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Form **990-PF**

Department of the Treasury

Return of Private Foundation

or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation

OMB No 1545-0052

internal Revenue Service 110te. The Touridation may be	oc abic to use a copy of this	return to satisfy state repo	ting requirements.	
For calendar year 2009, or tax year beginning MAY	1, 2009	, and ending	APR 30, 2010)
G Check all that apply: Initial return	Initial return of a fo	ormer public charity	Fınal retur	П
Amended return	Address chan	ge	Name change	
Use the IRS Name of foundation	·		A Employer identificatio	n number
label INSTITUTE FOR MEDICAL	& HUMAN RES	OURCES		
	CO., P.A.		59-1574136	5
print Number and street (or P O box number if mail is not de		Room/suite	B Telephone number	
or type 2699 SOUTH BAYSHORE D	RIVE. SUITE		(954) 923-	-0000
See Specific City or town, state, and ZIP code			C If exemption application is	
Instructions. MIAMI, FL 33133			D 1. Foreign organization	
H Check type of organization: X Section 501(c)(3) ex	empt private foundation		Foreign organizations m check here and attach or	eeting the 85% test,
	Other taxable private founda	ation		
I Fair market value of all assets at end of year J Accounting		X Accrual	E If private foundation sta under section 507(b)(1	
· 	her (specify)	71001 001		
\$ 477,714. (Part I, colui		basis.)	F If the foundation is in a under section 507(b)(1	
	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
Part 1 Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	expenses per books	income	income	for charitable purposes (cash basis only)
1 Contributions, gifts, grants, etc., received			N/A	(Cash Dasis Only)
2 Check X If the foundation is not required to attach Sch B			N/A	
Interest on savings and temporary cash investments				
_	11,784.	11,784.		STATEMENT 1
4 Dividends and interest from securities	11,704.	11,704.		DINIEMENI I
5a Gross rents			· · · · · · · · · · · · · · · · · · ·	
b Net rental income or (loss) 62 Net gain or (loss) from sale of assets not on line 10	-43,017.			
52 Net gain or (loss) from sale of assets not on line 10 Gross sales price for all	-43,017.			
b Gross sales price for all 123,503. 7 Capital gain net income (from Part IV, line 2)		0.		
7 Capital gain net income (from Part IV, line 2)		0.		
8 Net short-term capital gain 9 Income modifing to FIVED				
Gross sales less returns				<u>'</u>
b Less Cost of goods sold Gross profit or (1655) 5 2010		_		
c Gross pain or (loss) P 1 5 2010	-1,920.	-2,045.		STATEMENT 2
11 Other income	-33,153.	9,739.		STATEMENT Z
12 Total. Add lines through ful. 117	-33,153.	9,739.		0.
13 Compensation of officers, directors, trustees, etc	0.			0.
14 Other employee salaries and wages				
15 Pension plans, employee benefits 9 16a Legal fees			<u> </u>	
b Accounting fees c Other professional fees	3,600.	1,800.		1,800.
c Other professional fees		1,000.		1,000.
				
17 Interest 18 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings				
19 Depreciation and depletion		<u> </u>		
20 Occupancy				+
20 Occupancy				
21 Travel, conferences, and meetings			<u> </u>	
22 Printing and publications	1 077	868.		0
23 Other expenses STMT 4	1,077.	008.		0.
22 Printing and publications 23 Other expenses STMT 4 24 Total operating and administrative expenses. Add lines 13 through 23	A 677	2 669		1 000
expenses. Add lines 13 through 23	4,677. 29,250.	2,668.		1,800.
25 Contributions, girts, grants paid	43,430.			29,250.
26 Total expenses and disbursements	22 027	2 660		21 050
Add lines 24 and 25	33,927.	2,668.	 	31,050.
27 Subtract line 26 from line 12:	67 000			
a Excess of revenue over expenses and disbursements	-67,080.	7 071		
b Net investment income (if negative, enter -0-)		7,071.	NT / B	
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1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30		T	
	(must agree with end-of-year figure reported on prior year's return)	1		461,723.
2	Enter amount from Part I, line 27a	2	Γ	-67,080.
3	Other increases not included in line 2 (itemize)	3	Τ	0.
4	Add lines 1, 2, and 3	4	Τ	394,643.
5	Decreases not included in line 2 (itemize)	5	Т	0.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	$oxed{L}$	394,643.

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2009) C/O KAUFMAN, ROSSIN & CO., P.A.

(a) List and describ	e the kind(s) of property sold (e.g. house; or common stock, 200 shs	., real estate,	income	(b) How P - Pu D - Do	acquired rchase	(c) Date a	acquired ay, yr.)	(d) Date sold (mo., day, yr.)
1a PUBLICLY TRADED	<u></u>			0-00	P			
b	52001121225							· · · · · · · · · · · · · · · · · · ·
C			-				1	
d								
e								
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale				ain or (loss) s (f) minus (
a 123,503.			166,52	0.				-43,017.
b	· · · · · · · · · · · · · · · · · · ·				_			
C							_	
d								
e								·
Complete only for assets showing	gain in column (h) and owned by t	the foundation	on 12/31/69		(I) Gains (C	ol. (h) gain	minus
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (ı) col. (ı), ıf any			il. (k), but n	not leśs than (from col. (1	ı -0-) or
a								-43,017.
b				_				
c								· · · · · · · · · · · · · · · · · ·
d								.
e						-		
Capital gain net income or (net capit	al loss) If gain, also enter	r in Part I, line	7	} 2				-43,017.
3 Net short-term capital gain or (loss)	as defined in sections 1222(5) an		•					13,0176
If gain, also enter in Part I, line 8, co If (loss), enter -0- in Part I, line 8) 3			N/A	
Part V Qualification Un	der Section 4940(e) for	Reduced	Tax on Net	Invest	ment In	come		
If section 4940(d)(2) applies, leave this Was the foundation liable for the section If "Yes," the foundation does not qualify 1 Enter the appropriate amount in each	n 4942 tax on the distributable am under section 4940(e). Do not co	mplete this pa	rt.					Yes X No
(a) Base period years Calendar year (or tax year beginning	(b) Adjusted qualifying dist	tributions	Net value of nor	(c) ncharitab	le-use assets	3	Distrib	(d) ution ratio ded by col. (c))
2008		3,419.		4	35,22		(.053809
2007		9,840.			53,78			.065759
2006		1,625.	-		77,454			.024348
2005		7,978.			01,54			.055784
2004		0,180.			81,350			.021149
2 Total of line 1, column (d)						2		.220849
3 Average distribution ratio for the 5-y the foundation has been in existence		on line 2 by 5,	or by the number	of years		3		.044170
4 Enter the net value of noncharitable-	use assets for 2009 from Part X, I	line 5				4		428,114.
5 Multiply line 4 by line 3	÷					_5		18,910.
6 Enter 1% of net investment income	(1% of Part I, line 27b)					6		71.
7 Add lines 5 and 6		-				7		18,981.
8 Enter qualifying distributions from P	art XII, line 4					8	<u></u>	31,050.
If line 8 is equal to or greater than lin See the Part VI instructions.	ne 7, check the box in Part VI, line	1b, and comp	lete that part using	g a 1% ta	x rate.			
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	n 990-PF (2009) C/O KAUFMAN, ROSSIN & CO., P.A. 59-157	4136		Page 4
Pa	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	instru	ctio	ns)
1a	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 letter if necessary-see instructions)			
b	b Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🗶 and enter 1%			71.
	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-)			0.
3	Add lines 1 and 2			71.
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-			71.
6	Credits/Payments:			
а	a 2009 estimated tax payments and 2008 overpayment credited to 2009 6a 517.			
b	Exempt foreign organizations - tax withheld at source			
C	Tax paid with application for extension of time to file (Form 8868)			
d	d Backup withholding erroneously withheld 6d 6			
7	Total credits and payments. Add lines 6a through 6d		5	17.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8			
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		4	46.
11	Enter the amount of line 10 to be: Credited to 2010 estimated tax ▶ 446. Refunded ▶ 11			0.
Pa	art VII-A Statements Regarding Activities			
1a	a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in		Yes	No
	any political campaign?	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see 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.	·		
C	Did the foundation file Form 1120-POL for this year?	1c		Х
d	f 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. ▶ \$			•
е	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?	2		X
	If "Yes," attach a detailed description of the activities.			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or			
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
4a	a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		<u>X</u>
b	o If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
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	1 1		
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	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year?	7	X	
	If "Yes," complete Part II, col (c), and Part XV.			
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)	.		
	FL	.		
b	o 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	_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)? If "Yes," complete Part XIV	9		<u>X</u>
10	Did any persons become substantial contributors during the tax year? if "Yes," attach a schedule listing their names and addresses	10_		_ X
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INSTITUTE FOR MEDICAL & HUMAN RESOURCES Form 990-PF (2009) Page 5 C/O KAUFMAN, ROSSIN & CO., P.A. 59-1574136 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 instructions) X 12 Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008? X 12 13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? X 13 Website address ► N/A 14 The books are in care of **KAUFMAN**, ROSSIN & CO., P.A. Telephone no. ► (305) 858-5600 Located at ► 2699 S. BAYSHORE DR., SUITE 500, MIAMI, FLZIP+4 ▶33133 15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the year N/A 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): 🗌 Yes 🗶 No (1) Engage in the sale or exchange, or leasing of property with a disqualified person? (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) Yes X No a disqualified person? (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No Yes X No (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? (5) Transfer any income or assets to a disqualified person (or make any of either available Yes X No for the benefit or use of a disqualified person)? (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 Yes X No termination of government service, if terminating within 90 days.) 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)? 1b Organizations relying on a current notice regarding disaster assistance check here 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? X 1c 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? Yes X No If "Yes," list the years 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 instructions.) N/A 2b c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. 3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time Yes X No during the year? 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) N/A 3ь

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4a

X

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

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

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

INSTITUTE FOR MEDICAL & HUMAN RESOURCES Form 990-PF (2009) C/O KAUFMAN, ROSSIN & CO., P.A 59-1574136 Page 6 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: Yes X No (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, Yes X No any voter registration drive? (3) Provide a grant to an individual for travel, study, or other similar purposes? Yes X No (4) Provide a grant to an organization other than a charitable, etc., organization described in section Yes X No 509(a)(1), (2), or (3), or section 4940(d)(2)? (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for Yes X No the prevention of cruelty to children or animals? 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 instructions)? N/A 5b 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? N/A _ Yes └ 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 Yes X No a personal benefit contract? b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 6Ь X If "Yes" to 6b, file Form 8870. ☐ Yes 🗶 No 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? 7b Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII Paid Employees, and Contractors 1 List all officers, directors, trustees, foundation managers and their compensation. (c) Compensation (d) Contributions to employee benefit plans and deferred (b) Title, and average hours per week devoted to position (e) Expense account, other (a) Name and address (If not paid, allowances enter -0-1 compensation JOSEPH DORSEY, M.D. PRES/DIRECTOR 1161 SOUTH SOUTHLAKE DRIVE HOLLYWOOD, FL 33019 5.00 0 0. 0 MARILYN DORSEY DIRECTOR 1161 SOUTH SOUTHLAKE DRIVE 0. HOLLYWOOD, FL 33019 5.00 0 0 GRANT PERKS DIRECTOR 1759 MAPLE RIDGE DRIVE MISSISSAUGA, ONTARIO, CANADA L4W2B-5 3.00 0 0 0. 2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (d) Contributions to employee benefit plans and deferred (e) Expense account, other allowances (b) Title, and average (a) Name and address of each employee paid more than \$50,000 hours per week devoted to position (c) Compensation compensation NONE

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

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All other program-related investments. See instructions.

Total. Add lines 1 through 3

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P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations, s	ee instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	254,303.
b	Average of monthly cash balances	1b	254,303. 180,331.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	434,634.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0 .		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	434,634.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	6,520.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	428,114.
6	Minimum investment return Enter 5% of line 5	6	21,406.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations check here and do not complete this part.)	id certain	
1	Minimum investment return from Part X, line 6	1	21,406.
2a	Tax on investment income for 2009 from Part VI, line 5		
b	Income tax for 2009. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	71.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	21,335.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	21,335.
6	Deduction from distributable amount (see instructions)	6	0.
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	21,335.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	31,050.
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	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	31,050.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	71.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	30,979.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	ualifies for t	he section
	4940(e) reduction of tax in those years.		

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Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI, line 7				21,335.
2 Undistributed income, if any, as of the end of 2009				
a Enter amount for 2008 only			10,922.	
b Total for prior years:	·			
		0.		<u> </u>
3 Excess distributions carryover, if any, to 2009:				
a From 2004	ł			
b From 2005				
c From 2006	•			
d From 2007				΄,
e From 2008				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2009 from				
Part XII, line 4: ►\$ 31,050.				
a Applied to 2008, but not more than line 2a			10,922.	
b Applied to undistributed income of prior		_		
years (Election required - see instructions)		0.	,	,
c Treated as distributions out of corpus				
(Election required - see instructions)	0.		· · · · · · · · · · · · · · · · · · ·	
d Applied to 2009 distributable amount				20,128.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a),)	0.			0.
6 Enter the net total of each column as indicated below:				
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income. Subtract			,	
line 4b from line 2b		0.		
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		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.	•	` `
e Undistributed income for 2008. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2009. Subtract	`		- · · -	
lines 4d and 5 from line 1. This amount must				
be distributed in 2010				1,207.
7 Amounts treated as distributions out of				,
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2004				
not applied on line 5 or line 7	0.			`
9 Excess distributions carryover to 2010.				
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:	1			
a Excess from 2005				
b Excess from 2006				
c Excess from 2007				
d Excess from 2008	!			
e Excess from 2009				5 000 PF (0000)

INSTITUTE FOR MEDICAL & HUMAN RESOURCES

Form 990-PF (2009) C/O KAUFMAN, ROSSIN & CO., P.A. 59-1574136 Page 10 Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9) 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 05/11/94 4942(j)(3) or 4942(1)(5) b Check box to indicate whether the foundation is a private operating foundation described in section Tax year Prior 3 years 2 a Enter the lesser of the adjusted net (c) 2007 (a) 2009 (b) 2008 (d) 2006 income from Part I or the minimum (e) Total 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 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 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 Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see the instructions.) 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).) JOSEPH DORSEY, M.D. 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 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 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:

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Part XV Supplementary Information	(continued)			130 1490 11
3 Grants and Contributions Paid During the		Payment		
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
a Paid during the year AMERICAN SOCIETY OF ADDICTION MEDICINE 511 AVENUE OF THE	or śubstantial contributor N/A	PUBLIC CHARITY	GENERAL OPERATIONS	2,000.
AMERICAS NEW YORK, NY				
BURTON MEMORIAL UNITED METHODIST CHURCH 93001 OVERSEAS HIGHWAY TAVERNIER, FL 33070	N/A	PUBLIC CHARITY	GENERAL OPERATIONS	500.
ISLAND COMMUNITY CHURCH 83250 OVERSEAS HIGHWAY ISLAMORADA, FL 33036	N/A	PUBLIC CHARITY	EAGLE SCOUTS PROJECT	1,750.
ST THOMAS AQUINAS HIGH SCHOOL 2801 SW 12TH STREET FT LAUDERDALE, FL 33312	N/A	PUBLIC CHARITY	GENERAL OPERATIONS	25,000.
Total			▶ 3a	29,250
b Approved for future payment				
NONE				
Total 923611 02-02-10	<u> </u>		▶ 3b	0 .

Unrelated business income

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Excluded by section 512, 513, or 514

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

Enter gross amounts unless otherwise indicated.	Unrelate	d business income		ded by section 512, 513, or 514	(e)
1 Program service revenue:	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
a					
b	_				
	l i		†		
c	1				
d					
e					· · · · · · · · · · · · · · · · · · ·
T	-				
g Fees and contracts from government agencies					
2 Membership dues and assessments			-		
3 Interest on savings and temporary cash					
investments			1 4	11 704	
4 Dividends and interest from securities		<u></u>	14	11,784.	
5 Net rental income or (loss) from real estate:	-		ļ i		
a Debt-financed property			<u> </u>		
b Not debt-financed property			<u> </u>		
6 Net rental income or (loss) from personal					
property					
7 Other investment income			15	-2,045.	
8 Gain or (loss) from sales of assets other	1				
than inventory			18	-43,017.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a MISCELLANEOUS INCOME			01	125.	
b		-			
c		-			
d					
e	-				
12 Subtotal. Add columns (b), (d), and (e)	-	0.		-33.153.	0.
13 Total. Add line 12, columns (b), (d), and (e)				13	0. -33,153.
(See worksheet in line 13 instructions to verify calculations.)					337=333
Part XVI-B Relationship of Activities Line No. Explain below how each activity for which include the foundation's exempt purposes (other than	come is reported ii	n column (e) of Part XVI-A			olishment of
		=	-		
· · · · · · · · · · · · · · · · · · ·					
				· · · · · ·	
				·	
					·
000004					
923621 02-02-10					Form 990-PF (2009)

1	Exempt Organ Did the organization directly or ind	rectly engage in any of the following with any other organization	on described in section 501(c) of		Yes	No
•		c)(3) organizations) or in section 527, relating to political organ				
а	•	lation to a noncharitable exempt organization of:				
	(1) Cash	· ·		1a(1)		X
	(2) Other assets			1a(2)		X
b	Other transactions:					
	(1) Sales of assets to a noncharita	able exempt organization		1b(1)		X
	(2) Purchases of assets from a no	oncharitable exempt organization		1b(2)		X
	(3) Rental of facilities, equipment,	or other assets		1b(3)		_X
	(4) Reimbursement arrangements	3		1b(4)		X
	(5) Loans or loan guarantees			1b(5)		<u> X</u>
	• •	embership or fundraising solicitations		1b(6)		<u> </u>
	Sharing of facilities, equipment, ma	ailing lists, other assets, or paid employees		1c		<u> </u>
	If the answer to any of the above is or services given by the reporting column (d) the value of the goods,				ets,	
	If the answer to any of the above is or services given by the reporting to	foundation. If the foundation received less than fair market value other assets, or services received. (c) Name of noncharitable exempt organization		show in		nts
	If the answer to any of the above is or services given by the reporting column (d) the value of the goods,	foundation. If the foundation received less than fair market valu other assets, or services received.	e in any transaction or sharing arrangement,	show in		nts
	If the answer to any of the above is or services given by the reporting column (d) the value of the goods,	foundation. If the foundation received less than fair market value other assets, or services received. (c) Name of noncharitable exempt organization	e in any transaction or sharing arrangement,	show in		nts
	If the answer to any of the above is or services given by the reporting column (d) the value of the goods,	foundation. If the foundation received less than fair market value other assets, or services received. (c) Name of noncharitable exempt organization	e in any transaction or sharing arrangement,	show in		nts
	If the answer to any of the above is or services given by the reporting column (d) the value of the goods,	foundation. If the foundation received less than fair market value other assets, or services received. (c) Name of noncharitable exempt organization	e in any transaction or sharing arrangement,	show in		nts
	If the answer to any of the above is or services given by the reporting column (d) the value of the goods,	foundation. If the foundation received less than fair market value other assets, or services received. (c) Name of noncharitable exempt organization	e in any transaction or sharing arrangement,	show in		nts
	If the answer to any of the above is or services given by the reporting column (d) the value of the goods,	foundation. If the foundation received less than fair market value other assets, or services received. (c) Name of noncharitable exempt organization	e in any transaction or sharing arrangement,	show in		nts
	If the answer to any of the above is or services given by the reporting column (d) the value of the goods,	foundation. If the foundation received less than fair market value other assets, or services received. (c) Name of noncharitable exempt organization	e in any transaction or sharing arrangement,	show in		nts
	If the answer to any of the above is or services given by the reporting column (d) the value of the goods,	foundation. If the foundation received less than fair market value other assets, or services received. (c) Name of noncharitable exempt organization	e in any transaction or sharing arrangement,	show in		nts
	If the answer to any of the above is or services given by the reporting column (d) the value of the goods,	foundation. If the foundation received less than fair market value other assets, or services received. (c) Name of noncharitable exempt organization	e in any transaction or sharing arrangement,	show in		nts
	If the answer to any of the above is or services given by the reporting column (d) the value of the goods,	foundation. If the foundation received less than fair market value other assets, or services received. (c) Name of noncharitable exempt organization N/A	e in any transaction or sharing arrangement,	show in		nts
	If the answer to any of the above is or services given by the reporting column (d) the value of the goods,	foundation. If the foundation received less than fair market value other assets, or services received. (c) Name of noncharitable exempt organization N/A	e in any transaction or sharing arrangement,	show in		nts

Z۵	is the foundation unechy of intriccity affinated with, of fee	ateu tu, une ur mure tax-exempt organizations ut	COLLINGO	
	in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?	. Yes	X No
b	If "Yes," complete the following schedule.			
	(a) Name of organization	(b) Type of organization	(c) Description of relationship	
	N/A			

		l					
	enalties of perjury, I declare that Lhave ex	· · · · · · · · · · · · · · · · · · ·			of my knowledge and	belief, it is true	, correct,
Sı	gnature of officer or trustee) Oracy; M.C	Date	Title			
d rer's only	Preparer's signature	Files	C	7-1A S	Check if self- employed ►	Preparer's (dentifying number
Paid epare se On	Firm's name (or yours / KAUFMAI	N, ROSSIN & CO.	., P.A.		EIN ►		
- Pre Us	if self-employed), 2699 S.	. BAYSHORE DRIV	Æ				
	address, and ZIP code MIAMI,	FLORIDA 33133			Phone no.	(305)	858-5600
	^	4.54 .59 4 .	_			Form	990-PF (2009)

FORM 990-PF DIVIDENDS	AND INTER	EST FROM	SEC	URITIES	STATEMENT	1
SOURCE	GROSS	TRUQMA		PITAL GAINS DIVIDENDS	COLUMN (A	۲)
ENERGY TRANSFER PARTNERS LP		136.		0.		36.
WELLS FARGO/WACHOVIA SECURITIES WELLS FARGP/WACHOVIA SECURITIES		11,583. 65.		0. 0.	11,5	83. 65.
						
TOTAL TO FM 990-PF, PART I, LN	4	11,784.		0.	11,7	84.
FORM 990-PF	OTHER I	NCOME			STATEMENT	2
DESCRIPTION		(A) REVENUE PER BOOKS		(B) NET INVEST- MENT INCOME		
ENERGY TRANSFER PARTNERS - ORDI BUSINESS INCOME FROM K-1 EV ENERGY PARTNERS - ORDINARY	NARY	-5,2	164.	-5,164	,	
BUSINESS INCOME FROM K-1 PENGROWTH ENERGY TRUST A - ROYA	LTY	1,2	217.	1,217		
INCOME – FROM K-1 ENERGY TRANSFER PARTNERS – OTHE	lR		21.	21.	•	
INCOME WELLS FARGO/WACHOVIA			191. 590.	191. . 1,690.		
MISCELLANEOUS INCOME		•	125.	0.		
TOTAL TO FORM 990-PF, PART I, I	INE 11	-1,9	920.	-2,045	,	
FORM 990-PF	ACCOUNTI	NG FEES			STATEMENT	3
	(A) EXPENSES ER BOOKS	(B) NET INVE MENT INC		(C) ADJUSTED NET INCOME	(D) CHARITA PURPOS	
PROFESSIONAL FEES	3,600.	1,	800	•	1,8	00.

FORM 990-PF	OTHER EXPENSES			STATEMENT 4		
DESCRIPTION	(A) EXPENSES PER BOOM		EST-	(C) ADJUSTED NET INCOM		
LICENSES & PERMITS EV ENERGY PARTNERS -		51.	0.			0.
INVESTMENT EXPENSES BANK CHARGES ENERGY PARTNERS LP - OTHER		58. 72.	868.			0. 0.
EXPENSES	•	76.	0.			0.
TO FORM 990-PF, PG 1, LN 23	1,0	77.	868.			0.
FORM 990-PF	OTHER I	INVESTMENTS	}		STATEMENT	
FORM 990-PF DESCRIPTION	OTHER I	INVESTMENTS VALUATION METHOD		OK VALUE	STATEMENT FAIR MARKE	5 T
	INCOME L	VALUATION		0. 0. 0. 55,863. 48,984. 103,053. 44,046. 100,614.	FAIR MARKE	0 . 0 . 0 . 0 . 0 . 0 . 0 . 0 . 0 . 0 .