/A PUBLIC	CULTURAL	3,100 00
HOUSTON FOOD BANK 3811 EASTEX FREEWAY HOUSTON, TX 77026	N/A PUBLIC	SOCIAL SERVICES	300 00
HOUSTON HOSPICE & PALLIATIVE CARE SYSTEM 1905 HOLCOMBE HOUSTON, TX 77030	N/A PUBLIC	SOCIAL SERVICES	550 00
HOUSTON PBS P O BOX 200090 HOUSTON, TX 77216-0090	N/A PUBLIC	EDUCATIONAL	1,000 00
HOUSTON SYMPHONY 615 LOUISIANA ST HOUSTON, TX 77002-9967	N/A PUBLIC	CULTURAL	10,280 00

	RELATION TO		
DECIDIENT NAME AND ADDDESS	SUBSTANTIAL CONTRIBUTOR AND FOUNDATION	PURPOSE OF GRANT	AMOUNT
RECIPIENT NAME AND ADDRESS	STATUS OF RECIPIENT	OR CONTRIBUTION	AMOUNT
INTERFAITH MINISTRIES 3217 MONTROSE BLVD HOUSTON, TX 77006	N/A PUBLIC	SOCIAL SERVICES	250 00
JCC ASSOCIATION 15 EAST 26TH STREET NEW YORK, NY 10010-1579	N/A PUBLIC	RELIGIOUS	4,000 00
JCC PATRONS OF THE ARTS 5601 SOUTH BRAESWOOD HOUSTON, TX 77096-3999	N/A PUBLIC	CULUTRAL	2,375 00
JEWISH CEMETARY ASSOC OF GREATER BALTIMORE 101 WEST MOUNT ROYAL AVE BALTIMORE, MD 21201	N/A PUBLIC	SOCIAL SERVICES	100 00
JEWISH CHILDREN'S REGIONAL SERVICE P O BOX 15225 NEW ORLEANS, LA 70175-5225	N/A PUBLIC	SOCIAL SERVICES	700 00
JEWISH COMMUNITY CENTER OF HOUSTON 5601 S BRAESWOOD HOUSTON, TEXAS 77096-3999	N/A PUBLIC	RELIGIOUS	30,775 00
JEWISH FAMILY SERVICE - HOUSTON P O BOX 20548 HOUSTON, TX 77225	N/A PUBLIC	SOCIAL SERVICES	1,304 00
JEWISH FEDERATION OF GREATER DALLAS 7800 NORTHAVEN RD, SUITE A DALLAS TX 75230	N/A PUBLIC	RELIGIOUS	3,000 00
JEWISH FEDERATION OF GREATER HOUSTON P O BOX 200568 HOUSTON, TX 77216-0568	N/A PUBLIC	RELIGIOUS	39,925 00
JUVENILE DIABETES RESEARCH FOUNDATION 2425 FOUNTAIN VIEW #280 HOUSTON, TX 77057	N/A PUBLIC	MEDICAL	500 00
KELSEY RESEARCH FOUNDATION 5615 KIRBY DR #660 HOUSTON, TX 77005	N/A PUBLIC	MEDICAL	100 00
KINKAID SCHOOL P O BOX 297323 HOUSTON, TEXAS 77297	N/A PUBLIC	EDUCATIONAL	1,200 00
M A D D 511 EAST JOHN CARPENTER FWY #700 IRVING, TX 75062	N/A PUBLIC	EDUCATIONAL	450 00
MACULAR DEGENERATION RESEARCH 22512 GATEWAY CENTER DR CLARKSBURG, MD 20871	N/A PUBLIC	MEDICAL	300 00

	RELATION TO			
	SUBSTANTIAL CONTRIBUTOR AND FOUNDATION	PURPOSE OF GRANT		
RECIPIENT NAME AND ADDRESS	STATUS OF RECIPIENT	OR CONTRIBUTION	AMOUNT	
MARCH OF DIMES	N/A	MEDICAL	50 00	
P O BOX 2547 DECATUR, IL 62525	PUBLIC			
MEALS ON WHEELS 3217 MONTROSE BLVD HOUSTON, TX 77006	N/A PUBLIC	SOCIAL SERVICES	250 00	
MEDIC ALERT FOUNDATION P O BOX 819012 TRUOCK, CA 95381	N/A PUBLIC	MEDICAL	50 00	
MENTAL HEALTH ASSOCIATION 2211 NORFOLK SUITE 810 HOUSTON, TX 77098	N/A . PUBLIC	SOCIAL SERVICES	1,000 00	
MICHEY LELAND KIBBUTZ FOUNDATION 1400 POST OAK BLVD #500 HOUSTON, TX 77056	N/A PUBLIC	EDUCATIONAL	1,000 00	
MUSEUM OF FINE ARTS, HOUSTON P O BOX 4606 HOUSTON, TX 77210-9865	N/A PUBLIC	CULTURAL	200 00	
NATIONAL COALITION CANCER SURVIVORSHIP 1010 WAYNE AVE #770 SILVER SPRING, MD 20910-5600	N/A PUBLIC	MEDICAL	250 00	
NATIONAL COUNCIL OF JEWISH WOMEN 53 WEST 23RD STREET 6TH FLOOR NEW YORK, NY 10010-4204	N/A PUBLIC	RELIGIOUS	500 00	
NATIONAL MULTIPLE SCLEROSIS SOCIETY P O BOX 1937 HOUSTON, TX 77251-1937	N/A PUBLIC	MEDICAL	650 00	
NATIONAL OSTEOPOROSIS FOUNDATION 1232 22ND STREET NW WASHINGTON, DC 20037	N/A PUBLIC	MEDICAL	400 00	
NATIONAL PARKINSON FOUNDATION P O BOX 9254 UNIONDALE, NY 11555	N/A PUBLIC	MEDICAL	200 00	
PLANNED PARENTHOOD FEDERATION 434 WEST 33RD STREET NEW YORK, NY 10001	N/A PUBLIC	SOCIAL SERVICES	200 00	
PLANNED PARENTHOOD OF HOUSTON & SE TEXAS 3601 FANNIN HOUSTON TX 77004-3998	N/A PUBLIC	SOCIAL SERVICES	5,490 00	
PROGRESSIVE FORUM P O BOX 1722 HOUSTON, TX 77402	N/A PUBLIC	EDUCATIONAL	1,000 00	

	RELATION TO		
	SUBSTANTIAL CONTRIBUTOR AND FOUNDATION	PURPOSE OF GRANT	
RECIPIENT NAME AND ADDRESS	STATUS OF RECIPIENT	OR CONTRIBUTION	AMOUNT
RECEIPE FOR SUCCESS P O BOX 56405 HOUSTON, TX 77256	N/A PUBLIC	SOCIAL SERVICES	100 00
RED RIBBON FOUNDATION 270 GREENWICH AVE #2 GREENWICH, CT 06830	N/A PUBLIC	SOCIAL SERVICES	50 00
S E A R C H P O BOX 7969 HOUSTON, TX 77270	N/A PUBLIC	SOCIAL SERVICES	5,000 00
SCOTT CARTER FOUNDATION P O BOX 700448 TULSA, OK 74170	N/A PUBLIC	MEDICAL	1,000 00
SEVEN ACRES JEWISH GERIATRIC CENTER 6200 NORTH BRAESWOOD HOUSTON, TX 77074	N/A PUBLIC	SOCIAL SERVICES	1,350 00
SHELTON SCHOOL & EVALUATION CENTER 15720 HILLCREST ROAD DALLAS, TX 75248	N/A PUBLIC	EDUCATIONAL	3,000 00
SPECIAL OLYMPICS P O BOX 143806 AUSTIN, TX 78714	N/A PUBLIC	SOCIAL SERVICES	100 00
ST JUDE CHILDREN'S RESEARCH HOSPITAL P O BOX 50 MEMPHIS, TN 38101-9929	N/A PUBLIC	MEDICAL	1,150 00
ST LUKE'S EPISCOPAL HOSPITAL P O BOX 20269 HOUSTON, TX 77225	N/A PUBLIC	MEDICAL	100 00
ST LUKE'S UNITED METHODIST CHURCH 3471 WESTHEIMER ROAD HOUSTON, TX 77027	N/A PUBLIC	RELIGIOUS	50 00
TEXAS CHILDREN'S HOSPITAL P O BOX 300630 MC4-4483 HOUSTON, TX 77030	N/A PUBLIC	MEDICAL	100 00
TEXAS FREEDOM NETWORK EDUCATION FUND P O BOX 1624 AUSTIN, TX78767	N/A PUBLIC	SOCIAL SERVICES	500 00
THE MENIL COLLECTION 1515 BRANARD HOUSTON, TX 77006	N/A PUBLIC	CULTURAL	100 00
THE 100 CLUB INC 1233 WEST LOOP SOUTH #1250 HOUSTON, TX 77027	N/A PUBLIC	SOCIAL SERVICES	100 00

	RELATION TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION	PURPOSE OF GRANT	
RECIPIENT NAME AND ADDRESS	STATUS OF RECIPIENT	OR CONTRIBUTION	AMOUN
THE RIVER PEFORMING & VISUAL ARTS CENTER 1745 WEST GRAY HOUSTON, TX 77019	N/A PUBLIC	CULTURAL	250 00
THE WOMEN'S FUND FOR HER 5353 W ALABAMA #615 HOUSTON, TX 77056	N/A PUBLIC	SOCIAL SERVICES	100 00
UNICEF 333 EAST 38TH STREET NEW YORK, NY 10016	N/A PUBLIC	SOCIAL SERVICES	1,100 00
UNION FOR REFORM JUDAISM 633 THRID AVE NEW YORK, NY 10017-6778	N/A PUBLIC	RELIGIOUS	1,000 00
UNITED WAY P O BOX 924507 HOUSTON, TX 77292	N/A PUBLIC	SOCIAL SERVICES	3,000 00
UNIVERSITY OF HOUSTON GRADUATE SCHOOL OF SOCIAL WORK 237 SOCIAL WORK BUILDING HOUSTON, TX 77204-4013	N/A PUBLIC	EDUCATIONAL	5,000 00
VITA-LIVING FOUNDATION P O BOX 773073 HOUSTON, TX 77215-3073	N/A PUBLIC	SOCIAL SERVICES	250 00
VOGEL ALCOVE 7557 RAMBLER #262 DALLAS, TX 75231	N/A PUBLIC	SOCIAL SERVICES	1,000 00
WOMEN FOR WOMEN INTERNATIONAL P O BOX 9224 CENTRAL ISLIP, NY 11722	N/A PUBLIC	SOCIAL SERVICES	300 00
WOMEN'S RESOURCE OF GREATER HOUSTON 2200 POST OAK BLVD #50 HOUSTON, TX 77056	N/A PUBLIC	SOCIAL SERVICES	1,000 00
WRITERS IN THE SCHOOLS 1523 WEST MAIN STREET HOUSTON, TX 77006	N/A PUBLIC	EDUCATIONAL	650 00
YES PREP PUBLIC SCHOOLS 5201 BONHOMME ROAD #168-N HOUSTON, TX 77036	N/A PUBLIC	EDUCATIONAL	500 00
			164,054 00

### Form 8868

(Rev Apřil 2009)

### Application for Extension of Time To File an Exempt Organization Return

OMB	No	1545-1	70
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Internal Revenue S			File a separat	e application for each	return.			
		Automatic 3-Mon	th Extension, comple	te only Part I and	check this box			<b>→</b> X
			utomatic) 3-Month E eady been granted an					68
Part I Auto	matic 3-	Month Extension	n of Time. Only sub	nıt orıginal (no co	pies needed)			
			and requesting an aut			this box and c	omplete	
Part I only								▶ □
All other corp time to file inco			filers), partnerships, i	REMICs, and trusts	s must use For	m 7004 to i	request an	extension of
one of the re electronically returns, or a c	turns note if (1) you omposite	ed below (6 mont want the addition or consolidated Fr	n electronically file Fihs for a corporation al (not automatic) 3-iom 990-T Instead, yoing of this form, visit w	required to file For month extension or a must submit the	orm 990-T) He r (2) you file Fe fully completed	owever, you orms 990-BL, d and signed	cannot file 6069, or 8 page 2 (Par	Form 8868 8870, group t II) of Form
Type or	Name of	Exempt Organization	THE BRODSKY F	OUNDATION		Employ	er identificati	ion number
print	C/0	DONALD W. E	BRODSKY			74-	-6089 <u>4</u> 84	
File by the	Number,	street, and room or s	uite no If a P O box, see	instructions				
due date for filing your	100	00 LOUISIANA,	SUITE 2000					
return See	-	n or post office, state ISTON, TX 770	e, and ZIP code For a fore	eign address, see instru	uctions			
Check type o			parate application for	each return)				
Form 990		De med (me a se	Form 990-T (corporation			Form 4720		
Form 990			Form 990-T (sec 401)	•		Form 5227		
Form 990			Form 990-T (trust othe			Form 6069		
X Form 990			Form 1041-A			Form 8870		
		13 751-1600	JD W. BRODSKY	FAX No ▶				
_			ce or place of busines			ox		▶ ☐
		ck this box . • L	•	ne group, check this	s box · . ▶	and attach	a list with	the
UIIII	ganızatıor calendar	year 2009 or	(6 months for a to file the exempt of	ngamzation return	TOT (TIC Organiz	Form 990- ation named	T) extensio above The	n of time extension is
2 If this tax	year is fo	r less than 12 mon	ths, check reason	Initial return	Final return	Chang	je in accoun	ting period
b If this app made Inc	dable cred olication is clude any p Due. Subt	its See instruction is for Form 990-PF prior year overpayn ract line 3b from I	., 990-PF, 990-T, 47: s or 990-T, enter any ment allowed as a cred ine 3a Include your p by using EFTPS (El	efundable credits a it payment with this f	and estimated t	ax payments	3a \$	2,850. 1,600.
Caution. If you	are going	to make an electr	onic fund withdrawal v	rith this Form 8868	, see Form 845	3-EO and Fo	<del></del>	
for payment ins								
For Privacy Ad	t and Pap	erwork Reduction	Act Notice, see Instr	uctions.			Form <b>8868</b>	(Rev 4-2009)