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Form **990-PF**Department of the Treasury  
Internal Revenue Service**Return of Private Foundation**  
or Section 4947(a)(1) Nonexempt Charitable Trust  
Treated as a Private Foundation

OMB No 1545-0052

**2009**

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

For calendar year 2009, or tax year beginning

04/01, 2009, and ending

03/31, 2010

G Check all that apply

☐ Initial return☐ Initial return of a former public charity☐ Final return☐ Amended return☐ Address change☐ Name changeUse the IRS  
label.  
Otherwise,  
print  
or type  
See Specific  
Instructions

Name of foundation

J. IRA &amp; NICKI HARRIS FAMILY FOUNDATION, INC.

A Employer identification number

26-0818520

Number and street (or P.O. box number if mail is not delivered to street address)

C/O BCRS ASSOCIATES, LLC

Room/suite

100 WALL STREET - 11TH FLOOR

City or town, state, and ZIP code

NEW YORK, NY 10005

B Telephone number (see page 10 of the instructions)

(212) 440-0800

C If exemption application is  
pending check here

D 1 Foreign organizations check here

2 Foreign organizations meeting the  
85% test, check here and attach  
computationE If private foundation status was terminated  
under section 507(b)(1)(A) check hereF If the foundation is in a 60-month termination  
under section 507(b)(1)(B), check here

H Check type of organization

☒ Section 501(c)(3) exempt private foundation☐ Section 4947(a)(1) nonexempt charitable trust☐ Other taxable private foundationI Fair market value of all assets at end  
of year (from Part II, col (c), line  
16) \$

26,831,938.

J Accounting method

☒ Cash☐ Accrual☐ Other (specify)

(Part I, column (d) must be on cash basis)

**Part I Analysis of Revenue and Expenses** (The  
total of amounts in columns (b), (c), and (d)  
may not necessarily equal the amounts in  
column (a) (see page 11 of the instructions))

	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
1 Contributions, gifts, grants, etc., received (attach schedule)	NONE		N/A	
2 Check <input type="checkbox"/> if the foundation is not required to attach Sch. B.				
3 Interest on savings and temporary cash investments	4,351.	4,351.	0.	ATCH 1
4 Dividends and interest from securities	39,361.	39,361.	0.	ATCH 2
5a Gross rents				
b Net rental income or (loss)				
6a Net gain or (loss) from sale of assets not on line 10	-220,629.			
b Gross sales price for all assets on line 6a	1,732,152.			
7 Capital gain net income (from Part IV, line 2)		NONE		
8 Net short-term capital gain				
9 Income modifications				
10a Gross sales less returns and allowances				
b Less Cost of goods sold				
c Gross profit or (loss) (attach schedule)				
11 Other income (attach schedule)	-5.	-5.	0.	ATCH 3
12 Total. Add lines 1 through 11	-176,922.	43,707.	0.	
13 Compensation of officers, directors, trustees, etc.	100,000.	0.	0.	100,000.
14 Other employee salaries and wages				
15 Pension plans, employee benefits				
16a Legal fees (attach schedule) ATCH 4	18,169.	0.	0.	18,169.
b Accounting fees (attach schedule) ATCH 5	26,000.	13,000.	0.	13,000.
c Other professional fees (attach schedule) *	21,737.	21,737.	0.	0.
17 Interest				
18 Taxes (attach schedule) (see page 14 of the instructions)				
19 Depreciation (attach schedule) and depletion				
20 Occupancy				
21 Travel, conferences, and meetings				
22 Printing and publications				
23 Other expenses (attach schedule) ATCH 7	42,519.	41,778.	0.	741.
24 Total operating and administrative expenses. Add lines 13 through 23	208,425.	76,515.	0.	131,910.
25 Contributions, gifts, grants paid	3,262,975.			3,262,975.
26 Total expenses and disbursements. Add lines 24 and 25	3,471,400.	76,515.	0.	3,394,885.
27 Subtract line 26 from line 12				
a Excess of revenue over expenses and disbursements	-3,648,322.			
b Net investment income (if negative, enter -0-)		-0-		
c Adjusted net income (if negative, enter -0-)			-00.	

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

\* ATCH 6 JSA

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SCANNED DEC 17 2010  
Operating and Administrative Expenses  
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P 12

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions.)		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value		
Assets	1	Cash - non-interest-bearing		403,133.	0.	0.
	2	Savings and temporary cash investments		5,366,300.	627,049.	627,049.
	3	Accounts receivable <span style="float:right">500,000.</span>			*	*
		Less: allowance for doubtful accounts		0.	500,000.	500,000.
	4	Pledges receivable				
		Less: allowance for doubtful accounts				
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see page 16 of the instructions)				
	7	Other notes and loans receivable (attach schedule)				
		Less: allowance for doubtful accounts				
	8	Inventories for sale or use				
	9	Prepaid expenses and deferred charges				
	10 a	Investments - U.S. and state government obligations (attach schedule)				
	b	Investments - corporate stock (attach schedule) <span style="float:right">ATCH 8.</span>		1,594,762.	3,391,388.	3,238,375.
	c	Investments - corporate bonds (attach schedule)				
	Liabilities	11	Investments - land, buildings, and equipment basis <span style="float:right">Less: accumulated depreciation (attach schedule)</span>			
12		Investments - mortgage loans				
13		Investments - other (attach schedule)				
14		Land, buildings, and equipment basis <span style="float:right">Less: accumulated depreciation (attach schedule)</span>				
15		Other assets (describe <span style="float:right">ATCH 9</span> )		15,618,373.	15,315,811.	22,466,514.
16		Total assets (to be completed by all filers - see the instructions Also, see page 1, item I)		22,982,568.	19,834,248.	26,831,938.
17		Accounts payable and accrued expenses				
18		Grants payable				
19		Deferred revenue				
20		Loans from officers, directors, trustees, and other disqualified persons				
Net Assets or Fund Balances	21	Mortgages and other notes payable (attach schedule)				
	22	Other liabilities (describe <span style="float:right">ATCH 9</span> )				
	23	Total liabilities (add lines 17 through 22)				
	Foundations that follow SFAS 117, check here <input type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.					
	24	Unrestricted				
	25	Temporarily restricted				
	26	Permanently restricted				
	Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. <input checked="" type="checkbox"/>					
	27	Capital stock, trust principal, or current funds		22,982,568.	19,834,248.	
	28	Paid-in or capital surplus, or land, bldg, and equipment fund				
29	Retained earnings, accumulated income, endowment, or other funds		0.	0.		
30	Total net assets or fund balances (see page 17 of the instructions)		22,982,568.	19,834,248.		
31	Total liabilities and net assets/fund balances (see page 17 of the instructions)		22,982,568.	19,834,248.		

## Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	22,982,568.
2	Enter amount from Part I, line 27a	2	-3,648,322.
3	Other increases not included in line 2 (itemize) <span style="float:right">ATTACHMENT 10</span>	3	500,002.
4	Add lines 1, 2, and 3	4	19,834,248.
5	Decreases not included in line 2 (itemize)	5	0.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	19,834,248.

\* \$ 500,000 RECEIVABLE (DUE FROM SIRC)

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**Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs. MLC Co.)			(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
<b>1a</b> SEE PART IV SCHEDULE					
<b>b</b>					
<b>c</b>					
<b>d</b>					
<b>e</b>					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)		
<b>a</b>					
<b>b</b>					
<b>c</b>					
<b>d</b>					
<b>e</b>					
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69					
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))		
<b>a</b>					
<b>b</b>					
<b>c</b>					
<b>d</b>					
<b>e</b>					
<b>2</b> Capital gain net income or (net capital loss) . . . . .			<b>2</b>	-220,629.	
<div style="display: flex; align-items: center;"> <div style="border-left: 1px solid black; padding-left: 5px;">           If gain, also enter in Part I, line 7            If (loss), enter -0- in Part I, line 7         </div> </div>					
<b>3</b> Net short-term capital gain or (loss) as defined in sections 1222(5) and (6)			<b>3</b>	NONE	
<div style="display: flex; align-items: center;"> <div style="border-left: 1px solid black; padding-left: 5px;">           If gain, also enter in Part I, line 8, column (c) (see pages 13 and 17 of the instructions)            If (loss), enter -0- in Part I, line 8         </div> </div>					

**Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income**

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? . . . . ☐ Yes ☒ No

If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

**1** Enter the appropriate amount in each column for each year, see page 18 of the instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of nonchattable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2008	1,502,892.	28,975,473.	0.051868
2007 *	1,721,576.	38,487,905.	0.044730
2006	2,243,393.	38,021,177.	0.059004
2005	1,858,158.	38,062,902.	0.048818
2004	1,920,728.	29,863,886.	0.064316
<b>2</b> Total of line 1, column (d) . . . . .			<b>2</b> 0.268736
<b>3</b> Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years . . . . .			<b>3</b> 0.053747
<b>4</b> Enter the net value of nonchattable-use assets for 2009 from Part X, line 5 . . . . .			<b>4</b> 26,388,515.
<b>5</b> Multiply line 4 by line 3 . . . . .			<b>5</b> 1,418,304.
<b>6</b> Enter 1% of net investment income (1% of Part I, line 27b) . . . . .			<b>6</b>
<b>7</b> Add lines 5 and 6 . . . . .			<b>7</b> 1,418,304.
<b>8</b> Enter qualifying distributions from Part XII, line 4 . . . . .			<b>8</b> 3,394,885.

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions on page 18.

**Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of the instructions)**

1a	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of ruling letter if necessary - see instructions)	1	0.
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b		
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	
3	Add lines 1 and 2	3	0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	0.
5	<b>Tax based on investment income.</b> Subtract line 4 from line 3. If zero or less, enter -0-	5	0.
6	<b>Credits/Payments</b>		
a	2009 estimated tax payments and 2008 overpayment credited to 2009	6a	10,000.
b	Exempt foreign organizations-tax withheld at source	6b	0.
c	Tax paid with application for extension of time to file (Form 8868)	6c	0.
d	Backup withholding erroneously withheld	6d	
7	<b>Total credits and payments.</b> Add lines 6a through 6d	7	10,000.
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	8	
9	<b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b>	9	
10	<b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b>	10	10,000.
11	Enter the amount of line 10 to be <b>Credited to 2010 estimated tax</b> 500. <b>Refunded</b>	11	9,500.

**Part VII-A Statements Regarding Activities**

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		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)? 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		X
c Did the foundation file Form 1120-POL for this year?		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation \$ 0. (2) On foundation managers \$ 0.		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers \$ 0.		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities		X
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	X	
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		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? If "Yes," attach the statement required by General Instruction T		X
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?	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	X	
8a Enter the states to which the foundation reports or with which it is registered (see page 19 of the instructions) FL,		
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	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 27)? If "Yes," complete Part XIV		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		X

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**Part VII-A Statements Regarding Activities (continued)**

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see page 20 of the instructions)	11		X
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
Website address <input type="checkbox"/> N/A				
14	The books are in care of <input type="checkbox"/> BCRS ASSOCIATES, LLC Telephone no <input type="checkbox"/> 212-440-0800			
Located at <input type="checkbox"/> 100 WALL STREET - 11TH FLOOR NEW YORK, NY ZIP + 4 <input type="checkbox"/> 10005				
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year <input type="checkbox"/> 15			

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required**

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

	Yes	No
1a During the year did the foundation (either directly or indirectly)		
(1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)? <input type="checkbox"/> Organizations relying on a current notice regarding disaster assistance check here <input type="checkbox"/>	1b	X
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2009?	1c	X
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))		
a At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2009? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years <input type="checkbox"/>		
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see page 20 of the instructions)	2b	X
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here <input type="checkbox"/>		
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2009)	3b	X
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	X
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2009?	4b	X

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**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)**

**5a** During the year did the foundation pay or incur any amount to

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? ☐ Yes ☒ No

(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? ☐ Yes ☒ No

(3) Provide a grant to an individual for travel, study, or other similar purposes? ☐ Yes ☒ No

(4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see page 22 of the instructions) ☐ Yes ☒ No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? ☒ Yes ☐ No

**b** If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see page 22 of the instructions)? ☐ Yes ☒ No  
Organizations relying on a current notice regarding disaster assistance check here ☐

**c** If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? ☒ Yes ☐ No  
If "Yes," attach the statement required by Regulations section 53.4945-5(d)

**6a** Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☒ No

**b** Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ☐ Yes ☒ No  
If "Yes" to 6b, file Form 8870

**7a** At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? ☐ Yes ☒ No

**b** If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? ☐ Yes ☒ No

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors****1 List all officers, directors, trustees, foundation managers and their compensation (see page 22 of the instructions).**

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
ATTACHMENT 11		100,000.	0.	0.

**2 Compensation of five highest-paid employees (other than those included on line 1 - see page 23 of the instructions). If none, enter "NONE."**

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE		0.	0.	0.

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

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**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors** (continued)**3 Five highest-paid independent contractors for professional services** (see page 23 of the instructions). If none, enter "NONE."

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		0.

Total number of others receiving over \$50,000 for professional services . . . . . NONE

**Part IX-A Summary of Direct Charitable Activities**

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 PLEASE NOTE, THE FOUNDATION IS NOT INVOLVED IN ANY DIRECT CHARITABLE ACTIVITIES. ITS PRIMARY PURPOSE IS TO SUPPORT, BY CONTRIBUTIONS, OTHER ORGANIZATIONS EXEMPT UNDER INTERNAL	0.
2 REVENUE CODE SECTION 501(C)(3).	
3	
4	

**Part IX-B Summary of Program-Related Investments** (see page 23 of the instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 N/A	0.
2 N/A	0.
All other program-related investments See page 24 of the instructions	
3 N/A	0.
<b>Total. Add lines 1 through 3</b>	0.

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**Part X Minimum Investment Return** (All domestic foundations must complete this part. Foreign foundations, see page 24 of the instructions.)

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
<b>a</b>	Average monthly fair market value of securities	<b>1a</b>	2,684,118.
<b>b</b>	Average of monthly cash balances	<b>1b</b>	2,954,129.
<b>c</b>	Fair market value of all other assets (see page 24 of the instructions)	<b>1c</b>	21,152,124.
<b>d</b>	<b>Total</b> (add lines 1a, b, and c)	<b>1d</b>	26,790,371.
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	<b>1e</b>	
<b>2</b>	Acquisition indebtedness applicable to line 1 assets	<b>2</b>	0.
<b>3</b>	Subtract line 2 from line 1d	<b>3</b>	26,790,371.
<b>4</b>	Cash deemed held for charitable activities. Enter 1 1/2 % of line 3 (for greater amount, see page 25 of the instructions)	<b>4</b>	401,856.
<b>5</b>	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4	<b>5</b>	26,388,515.
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5	<b>6</b>	1,319,426.

**Part XI Distributable Amount** (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

<b>1</b>	Minimum investment return from Part X, line 6	<b>1</b>	1,319,426.
<b>2a</b>	Tax on investment income for 2009 from Part VI, line 5	<b>2a</b>	0.
<b>b</b>	Income tax for 2009 (This does not include the tax from Part VI)	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b	<b>2c</b>	0.
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1	<b>3</b>	1,319,426.
<b>4</b>	Recoveries of amounts treated as qualifying distributions	<b>4</b>	
<b>5</b>	Add lines 3 and 4	<b>5</b>	1,319,426.
<b>6</b>	Deduction from distributable amount (see page 25 of the instructions)	<b>6</b>	
<b>7</b>	<b>Distributable amount as adjusted.</b> Subtract line 6 from line 5. Enter here and on Part XIII, line 1	<b>7</b>	1,319,426.

**Part XII Qualifying Distributions** (see page 25 of the instructions)

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
<b>a</b>	Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26	<b>1a</b>	3,394,885.
<b>b</b>	Program-related investments - total from Part IX-B	<b>1b</b>	0.
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	<b>2</b>	0.
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the		
<b>a</b>	Suitability test (prior IRS approval required)	<b>3a</b>	0.
<b>b</b>	Cash distribution test (attach the required schedule)	<b>3b</b>	0.
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	<b>4</b>	3,394,885.
<b>5</b>	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see page 26 of the instructions)	<b>5</b>	
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4	<b>6</b>	3,394,885.

**Note:** The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

**Part XIII Undistributed Income** (see page 26 of the instructions)

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI, line 7 . . . . .				1,319,426.
2 Undistributed income, if any, as of the end of 2009				
a Enter amount for 2008 only . . . . .			1,191,812.*	
b Total for prior years 20____, 20____, 20____				
3 Excess distributions carryover, if any, to 2009				
a From 2004 . . . . .	0.			
b From 2005 . . . . .	0.			
c From 2006 . . . . .	0.			
d From 2007 . . . . .	0.			
e From 2008 . . . . .	36,613.			
f Total of lines 3a through e . . . . .	36,613.			
4 Qualifying distributions for 2009 from Part XII, line 4 ▶ \$ 3,394,885.				
a Applied to 2008, but not more than line 2a . . . . .			1,191,812.	
b Applied to undistributed income of prior years (Election required - see page 26 of the instructions) . . . . .				
c Treated as distributions out of corpus (Election required - see page 26 of the instructions) . . . . .				
d Applied to 2009 distributable amount . . . . .				1,319,426.
e Remaining amount distributed out of corpus . . . . .	883,647.			
5 Excess distributions carryover applied to 2009 . . . . . (If an amount appears in column (d), the same amount must be shown in column (a) )				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5 . . . . .	920,260.			
b Prior years' undistributed income Subtract line 4b from line 2b . . . . .				
c 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 . . . . .				
e Undistributed income for 2008 Subtract line 4a from line 2a Taxable amount - see page 27 of the instructions . . . . .			NONE	
f Undistributed income for 2009 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2010 . . . . .				NONE
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see page 27 of the instructions) . . . . .	0.			
8 Excess distributions carryover from 2004 not applied on line 5 or line 7 (see page 27 of the instructions) . . . . .	0.			
9 Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a . . . . .	920,260.			
10 Analysis of line 9				
a Excess from 2005 . . . . .	0.			
b Excess from 2006 . . . . .	0.			
c Excess from 2007 . . . . .	0.			
d Excess from 2008 . . . . .	36,613.			
e Excess from 2009 . . . . .	883,647.			

\* SEE STMT B

**Part XIV Private Operating Foundations** (see page 27 of the instructions and Part VII-A, question 9) NOT APPLICABLE

1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2009, enter the date of the ruling . . . . .

b Check box to indicate whether the foundation is a private operating foundation described in section

4942(j)(3) or

4942(j)(5)

	Tax year	Prior 3 years			(e) Total
	(a) 2009	(b) 2008	(c) 2007	(d) 2006	
2 a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed . . . . .					
b 85% of line 2a . . . . .					
c Qualifying distributions from Part XII, line 4 for each year listed . . . . .					
d Amounts included in line 2c not used directly for active conduct of exempt activities . . . . .					
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c . . . . .					
3 Complete 3a, b, or c for the alternative test relied upon					
a "Assets" alternative test - enter					
(1) Value of all assets . . . . .					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i) . . . . .					
b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed . . . . .					
c "Support" alternative test - enter					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) . . . . .					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii) . . . . .					
(3) Largest amount of support from an exempt organization . . . . .					
(4) Gross investment income . . . . .					

**Part XV Supplementary Information** (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year - see page 28 of the instructions.)**1 Information Regarding Foundation Managers:**

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2) )

NONE

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

NONE

**2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:**

Check here ☒ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see page 28 of the instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

a The name, address, and telephone number of the person to whom applications should be addressed

b The form in which applications should be submitted and information and materials they should include

c Any submission deadlines

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

**Part XV Supplementary Information (continued)****3 Grants and Contributions Paid During the Year or Approved for Future Payment**

<div>Recipient</div> <div>Name and address (home or business)</div>	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
<b>a Paid during the year</b> SEE LIST ATTACHED				3,262,975.
<b>Total.</b>			▶ <b>3a</b>	3,262,975.
<b>b Approved for future payment</b> NONE				0.
<b>Total.</b>			▶ <b>3b</b>	0.

Form 990-PF (2009)

**Part XVI-A Analysis of Income-Producing Activities**

Enter gross amounts unless otherwise indicated

Enter gross amounts unless otherwise indicated		Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See page 28 of the instructions)
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
1	Program service revenue					
a						
b						
c						
d						
e						
f						
g	Fees and contracts from government agencies					
2	Membership dues and assessments . . . . .					
3	Interest on savings and temporary cash investments			14	4,351.	
4	Dividends and interest from securities . . . . .			14	39,361.	
5	Net rental income or (loss) from real estate					
a	Debt-financed property . . . . .					
b	Not debt-financed property . . . . .					
6	Net rental income or (loss) from personal property .					
7	Other investment income . . . . .					
8	Gain or (loss) from sales of assets other than inventory			18	-220,629.	
9	Net income or (loss) from special events . . .					
10	Gross profit or (loss) from sales of inventory . .					
11	Other revenue a					
b	ATTACHMENT 12			01	-5.	
c						
d						
e						
12	Subtotal Add columns (b), (d), and (e) . . . . .				-176,922.	
13	Total. Add line 12, columns (b), (d), and (e) . . . . .					-176,922.

(See worksheet in line 13 instructions on page 28 to verify calculations )

## Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

[illegible]

## Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

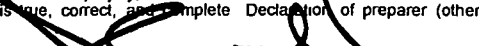
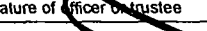
1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?		Yes	No
<b>a</b> Transfers from the reporting foundation to a noncharitable exempt organization of			
(1) Cash			X
(2) Other assets			X
<b>b</b> Other transactions			
(1) Sales of assets to a noncharitable exempt organization			X
(2) Purchases of assets from a noncharitable exempt organization			X
(3) Rental of facilities, equipment, or other assets			X
(4) Reimbursement arrangements			X
(5) Loans or loan guarantees			X
(6) Performance of services or membership or fundraising solicitations			X
<b>c</b> Sharing of facilities, equipment, mailing lists, other assets, or paid employees		<b>1c</b>	X
<b>d</b> If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.			

[illegible]

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No

**b If "Yes," complete the following schedule**

(a) Name of organization	(b) Type of organization	(c) Description of relationship
N/A		

<p>Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge.</p>			
<p> Signature of officer or trustee</p>		<p>12-7-10 Date</p>	<p>PRESIDENT/DIRECTOR Title</p>
<p>Sign Here Paid Preparer's Use Only</p>	<p>Preparer's signature </p>	<p>Date 12/3/10</p>	<p>Check if self-employed <input type="checkbox"/></p> <p>Preparer's identifying number (See Signature on page 30 of the instructions) 0466290</p>
	<p>Firm's name (or yours if self-employed), address, and ZIP code BORS ASSOCIATES, LLC 100 WALL STREET - 11TH FL NEW YORK, NY 10005</p>		<p>EIN 13-4078147 Phone no 212-440-0800</p>

**FORM 990-PF - PART IV****CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME**

Kind of Property		Description				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)	
23,810.		SEE REALIZED G(L) REPORT I ATTACHED PROPERTY TYPE: SECURITIES 14,692.				P	VAR 9,118.	VAR
211,133.		SEE REALIZED G(L) REPORT I ATTACHED PROPERTY TYPE: SECURITIES 242,785.				P	VAR -31,652.	VAR
258,728.		SEE REALIZED G(L) REPORT II ATTACHED PROPERTY TYPE: SECURITIES 305,039.				P	VAR -46,311.	VAR
1,184,631.		SEE REALIZED G(L) REPORT II ATTACHED PROPERTY TYPE: SECURITIES 1,179,860.				P	VAR 4,771.	VAR
10,778.		LTCG THRU SUMMIT VENTURES VI-B LP					10,778.	
		LTCL THRU WILLIAM BLAIR MEZZ CAP FD II 40,179.					-40,179.	
16,451.		LTCG THRU SCF-IV LP					16,451.	
5,849.		LTCG THRU OCM OPPORTUNITIES FUND LP					5,849.	
1,019.		STCG THRU OCM/GFI POWER OPPS FD II					1,019.	
4,413.		LTCG THRU OCM/GFI POWER OPPS FD II					4,413.	
15,340.		STCG THRU LONE CASCADE LP					15,340.	
		LTCL THRU LONE CASCADE LP 170,226.					-170,226.	
TOTAL GAIN (LOSS) .....							<u>-220,629.</u>	

**J. IRA AND NICKI HARRIS FAMILY FOUNDATION INC.**

**EIN: 26-0818520**

**SUPPLEMENTARY STATEMENTS**

**PART: XV**

**LINE: 2**

**SUPPLEMENTAL INFORMATION**

THE ORGANIZATION'S PRIMARY ACTIVITY IS TO SUPPORT, BY CONTRIBUTIONS, OTHER ORGANIZATIONS QUALIFYING FOR EXEMPTION UNDER SECTION 501(c)(3) OF THE INTERNAL REVENUE CODE. THE TRUSTEES CHOOSE THESE ORGANIZATIONS BASED UPON THEIR KNOWLEDGE OF THE ORGANIZATIONS' ACTIVITIES. NO CONTRIBUTIONS, GRANTS, GIFTS, LOANS OR SCHOLARSHIPS ARE MADE TO INDIVIDUALS. THE ORGANIZATION DOES NOT PRESENTLY RECEIVE APPLICATIONS OR CONDUCT PROGRAMS FOR DONATIONS IN ITS ACTIVITIES.



ATTACHMENT 1FORM 990PF, PART I - INTEREST ON TEMPORARY CASH INVESTMENTS

<u>DESCRIPTION</u>	<u>REVENUE AND EXPENSES PER BOOKS</u>	<u>NET INVESTMENT INCOME</u>	<u>ADJUSTED NET INCOME</u>
INTEREST ON CHECKING	376.	376.	0.
INTEREST ON CREDIT BALANCE	2,427.	2,427.	0.
INTEREST ON CD	1,548.	1,548.	0.
TOTAL	<u>4,351.</u>	<u>4,351.</u>	<u>0.</u>

ATTACHMENT 2FORM 990PF, PART I - DIVIDENDS AND INTEREST FROM SECURITIES

<u>DESCRIPTION</u>	<u>REVENUE AND EXPENSES PER BOOKS</u>	<u>NET INVESTMENT INCOME</u>	<u>ADJUSTED NET INCOME</u>
DIVIDENDS	9,466.	9,466.	0.
DIVIDENDS THRU K-1'S	23,628.	23,628.	0.
INTEREST THRU K-1'S	6,267.	6,267.	0.
TOTAL	<u>39,361.</u>	<u>39,361.</u>	<u>0.</u>

ATTACHMENT 3FORM 990PF, PART I - OTHER INCOME

DESCRIPTION	REVENUE AND EXPENSES PER BOOKS	NET INVESTMENT INCOME	ADJUSTED NET INCOME
MISC INCOME THRU GROSVENOR MKT NEUTRAL ORDINARY INCOME THRU LONE CASCADE LP SEC 988 G/L THRU LONE CASCADE LP	28. 30. -63.	28. 30. -63.	0. 0. 0.
TOTALS	-5.	-5.	0.

ATTACHMENT 4FORM 990PF, PART I - LEGAL FEES

<u>DESCRIPTION</u>	<u>REVENUE AND EXPENSES PER BOOKS</u>	<u>NET INVESTMENT INCOME</u>	<u>ADJUSTED NET INCOME</u>	<u>CHARITABLE PURPOSES</u>
HODGSON RUSS LLP	12,925.	0.	0.	12,925.
DUANE MORRIS LLP	3,276.	0.	0.	3,276.
COMITER, SINGER, BASEMAN ET AL	1,968.	0.	0.	1,968.
TOTALS	<u>18,169.</u>	<u>0.</u>	<u>0.</u>	<u>18,169.</u>

ATTACHMENT 5FORM 990PF, PART I - ACCOUNTING FEES

<u>DESCRIPTION</u>	<u>REVENUE AND EXPENSES PER BOOKS</u>	<u>NET INVESTMENT INCOME</u>	<u>ADJUSTED NET INCOME</u>	<u>CHARITABLE PURPOSES</u>
BCRS ASSOCIATES, LLC	26,000.	13,000.	0.	13,000.
TOTALS	<u>26,000.</u>	<u>13,000.</u>	<u>0.</u>	<u>13,000.</u>

ATTACHMENT 6FORM 990PF, PART I - OTHER PROFESSIONAL FEES

<u>DESCRIPTION</u>	<u>REVENUE AND EXPENSES PER BOOKS</u>	<u>NET INVESTMENT INCOME</u>	<u>ADJUSTED NET INCOME</u>	<u>CHARITABLE PURPOSES</u>
INVESTMENT ADVISORY FEES	21,737.	21,737.	0.	0.
TOTALS	<u>21,737.</u>	<u>21,737.</u>	<u>0.</u>	<u>0.</u>

ATTACHMENT 7FORM 990PF, PART I - OTHER EXPENSES

DESCRIPTION	REVENUE AND EXPENSES PER BOOKS	NET INVESTMENT INCOME	ADJUSTED NET INCOME	CHARITABLE PURPOSES
BANK CHARGES	75.	0.	0.	75.
FILING FEES	61.	0.	0.	61.
MEMBERSHIP FEE	605.	0.	0.	605.
INTEREST EXPENSE THRU K-1'S	77.	77.	0.	0.
PORTFOLIO DEDUCTIONS THRU K-1S	39,597.	39,597.	0.	0.
FOREIGN TAX THRU K-1'S	2,104.	2,104.	0.	0.
TOTALS	42,519.	41,778.	0.	741.

J. IRA & NICKI HARRIS FAMILY FOUNDATION, INC.

26-0818520

FORM 990PF, PART II - CORPORATE STOCK

ATTACHMENT 8

<u>DESCRIPTION</u>	<u>BEGINNING BOOK VALUE</u>	<u>ENDING BOOK VALUE</u>	<u>ENDING FMV</u>
LONG POSITION I - ACCT CLOSED SEE LONG POSITION II ATTACHED	1,594,762. 0.	3,391,388. 0.	3,238,375. 0.
TOTALS	<u>1,594,762.</u>	<u>3,391,388.</u>	<u>3,238,375.</u>



## J. IRA &amp; NICKI HARRIS FAMILY FOUNDATION, INC.

26-0818520

FORM 990PF, PART II - OTHER ASSETSATTACHMENT 9

<u>DESCRIPTION</u>	<u>BEGINNING BOOK VALUE</u>	<u>ENDING BOOK VALUE</u>	<u>ENDING FMV</u>
BLACKROCK ASIA PACIFIC PTR LTD	1,000,000.	1,000,000.	1,043,408.
LONE PINON LTD	0.	0.	907,708.
LONE CEDAR LTD	0.	0.	2,561,132.
LONE CASCADE LP	1,448,454.	1,288,107.	1,464,798.
THIRTEEN PARTNERS OFFSHORE LTD	11,017,239.	11,017,239.	14,626,762.
SUMMIT VENTURES VI-B LP	257,876.	211,196.	333,752.
TPREF INCOME NOTE TRUST	363,210.	363,210.	289,971.
WILLIAM BLAIR MEZZ CAP FUND II	148,916.	114,214.	84,105.
SCF-IV, LP	27,408.	-23,020.	32,832.
OCM OPPORTUNITIES FUND LP	-560.	4,590.	2,397.
SUMMIT SUBORD DEBT FUND LP	-26,699.	-26,734.	2,048.
OCM/GFI POWER OPPS FUND II	89,810.	74,290.	238,052.
TRANSAMERICA LIFE INSURANCE	792,719.	792,719.	394,073.
SWIFTCURRENT OFFSHORE LTD	500,000.	500,000.	485,476.
TOTALS	<u>15,618,373.</u>	<u>15,315,811.</u>	<u>22,466,514.</u>

ATTACHMENT 10FORM 990PF, PART III - OTHER INCREASES IN NET WORTH OR FUND BALANCESDESCRIPTIONAMOUNTPRIOR PERIOD ADJUSTMENT  
ROUNDING500,000.  
2.

TOTAL

500,002.

## J. IRA &amp; NICKI HARRIS FAMILY FOUNDATION, INC.

26-0818520

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEESATTACHMENT 11

<u>NAME AND ADDRESS</u>	<u>TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION</u>	<u>COMPENSATION</u>	<u>CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS</u>	<u>EXPENSE ACCT AND OTHER ALLOWANCES</u>
J. IRA HARRIS C/O BCBS ASSOCIATES, LLC 100 WALL STREET - 11TH FLOOR NEW YORK, NY 10005	DIRECTOR/PRESIDENT - AS NEEDED	0.	0.	0.
NICKI HARRIS C/O BCBS ASSOCIATES, LLC 100 WALL STREET - 11TH FLOOR NEW YORK, NY 10005	DIRECTOR/VP - AS NEEDED	0.	0.	0.
JONATHAN M HARRIS C/O BCBS ASSOCIATES, LLC 100 WALL STREET - 11TH FLOOR NEW YORK, NY 10005	DIRECTOR/TREASURER - AS NEEDED	0.	0.	0.
JACQUELINE HARRIS HOCHBERG C/O BCBS ASSOCIATES, LLC 100 WALL STREET - 11TH FLOOR NEW YORK, NY 10005	DIRECTOR/SECRETARY - AS NEEDED	100,000.	0.	0.
DAVID MOORE 280 PARK AVENUE - 22ND FLOOR NEW YORK, NY 10017	DIRECTOR - AS NEEDED	0.	0.	0.

J. IRA & NICKI HARRIS FAMILY FOUNDATION, INC.

26-0818520

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

ATTACHMENT 11 (CONT'D)

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
BRUCE MOSKOWITZ C/O BCRS ASSOCIATES, LLC 100 WALL STREET - 11TH FLOOR NEW YORK, NY 10005	DIRECTOR - AS NEEDED	0.	0.	0.
CRAIG SHADUR C/O BCRS ASSOCIATES, LLC 100 WALL STREET - 11TH FLOOR NEW YORK, NY 10005	DIRECTOR - AS NEEDED	0.	0.	0.
GRAND TOTALS		100,000.	0.	0.

J. IRA & NICKI HARRIS FAMILY FOUNDATION, INC.

26-0818520

FORM 990-PF, PART XVI-A - ANALYSIS OF OTHER REVENUE

ATTACHMENT 12

DESCRIPTION	BUSINESS CODE	AMOUNT	EXCLUSION CODE	AMOUNT	RELATED OR EXEMPT FUNCTION INCOME
MISC INCOME THRU GROSVENOR MKT NEUTRAL HEDGING FD			01	28.	
ORDINARY INCOME THRU LONE CASCADE LP			01	30.	
SEC 988 G/L THRU LONE CASCADE LP			01	-63.	
TOTALS				-5.	

**SCHEDULE D**  
**(Form 1041)**

Department of the Treasury  
Internal Revenue Service

**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

**2009**

Name of estate or trust

J. IRA & NICKI HARRIS FAMILY FOUNDATION, INC.

Employer identification number

26-0818520

**Note:** Form 5227 filers need to complete *only* Parts I and II

**Part I Short-Term Capital Gains and Losses - Assets Held One Year or Less**

(a) Description of property (Example 100 shares 7% preferred of "Z" Co.)	(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)	(d) Sales price	(e) Cost or other basis (see page 4 of the instructions)	(f) Gain or (loss) for the entire year Subtract (e) from (d)
<b>1a</b>					

<b>b</b> Enter the short-term gain or (loss), if any, from Schedule D-1, line 1b	<b>1b</b>	-20,834.
<b>2</b> Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824	<b>2</b>	
<b>3</b> Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts	<b>3</b>	
<b>4</b> Short-term capital loss carryover Enter the amount, if any, from line 9 of the 2008 Capital Loss Carryover Worksheet	<b>4</b>	( )
<b>5</b> <b>Net short-term gain or (loss).</b> Combine lines 1a through 4 in column (f) Enter here and on line 13, column (3) on the back	<b>5</b>	-20,834.

**Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year**

(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 basis (see page 4 of the instructions)	(f) Gain or (loss) for the entire year Subtract (e) from (d)
<b>6a</b>					

<b>b</b> Enter the long-term gain or (loss), if any, from Schedule D-1, line 6b	<b>6b</b>	-199,795.
<b>7</b> Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824	<b>7</b>	
<b>8</b> Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts	<b>8</b>	
<b>9</b> Capital gain distributions	<b>9</b>	
<b>10</b> Gain from Form 4797, Part I	<b>10</b>	
<b>11</b> Long-term capital loss carryover Enter the amount, if any, from line 14 of the 2008 Capital Loss Carryover Worksheet	<b>11</b>	( )
<b>12</b> <b>Net long-term gain or (loss).</b> Combine lines 6a through 11 in column (f) Enter here and on line 14a, column (3) on the back	<b>12</b>	-199,795.

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

Schedule D (Form 1041) 2009

<b>Part III Summary of Parts I and II</b>		(1) Beneficiaries' (see page 5)	(2) Estate's or trust's	(3) Total
<b>Caution: Read the instructions before completing this part.</b>				
<b>13</b>	<b>Net short-term gain or (loss)</b> . . . . .	<b>13</b>		-20,834.
<b>14</b>	<b>Net long-term gain or (loss):</b>			
a	Total for year . . . . .	<b>14a</b>		-199,795.
b	Unrecaptured section 1250 gain (see line 18 of the wrksht) . . . . .	<b>14b</b>		
c	28% rate gain . . . . .	<b>14c</b>		
<b>15</b>	<b>Total net gain or (loss).</b> Combine lines 13 and 14a . . . . .	<b>15</b>		-220,629.

**Note:** If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4 (or Form 990-T, Part I, line 4a). If lines 14a and 15, column (2), are net gains, go to Part V, and do not complete Part IV. If line 15, column (3), is a net loss, complete Part IV and the **Capital Loss Carryover Worksheet** necessary.

#### Part IV Capital Loss Limitation

<b>16</b>	Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, Part I, line 4c, if a trust), the smaller of	<b>16</b>	( 3,000.)
a	The loss on line 15, column (3) or b \$3,000		

**Note:** If the loss on line 15, column (3), is more than \$3,000, or if Form 1041, page 1, line 22 (or Form 990-T, line 34), is a loss, complete the **Capital Loss Carryover Worksheet** on page 7 of the instructions to figure your capital loss carryover.

#### Part V Tax Computation Using Maximum Capital Gains Rates

**Form 1041 filers.** Complete this part only if both lines 14a and 15 in column (2) are gains, or an amount is entered in Part I or Part II and there is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is more than zero.

**Caution:** Skip this part and complete the worksheet on page 8 of the instructions if

- Either line 14b, col (2) or line 14c, col (2) is more than zero, or
- Both Form 1041, line 2b(1), and Form 4952, line 4g are more than zero

**Form 990-T trusts.** Complete this part only if both lines 14a and 15 are gains, or qualified dividends are included in income in Part I of Form 990-T, and Form 990-T, line 34, is more than zero. Skip this part and complete the worksheet on page 8 of the instructions if either line 14b, col (2) or line 14c, col (2) is more than zero.

<b>17</b>	Enter taxable income from Form 1041, line 22 (or Form 990-T, line 34) . . . . .	<b>17</b>	
<b>18</b>	Enter the smaller of line 14a or 15 in column (2) but not less than zero . . . . .	<b>18</b>	
<b>19</b>	Enter the estate's or trust's qualified dividends from Form 1041, line 2b(2) (or enter the qualified dividends included in income in Part I of Form 990-T) . . . . .	<b>19</b>	
<b>20</b>	Add lines 18 and 19 . . . . .	<b>20</b>	
<b>21</b>	If the estate or trust is filing Form 4952, enter the amount from line 4g, otherwise, enter -0- . . . . .	<b>21</b>	
<b>22</b>	Subtract line 21 from line 20. If zero or less, enter -0- . . . . .	<b>22</b>	
<b>23</b>	Subtract line 22 from line 17. If zero or less, enter -0- . . . . .	<b>23</b>	
<b>24</b>	Enter the smaller of the amount on line 17 or \$2,300 . . . . .	<b>24</b>	
<b>25</b>	Is the amount on line 23 equal to or more than the amount on line 24? <input type="checkbox"/> Yes. Skip lines 25 and 26, go to line 27 and check the "No" box <input type="checkbox"/> No. Enter the amount from line 23 . . . . .	<b>25</b>	
<b>26</b>	Subtract line 25 from line 24 . . . . .	<b>26</b>	
<b>27</b>	Are the amounts on lines 22 and 26 the same? <input type="checkbox"/> Yes. Skip lines 27 thru 30, go to line 31 <input type="checkbox"/> No. Enter the smaller of line 17 or line 22 . . . . .	<b>27</b>	
<b>28</b>	Enter the amount from line 26 (If line 26 is blank, enter -0-) . . . . .	<b>28</b>	
<b>29</b>	Subtract line 28 from line 27 . . . . .	<b>29</b>	
<b>30</b>	Multiply line 29 by 15% ( 15) . . . . .	<b>30</b>	
<b>31</b>	Figure the tax on the amount on line 23. Use the 2009 Tax Rate Schedule for Estates and Trusts (see the Schedule G instructions in the instructions for Form 1041) . . . . .	<b>31</b>	
<b>32</b>	Add lines 30 and 31 . . . . .	<b>32</b>	
<b>33</b>	Figure the tax on the amount on line 17. Use the 2009 Tax Rate Schedule for Estates and Trusts (see the Schedule G instructions in the instructions for Form 1041) . . . . .	<b>33</b>	
<b>34</b>	<b>Tax on all taxable income.</b> Enter the smaller of line 32 or line 33 here and on Form 1041, Schedule G, line 1a (or Form 990-T, line 36) . . . . .	<b>34</b>	

Schedule D (Form 1041) 2009

Department of the Treasury  
Internal Revenue Service

▶ See instructions for Schedule D (Form 1041).  
▶ Attach to Schedule D to list additional transactions for lines 1a and 6a.

2009

26-0818520

(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 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)

9,118.

-46,311.

1,019.

15,340.

-20,834.

Schedule D-1 (Form 1041) 2009





J. Ira & Nicki Harris Family Foundation, Inc.  
Charitable Contributions  
FYE: March 31, 2010  
EIN: 26-0818520

Date	Organization	City/State	Amount
04/07/09	AISH Center New York	New York, NY	\$ 2,500 00
04/07/09	Boys' Town of Italy	New York, NY	1,000 00
04/08/09	Project HOPE at NYU Child Study Center	New York, NY	300,000 00
04/08/09	NYU Child Study Center	New York, NY	50,000 00
04/08/09	Museum at Eldridge Street	New York, NY	10,000 00
04/08/09	The Kennedy Center	Washington, DC	50,000 00
04/08/09	Big Shoulders Fund	Chicago, IL	20,000 00
04/08/09	Brigham and Women's Hospital	Boston, MA	60,000 00
04/08/09	University of Michigan - Locker Room Renovation	Ann Arbor, MI	360,000 00
04/08/09	Kravis Center	West Palm Beach, FL	100,000 00
04/09/09	The American Hospital of Paris Foundation	New York, NY	1,000 00
04/17/09	Palm Beach Community Chest - United Way	Palm Beach, FL	25,000 00
05/11/09	92nd Street Y	New York, NY	20,000 00
05/11/09	PMC (Pan Mass Challenge)	Needham, MA	250 00
06/26/09	Amherst College	Amherst, MA	10,000.00
06/26/09	Jewish Board of Family and Children's Services	New York, NY	22,500 00
06/30/09	Jewish Federation of Palm Beach County	West Palm Beach, FL	50,000 00
07/10/09	Collegiate School	New York, NY	17,500 00
07/12/09	Hope at NYU School of Medicine	New York, NY	350,000 00
07/23/09	Baycrest Foundation	Toronto, ON	1,000 00
07/23/09	The UCLA Foundation, Inc	Los Angeles, CA	1,000 00
09/10/09	Central Synagogue	New York, NY	50,000 00
09/10/09	American Friends of the Israel Museum	New York, NY	1,000 00
09/10/09	The Bronx Museum of the Arts	Bronx, NY	12,500 00
09/10/09	National Museum of American Jewish History	Philadelphia, PA	5,000 00
09/16/09	Palm Beach Civic Association	Palm Beach, FL	5,000 00
09/18/09	Chicago Youth Center	Chicago, IL	1,000 00
09/18/09	Hope at NYU School of Medicine	New York, NY	250,000 00
09/18/09	National Museum of American Jewish History	Philadelphia, PA	125,000 00
09/18/09	Ross School of Business - University of Michigan	Ann Arbor, MI	140,000 00
09/18/09	University of Michigan	Ann Arbor, MI	250,000 00
09/21/09	The Jewish Museum	New York, NY	2,500 00
10/20/09	Columbus Citizens Foundation	New York, NY	10,000 00
10/20/09	Hospital for Special Surgery	New York, NY	10,000 00
10/22/09	Norton Museum of Art	West Palm Beach, FL	10,000 00
10/22/09	Hospice Foundation of Palm Beach County	Palm Beach, FL	2,000 00
10/22/09	Planned Parenthood of South Florida and the Treasure Coast, Inc	West Palm Beach, FL	3,000 00
10/22/09	Historical Society of Palm Beach County	West Palm Beach, FL	1,000 00
10/22/09	Preservation Foundation of Palm Beach	Palm Beach, FL	2,500 00
10/22/09	The National MS Society	New York, NY	1,000 00
10/22/09	Wilsonville Youth Sports, Inc	Wilsonville, OR	1,000 00
10/27/09	The Fresh Air Fund	New York, NY	1,000 00
11/05/09	Society of the Four Arts, The	Palm Beach, FL	5,000 00
11/20/09	Dana Farber Cancer Institute	Boston, MA	10,000 00
12/08/09	Jonathan M Harris Foundation, Inc.	New York, NY	50,000 00
12/10/09	Hope at NYU School of Medicine	New York, NY	500,000.00
12/10/09	Town of Palm Beach	Palm Beach, FL	1,500 00

J. Ira & Nicki Harris Family Foundation, Inc.  
Charitable Contributions  
FYE: March 31, 2010  
EIN: 26-0818520

Date	Organization	City/State	Amount
12/10/09	Preservation Foundation of Palm Beach	Palm Beach, FL	500 00
12/10/09	Brigham and Women's Hospital	Boston, MA	2,000 00
12/10/09	Albert Einstein College of Medicine	New York, NY	425 00
12/11/09	Dystonia Medical Research Foundation	Chicago, IL	2,500 00
12/18/09	Boys and Girls Club of Broward County	Fort Lauderdale, FL	25,000 00
12/21/09	Teach for America	New York, NY	12,500 00
12/21/09	Solomon R Guggenheim Museum	New York, NY	100,000 00
01/26/10	Anti-Defamation League	New York, NY	10,000 00
02/02/10	The Christopher Ricardo Cystic Fibrosis Foundation, Inc	Aventura, FL	1,000 00
02/02/10	American Friends of the Israel Museum	New York, NY	2,500.00
02/02/10	92nd Street Y Nursery School	New York, NY	1,000 00
02/04/10	Bruce and Marsha Moskowitz Foundation	Palm Beach, FL	1,000 00
02/04/10	National Museum of American Jewish History	Philadelphia, PA	1,000 00
02/04/10	American Jewish Committee	New York, NY	10,000 00
02/04/10	The Ryan Licht Sang Bipolar Foundation	Chicago, IL	1,000 00
02/16/10	Northwestern University Feinberg School of Medicine	Chicago, IL	1,000 00
02/17/10	Friendship Circle of MetroWest	Livingston, NJ	2,500.00
02/18/10	Brigham and Women's Hospital	Boston, MA	60,000 00
02/19/10	The Kennedy Center	Washington, DC	50,000 00
03/03/10	UJA-Federation of New York	New York, NY	10,000 00
03/04/10	Town of Palm Beach United Way	Palm Beach, FL	25,000 00
03/10/10	Nicklaus Children's Health Care Foundation	North Palm Beach, FL	25,000 00
03/11/10	Hope for Depression Research Foundation	New York, NY	2,500 00
03/19/10	The American Ireland Fund	Boston, MA	10,000 00
Subtotal I			<u>\$ 3,258,175.00</u>

J. Ira & Nicki Harris Family Foundation, Inc.  
Charitable Contributions [Non-Cash]  
FYE: March 31, 2010  
EIN: 26-0818520

DATE	DONEE / DESCRIPTION OF GIFT	CITY, STATE	FMV
10/22/2009	NORTON MUSEUM OF ART <i>JEFF CHIEN-HSING LIAO, "YANKEE STADIUMS", 40 x 64", EDITION 2/12</i>	WEST PALM BEACH, FL	\$ 1,700.00
10/22/2009	UNIVERSITY OF MICHIGAN BUSINESS SCHOOL <i>JEFF CHIEN-HSING LIAO, "YANKEE STADIUMS", 40 x 64", EDITION 3/12</i>	ANN ARBOR, MI	1,700.00
10/22/2009	NEW YORK CITY DEPARTMENT OF EDUCATION <i>JEFF CHIEN-HSING LIAO, "YANKEE STADIUMS", 20 x 32", EDITION 1/12</i>	NEW YORK, NY	700.00
10/22/2009	CENTRAL SYNAGOGUE <i>JEFF CHIEN-HSING LIAO, "YANKEE STADIUMS", 20 x 32", EDITION 2/12</i>	NEW YORK, NY	700.00
Subtotal II			<u>\$ 4,800.00</u>
Subtotal I			3,258,175.00
Subtotal II			4,800.00
TOTAL CONTRIBUTIONS PAID *			<u>\$ 3,262,975.00</u>

\* ALL CONTRIBUTIONS WERE MADE TO THE GENERAL PURPOSE  
FUND OF PUBLIC CHARITABLE ORGANIZATIONS THAT WERE  
CLASSIFIED UNDER SECTION 501(c)(3) OF THE INTERNAL REVENUE  
CODE.

Chieftain Capital Management, Inc.  
**REALIZED GAINS AND LOSSES**  
**J IRA AND NICKI HARRIS FAMILY**  
**FOUNDATION INC**  
**C/O J I HARRIS & ASSOC INC**  
*From 04-01-09 Through 03-31-10*

Open Date	Close Date	Quantity	Security	Cost Basis	Proceeds	Gain Or Loss	
						Short Term	Long Term
10-29-02	04-16-09	375.00	Laboratory Corp America Holdings	7,476.19	23,125.99		15,649.80
10-29-02	04-17-09	425.00	Laboratory Corp America Holdings	8,473.01	26,363.98		17,890.97
10-29-02	04-20-09	275.00	Laboratory Corp America Holdings	5,482.54	17,029.29		11,546.75
10-29-02	04-21-09	225.00	Laboratory Corp America Holdings	4,485.71	14,134.74		9,649.03
02-08-08	05-21-09	3,825.00	Dell Inc	75,659.65	40,925.68		-34,733.97
01-19-07	05-26-09	550.00	Ryanair Holdings PLC Sp ADR	24,277.14	15,702.92		-8,574.22
01-08-07	05-26-09	300.00	Ryanair Holdings PLC Sp ADR	13,209.81	8,565.23		-4,644.58
01-05-07	05-26-09	250.00	Ryanair Holdings PLC Sp ADR	10,936.04	7,137.69		-3,798.35
01-05-07	05-27-09	200.00	Ryanair Holdings PLC Sp ADR	8,748.83	5,842.59		-2,906.24
02-01-07	05-27-09	350.00	Ryanair Holdings PLC Sp ADR	15,303.75	10,224.52		-5,079.23
01-22-07	05-27-09	50.00	Ryanair Holdings PLC Sp ADR	2,163.42	1,460.65		-702.77
01-22-07	05-28-09	125.00	Ryanair Holdings PLC Sp ADR	5,408.55	3,642.90		-1,765.65
02-08-08	05-29-09	1,250.00	Dell Inc	24,725.38	14,620.50		-10,104.88
02-11-08	05-29-09	1,350.00	Dell Inc	26,699.63	15,790.13		-10,909.50
01-22-07	05-29-09	225.00	Ryanair Holdings PLC Sp ADR	9,735.39	6,566.70		-3,168.69
11-19-08	06-02-09	275.00	Precision Castparts Corp	14,692.40	23,810.45	9,118.05	
TOTAL GAINS						9,118.05	54,736.55
TOTAL LOSSES						0.00	-86,388.07
TOTAL REALIZED GAIN/LOSS						9,118.05	-31,651.52
				257,477.43	234,943.96		

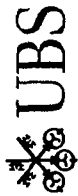
REALIZED G/L I

1/1

J. IRA AND NICKI HARRIS FAMILY FOUNDATION  
 REALIZED GAINS/LOSSES  
 UBS ACCOUNT  
 FYE 3/31/2010

SECURITY	DATE ACQ	DATE SOLD	QTY	PROCEEDS	COST BASIS	GAIN/LOSS	G/L TYPE
AMERICAN EXPRESS CO	VARIOUS	7/10/2009	2,650	\$ 60,595.07	\$ 62,510.13	\$ (1,915.06)	Long-Term
COMCAST CORP NEW CL A	VARIOUS	7/10/2009	10,000	134,041.30	133,855.25	186.05	Long-Term
DELL INC	VARIOUS	7/10/2009	9,600	124,708.71	186,834.26	(62,125.55)	Long-Term
LABORATORY CORP AMER HLDGS NEW	VARIOUS	7/10/2009	3,300	223,269.44	65,790.45	157,478.99	Long-Term
LOCKHEED MARTIN CORP	VARIOUS	7/10/2009	3,200	250,236.21	247,160.49	3,075.72	Long-Term
RYANAIR HOLDINGS PLC SPON ADR	VARIOUS	7/10/2009	9,100	255,743.57	365,783.29	(110,039.72)	Long-Term
PRECISION CASTPARTS CORP	VARIOUS	7/10/2009	1,300	89,316.44	67,826.46	21,489.98	Long-Term
VARIAN MEDICAL SYSTEMS INC	VARIOUS	7/10/2009	1,425	46,719.79	50,099.30	(3,379.51)	Long-Term
<b>TOTAL LONG-TERM</b>				<u>\$ 1,184,630.53</u>	<u>\$ 1,179,859.63</u>	<u>\$ 4,770.90</u>	
COMCAST CORP NEW CL A	7/10/2009	7/10/2009	19,800	\$ 258,728.21	\$ 305,039.46	\$ (46,311.25)	Short-Term
<b>TOTAL SHORT-TERM</b>				<u>\$ 258,728.21</u>	<u>\$ 305,039.46</u>	<u>\$ (46,311.25)</u>	
<b>GRAND TOTAL</b>				<u>\$ 1,443,358.74</u>	<u>\$ 1,484,899.09</u>	<u>\$ (41,540.35)</u>	

REALIZED G/L II



Business Services Account  
March 2010

Account name: J IRA & NICKI HARRIS FAMILY  
Friendly account name: Harris Fam Fdn

Your Financial Advisor:  
THE GOODHUE FINANCIAL GROUP  
212-821-7000

## Your assets

Some prices, income and current values shown may be approximate. As a result, gains and losses may not be accurately reflected. See *Important information about your statement* at the end of this document for more information.

### Cash alternatives

#### Money market funds

Money market funds are neither insured nor guaranteed by the Federal Deposit Insurance Corporation or any other government agency. Although money market funds seek to preserve the value of your investment at \$1.00 per share, it is possible to lose money by investing in these funds.

**Total reinvested** is the total of all reinvested dividends. It does not include any cash dividends. It is not a tax lot for the purposes of determining holding periods or cost basis. The shares you receive each time you reinvest dividends become a separate tax lot.

**Cost basis** is the total purchase cost of the security, including reinvested dividends. The cost basis may need to be adjusted for return of capital payments in order to determine the adjusted cost basis for tax reporting purposes.

**Unrealized gain or loss** is the difference between the current value and the cost basis. The unrealized gain or loss may need to be adjusted for return of capital payments in order to determine the realized gain or loss for tax reporting purposes.

**Investment return** is the current value minus the amount you invested. It does not include any cash dividends that were not reinvested.

Holding	Number of shares	Purchase price per share (\$)	Client investment (\$)	Cost basis (\$)	Price per share on Mar 31 (\$)	Value on Mar 31 (\$)	Unrealized gain or loss (\$)	Investment return (\$)	Holding period
UBS SELECT PRIME INSTITUTIONAL FUND	2,983,292.520	1,000	2,983,292.52	2,983,292.52	1,000	2,983,292.52			
EAT \$2,983 Current yield 0.10%									



Friendly account name: Harris Fam Fdn

## Your assets (continued)

### Equities

#### Common stock

Holding	Trade date	Number of shares	Purchase price per share (\$)	Cost basis (\$)	Price per share on Mar 31 (\$)	Value on Mar 31 (\$)	Unrealized gain or loss (\$)	Holding period
CROSSTEX ENERGY INC								
Symbol	Jun 29, 06	9,600 000	23 390	<b>224,254.14<sup>1</sup></b>	8 700	83,520 00	-141,024 00	LT
Exchange	Jun 29, 06	1,500 000	30 408	45,612 65 <sup>1</sup>	8 700	13,050 00	-32,562 65	LT
OTC	Jul 10, 06	375 000	31 023	11,633 65 <sup>1</sup>	8 700	3,262 50	-8,371 15	LT
Security total		11,475 000		<b>283,500.44</b>		99,832 50	-181,957 80	
MDC PARTNERS INC SUB VTG CL A								
Symbol	Oct 29, 09	15,000 000	8 226	124,595 25	10 350	155,250 00	30,654 75	ST
MDCA Exchange								
OTC								
EAI \$6,000 Current yield								
3 86%								
<b>Total</b>				<b>\$408,095.69</b>		<b>\$255,082.50</b>	<b>-\$151,303.05</b>	
<b>Total estimated annual income: \$6,000</b>								

<sup>1</sup> Indicates cost basis information has been provided by a source other than UBS Financial Services

### Your total assets

	Value on Mar 31 (\$)	Percentage of your account	Cost basis (\$)	Estimated annual income (\$)	Unrealized gain or loss (\$)
Cash alternatives	2,983,292.52	89.21%	2,983,292.52	2,983.00	
Equities	255,082.50	7.63%	408,095.69	6,000.00	-153,013.19
<b>Total</b>	<b>\$3,238,375.02</b>	<b>96.84%</b>	<b>\$3,391,388.21</b>	<b>\$8,983.00</b>	<b>-\$153,013.19</b>



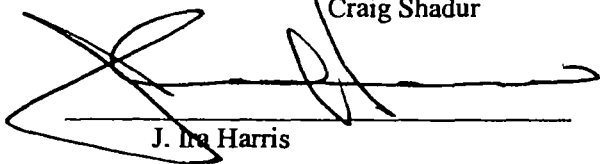
**J. IRA AND NICKI HARRIS FAMILY FOUNDATION, INC.**

**ACTION BY MEMBER WITHOUT A MEETING**

The undersigned, being the sole member of J. Ira and Nicki Harris Family Foundation, Inc. (the "Foundation"), consents that a meeting of the members of the Foundation be dispensed with and takes the following action by written consent pursuant to Section 617.0701(4) of the Florida Not for Profit Corporation Act:

**RESOLVED**, that the following persons be, and they hereby are, elected to serve as directors of the Foundation until the next annual meeting of the Member and until their successors have been elected and qualified:

J. Ira Harris  
Nicki Harris  
Jacqueline Harris Hochberg  
Jonathan M Harris  
David Moore  
Bruce Moskowitz  
Craig Shadur



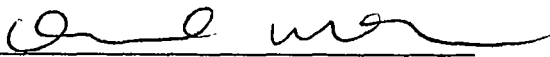
J. Ira Harris

July 8, 2009

# NOTICE OF RESIGNATION

To: Secretary  
J. Ira and Nicki Harris Family Foundation, Inc.

I hereby resign as a director of the J. Ira and Nicki Harris Family Foundation, Inc., effective as of February 2, 2009.

  
Daniel Tisch

J. IRA AND NICKI HARRIS FOUNDATION, INC.  
EIN: 26-0818520  
FYE 3/31/2010

**ATTACHMENT TO FORM 990-PF, PART V**

IN FYE 3/31/08, THERE WAS A §507(b)(2) TRANSFER FROM THE J. IRA AND NICKI HARRIS FOUNDATION, INC. (EIN 65-0805468). WE ARE MAKING AN ADMINISTRATIVE ADJUSTMENT TO FORM 990-PF, PART V, LINE 1, COLUMNS (b), (c) AND (d) FOR TAX YEAR 2007 IN ORDER TO COMPLETE THE TRANSFER OF TAX ATTRIBUTES WITH RESPECT TO THE §507(b)(2) TRANSFER.

STMT A

J. IRA & NICKI HARRIS FAMILY FOUNDATION, INC.

EIN: 26-0818520

FYE 3/31/2010

Attachment to Form 990-PF

Part VII-B, Question 5c

**EXPENDITURE RESPONSIBILITY STATEMENT**

Pursuant to IRC Regulation § 53.4945-5(d)(3), The J. Ira & Nicki Harris Family Foundation, Inc. provides the following information:

- |                      |  |
|----------------------|--|
| [1] Grantee          | Jonathan M Harris Foundation, Inc.<br>c/o BCRS Associates, LLC<br>100 Wall Street - 11 Floor, NY, NY 10005   |
| [2] Amount of Grant  | \$ 50,000.00<br>December 8, 2009   |
| [3] Purpose of Grant | Funds were paid to The Jonathan M Harris Foundation, Inc. as part of the core endowment from which distributions will be made to primary, secondary, post-secondary and graduate educational institutions.   |
| [4] & [6]            | The Jonathan M Harris Foundation, Inc. has furnished The J. Ira & Nicki Harris Family Foundation, Inc. with its Annual Report. The Trustees of The J. Ira & Nicki Harris Family Foundation, Inc. have been assured by The Jonathan M Harris Foundation, Inc. that the funds have been used according to the terms of the contract. |
| [5] Diversions       | To the knowledge of the Grantor, no funds have been or will be diverted to any activity other than the activity for which the grant was originally made.   |
| [7] Verification     | The grantor has no reason to doubt the accuracy or reliability of the report from the grantee, therefore, no independent verification of the reports was made.   |

J. IRA AND NICKI HARRIS FAMILY FOUNDATION, INC.  
EIN: 26-0818520  
FYE 3/31/2010

**ATTACHMENT TO FORM 990-PF, PART XIII**

IN FYE 3/31/08, THERE WAS A §507(b)(2) TRANSFER FROM THE J. IRA AND NICKI HARRIS FOUNDATION, INC (EIN: 65-0805468). WE ARE MAKING AN ADMINISTRATIVE ADJUSTMENT TO FORM 990-PF, PART V, LINE 3e (EXCESS DISTRIBUTIONS CARRYOVER FROM 2008) IN ORDER TO COMPLETE THE TRANSFER OF TAX ATTRIBUTES WITH RESPECT TO THE §507(b)(2) TRANSFER.

AS A RESULT, FOR FYE 3/31/10 WE ARE REDUCING THE PRIOR YEAR MINIMUM DISTRIBUTION REQUIREMENT FROM \$1,228,425 TO \$1,191,812.

STMT B

**Application for Extension of Time To File an  
Exempt Organization Return**► **File a separate application for each return.**

OMB No 1545-1709

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box ☒ . . . . .
  - If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form).
- Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.**

**Part I Automatic 3-Month Extension of Time.** Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension—check this box and complete Part I only ☐ . . . . .

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

**Electronic Filing (e-file).** Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit [www.irs.gov/efile](http://www.irs.gov/efile) and click on e-file for Charities & Nonprofits.

<b>Type or print</b>  File by the due date for filing your return. See instructions	Name of Exempt Organization	Employer identification number
	J. IRA AND NICKI HARRIS FAMILY FOUNDATION, INC.	26-0818520
	Number, street, and room or suite no. If a P.O. box, see instructions.	
	c/o BCRS ASSOCIATES, LLC; 100 WALL STREET - 11TH FLOOR	
City, town or post office, state, and ZIP code. For a foreign address, see instructions.		
NEW YORK, NY 10005		

**Check type of return to be filed** (file a separate application for each return):

- |   |   |                                    |
|---|---|------------------------------------|
| <input type="checkbox"/> Form 990               | <input type="checkbox"/> Form 990-T (corporation)                 | <input type="checkbox"/> Form 4720 |
| <input type="checkbox"/> Form 990-BL            | <input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust) | <input type="checkbox"/> Form 5227 |
| <input type="checkbox"/> Form 990-EZ            | <input type="checkbox"/> Form 990-T (trust other than above)      | <input type="checkbox"/> Form 6069 |
| <input checked="" type="checkbox"/> Form 990-PF | <input type="checkbox"/> Form 1041-A                              | <input type="checkbox"/> Form 8870 |

- The books are in the care of ► BCRS ASSOCIATES, LLC

Telephone No. ► 212-440-0811FAX No. ► N/A

- If the organization does not have an office or place of business in the United States, check this box ☐ . . . . .
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . . . . . If this is for the whole group, check this box ☐ . If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension will cover.

- 1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until NOVEMBER 15, 2010, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

- ☐ calendar year 20\_\_\_\_ or  
 ► ☒ tax year beginning APRIL 1, 2009, and ending MARCH 31, 2010.

- 2 If this tax year is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☐ Change in accounting period

<b>3a</b> If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	<b>3a</b>	\$	0.00
<b>b</b> If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	<b>3b</b>	\$	10,000.00
<b>c Balance Due.</b> Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	<b>3c</b>	\$	0.00

**Caution.** If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** and check this box ☒ **Note.** Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.
- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** (on page 1)

**Part II Additional (Not Automatic) 3-Month Extension of Time.** Only file the original (no copies needed).

Type or print  File by the extended due date for filing the return. See instructions.	Name of Exempt Organization <b>THE J. IRA AND NICKI HARRIS FAMILY FOUNDATION, INC.</b>	Employer identification number <b>26-0818520</b>
	Number, street, and room or suite no. If a P.O. box, see instructions. <b>C/O BCRS ASSOCIATES, LLC 100 WALL STREET - 11 FLOOR</b>	For IRS use only
	City, town or post office, state, and ZIP code. For a foreign address, see instructions <b>NEW YORK, NY 10005</b>	

**Check type of return to be filed** (File a separate application for each return):

- |                                      |   |                                      |                                    |
|--------------------------------------|---|--------------------------------------|------------------------------------|
| <input type="checkbox"/> Form 990    | <input checked="" type="checkbox"/> Form 990-PF                   | <input type="checkbox"/> Form 1041-A | <input type="checkbox"/> Form 6069 |
| <input type="checkbox"/> Form 990-BL | <input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust) | <input type="checkbox"/> Form 4720   | <input type="checkbox"/> Form 8870 |
| <input type="checkbox"/> Form 990-EZ | <input type="checkbox"/> Form 990-T (trust other than above)      | <input type="checkbox"/> Form 5227   |                                    |

**STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.**

- The books are in the care of **BCRS ASSOCIATES, LLC**  
Telephone No. **212-440-0800** FAX No. \_\_\_\_\_
- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) \_\_\_\_\_. If this is for the whole group, check this box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for.
- 4 I request an additional 3-month extension of time until **FEB 15**, 2011.
- 5 For calendar year \_\_\_\_\_, or other tax year beginning **APRIL 1**, 2009, and ending **MARCH 31**, 2010.
- 6 If this tax year is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☐ Change in accounting period
- 7 State in detail why you need the extension **ALL INFORMATION NECESSARY TO FILE A COMPLETE AND ACCURATE TAX RETURN IS NOT YET AVAILABLE.**

<b>8a</b> If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	<b>8a</b>	\$	<b>0.00</b>
<b>b</b> If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	<b>8b</b>	\$	<b>10,000.00</b>
<b>c Balance Due.</b> Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	<b>8c</b>	\$	<b>0.00</b>

**Signature and Verification**

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form

Signature ▶

Title ▶ **CPA**Date ▶ **11/15/2010**