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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

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

2009

OMB No 1545-0052

Internal Revenue Service 09-30 , 20 10 10-01 , 2009, and ending For calendar year 2009, or tax year beginning Initial return of a former public charity G Check all that apply Initial return Final return Address change Amended return A Employer identification number Name of foundation Use the IRS label. MARGIE L BROWN FAMILY FOUNDATION 42-1310957 Otherwise. Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number (see page 10 of the instructions) print 6376 SAN MICHEL WAY or type. City or town, state, and ZIP code See Specific C if exemption application is pending, check here Instructions. Delray Beach, FL 33484 D 1. Foreign organizations, check here Foreign organizations meeting the 85% test, check here and attach computation X Section 501(c)(3) exempt private foundation H Check type of organization: Other taxable private foundation Section 4947(a)(1) nonexempt charitable trust E if private foundation status was terminated under section 507(b)(1)(A), check here Accrual Fair market value of all assets at Accounting method X Cash Other (specify) end of year (from Part II, col. (c), If the foundation is in a 60-month termination under section 507(b)(1)(B), check here 284,183 (Part I, column (d) must be on cash basis ) line 16) ▶ \$ Part I Analysis of Revenue and Expenses (The total of (d) Disbursements (a) Revenue and for chantable (b) Net investment (c) Adjusted net amounts in columns (b), (c), and (d) may not necessarily equal expenses per books purposes income income the amounts in column (a) (see page 11 of the instructions) ) (cash basis only) Contributions, gifts, grants, etc., received (attach schedule) 24,000 2 Check X If the foundation is not required to attach Sch B Interest on savings and temporary cash investments · · · · 1,288 1,288 1,288 3 4,209 4,209 4,209 4 Gross rents . . . . . . 5a b Net rental income or (loss) R \*\*\* 3,290 3. Net gain or (loss) from sale of 6a ť Sh. م مالادم b Gross sales price for all a Capital gain net income from Alm IV. line 3,290 7 Net short-term capita Income modifications 16th 9 10a Gross sales less returns and allow \$ " も撚りた。 b Less: Cost of goods sold · · · · . . . c Other income (attach schedule) ..... STM106 (603 (603 (603)11 32,184 8,184 4.894 12 Total. Add lines 1 through 11 ...... 13 Compensation of officers, directors, trustees, etc . . . . . 14 Other employee salaries and wages . . . . . . Pension plans, employee benefits . . . . . 16a Legal fees (attach schedule) . . . . . . . 1,347 1.347 1.347 Accounting fees (attach schedule) .... Other professional fees (attach schedule) 17 STM110 128 128 128 Taxes (attach schedule) (see page 14 of the instructions) 67 Depreciation (attach schedule) and depletion · · · · · · · · 20 Travel, conferences, and meetings Printing and publications . . . . . 707 707 707 70 Other expenses (attach schedule) . . . . . Total operating and administrative expenses. 2,182 774 2,182 2,182 Add lines 13 through 23 · · · · · · · · · 39,495 39,495 25 -Contributions, gifts, grants paid . . . . . . . . 41,677 774 2,182 41,677 26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12 (9,493 Excess of revenue over expenses and disbursements 7,410 Net investment income (if negative, enter -0-) 2.712 ٠, Adjusted net income (if negative, enter -0-)

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Datable	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End of yea	ır
Part II	should be for end-of-year amounts only (See instructions )	(a) Book Value		(c) Fair Market Value
1	Cash - non-interest-bearing	82	(243)	(243)
2	Savings and temporary cash investments · · · · · · · · .	101,904	119,164	119,164
3	Accounts receivable			
	Less allowance for doubtful accounts			<del></del>
4	Pledges receivable			
İ	Less¹ 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			
<b>A</b>	instructions) · · · · · · · · · · · · · · · · · · ·			
5 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 · · · · · · · · · L			
10a	Investments - U S and state government obligations (attach schedule)			
b	Investments - corporate stock (attach schedule) • • • • STML 37-	106,583	106,600	107,656
С	investments - corporate bonds (attach schedule) • • • • \$TML 38	25,000	25,000	25,750
11	Investments - land, buildings, and equipment basis	, , , , , , , , , , , , , , , , , , , ,		
	Less accumulated depreciation (attach schedule)			
12	Investments - mortgage loans · · · · · · · · · · · · · · · · · · ·			<u></u>
13	Investments - other (attach schedule) · · · · · · · · · · · · · · · · · · ·	44,308	17,858	31,856
14	Land, buildings, and equipment basis	and analysis and the contract of the contract		
ļ	Less accumulated depreciation (attach schedule)			<del></del>
15	Other assets (describe )			
16	Total assets (to be completed by all filers - see the			
	ınstructions Also, see page 1, item l) · · · · · · · · · · · · · · · · · ·	277,877	268,379	284,183
L 17	Accounts payable and accrued expenses			
a   18	Grants payable			
b   19	Deferred revenue · · · · · · · · · · · · · · · · · · ·			
20	Loans from officers, directors, trustees, and other disqualified persons			
21	Mortgages and other notes payable (attach schedule)			. %
i 22 e	Other liabilities (describe )			
s 23_	Total liabilities (add lines 17 through 22)		0	
	Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.			
N F 24	Unrestricted	277,877	268,379	
'u  <sub>25</sub>	Temporarily restricted • • • • • • • • • • • • • • • • • • •			
d 26	Permanently restricted • • • • • • • • • • • • • • • • • • •			
A	Foundations that do not follow SFAS 117, check here			, ,
S R	and complete lines 27 through 31.	1		+ v
a 27	Capital stock, trust principal, or current funds			
28	Paid-in or capital surplus, or land, bldg., and equipment fund • • •			
s n 29	Retained earnings, accumulated income, endowment, or other funds			
c 30	Total net assets or fund balances (see page 17 of the			
e s	instructions) · · · · · · · · · · · · · · · · · · ·	277,877	268,379	
31	Total liabilities and net assets/fund balances (see page 17			
1	of the instructions)	277,877	268,379	
Part				
1 Tota	I 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) · · · · · · · · · · · · · · · · · · ·			277,877
2 Ente	r amount from Part I, line 27a		2	(9,493)
	r increases not included in line 2 (itemize)		3	
	lines 1, 2, and 3		4	268,384
	reases not included in line 2 (itemize) STM116		5	5
	I not assets or fund balances at end of year (line 4 minus line 5) - Part II o	olumn (b) line 30 · · · ·	6	268,379

	be the kind(s) of property sold (e.g., real estate,	<u>estment Incom</u>	(b) How acquired	(c) Date acquire	d (d) Date sold
	house, or common stock, 200 shs MLC Co)		P-Purchase D-Donation	(yr, mo, day)	(yr, mo, day)
1a See'STM~134					
b					
С					
d		_			
е					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or ot plus expens			) Gain or (loss) plus (f) minus (g)
a 99,452			96,162	<u>_</u> ,	3,290
b					
С					
d					
е					
Complete only for assets she	owing gain in column (h) and owned l	by the foundation on	12/31/69		
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess over col (j)		col (k), but	ns (Col (h) gain minus t not less than -0-) or ses (from col (h))
a					
b					
С					
d					
е					,
2 Capital gain net income or (i	net capital loss)	ilso enter in Part I, lin enter -0- in Part I, lin	<b>&gt;</b> 1	2	3,290
3 Net short-term capital gain of	or (loss) as defined in sections 1222(5	5) and (6)			
· -	ne 8, column (c) (see pages 13 and 1				
	ne 8 • • • • • • • • • • • • • • • • • •		· • •	3	
<del></del>	Under Section 4940(e) for R			nt income	
f "Yes," the foundation does not	e section 4942 tax on the distributable qualify under section 4940(e) Do no	t complete this part	·		Yes No
	nt in each column for each year, see p	page 18 of the instru	ctions before mak	ing any entries	
(a)  Base penod years  Calendar year (or tax year beginning i			(c) onchantable-use assets	; (∞	(d) Distribution ratio I (b) divided by col (c))
2008	24,	371	270,5	30	0.090086
2007	37,		375,2		0.100025
2006	21,	339	380,8	99	0.056023
2005	32,	608	380,8	99	0.085608
2004	7,	195	360,1	20	0.019979
2 Total of line 1, column (d)				2	0.351721
<u> </u>	r the 5-year base period - divide the to	•	•		0.070344
number of years the foundat	tion has been in existence if less than	15 years • • • • •	• • • • • • •	3	0.070344
4 Enter the net value of nonch	naritable-use assets for 2009 from Pa	rt X, line 5		• • 4	280,894
5 Multiply line 4 by line 3 · ·				5	19,759
6 Enter 1% of net investment	income (1% of Part I, line 27b) · · ·			6	74
7 Add lines 5 and 6				7	19,833
8 Enter qualifying distributions					41,677
If line 8 is equal to or greate Part VI instructions on page	r than line 7, check the box in Part VI, 18	, line 1b, and comple	ete that part using	a 1% tax rate S	ee the

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	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of the instruction	ons)		
1a	Exempt operating foundations described in section 4940(d)(2), check here   and enter "N/A" on line 1			
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)		·	<u>_</u>
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			74
	here` ▶ 🗓 and enter 1% of Part I, line 27b · · · · · · · · · · · · · · · · · · ·			1
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of			
	Part I, line 12, col (b)			^
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) • 2			74
3	Add lines 1 and 2			- /4
4	Cubinity / (into the) tex (defines to except to the except text and text an			74
5		_		
6	Credits/Payments 2009 estimated tax payments and 2008 overpayment credited to 2009 • • 6a 138			-
a	2009 estimated tax payments and 2008 overpayment credited to 2009 · · 6a 138  Exempt foreign organizations - tax withheld at source · · · · · · · · · · · 6b		ι	1
b	Tax paid with application for extension of time to file (Form 8868) 6c			
ď	Backup withholding erroneously withheld			1
7	Total credits and payments Add lines 6a through 6d · · · · · · · · · · · · · · · · · ·			138
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 ••••••• 9			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			64
11	Enter the amount of line 10 to be Credited to 2010 estimated tax   64 Refunded   11			
	TiVIIA Statements Regarding Activities			
<u>≀ हुवा</u> 1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
	participate or intervene in any political campaign?	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19			
	of the instructions for definition)?	1b		Х
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			
	published or distributed by the foundation in connection with the activities			,
С	Did the foundation file Form 1120-POL for this year?	1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation ▶\$ (2) On foundation managers ▶\$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
	on foundation managers >\$			
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	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b	ļ.	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
	If "Yes," attach the statement required by General Instruction T			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			-
	By language in the governing instrument, or			
	<ul> <li>By state legislation that effectively amends the governing instrument so that no mandatory directions that</li> </ul>			
	conflict with the state law remain in the governing instrument?	6		
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV ••	7	X	
8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the			
	instructions) ► FL		*	[
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			ļ
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	ļ <u>.</u>	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	9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	٠,		
	names and addresses	10	ı	l Y

•			_	_	_
	(2000)	-131095	7	P	<u> </u>
Pai	TYVII-A: Statements Regarding Activities (continued)	<del></del>			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			ŀ	
	meaning of section 512(b)(13)? If "Yes," attach schedule (see page 20 of the instructions)	•••	11		<u>X</u>
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before		- {		
	Augúst 17, 2008?	•••	12		<u>X</u>
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	· · · L	13		
	Website address N/A				
14	The books are in care of MARGIE L SIMON Telephone no				
	Located at ▶ 6376 SAN MICHEL WAY Delray Beach, FL ZIP+4 ▶	33484			
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 • • • • • • • • • • • • • • • • • • •	;			
Pa	rt 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.	L		Yes	No
1a	During the year did the foundation (either directly or indirectly)	_	-		1
•		K No		1	. [
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	_			
		X No			]
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? · · · · · Yes	X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? · · · · · · L Yes	X No			]
	(5) Transfer any income or assets to a disqualified person (or make any of either available for	_			1
		X No			1
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the				í
	foundation agreed to make a grant to or to employ the official for a period after				1
	termination of government service, if terminating within 90 days ) · · · · · · · · · · · · · · · · · ·	X No	į		
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)? • • • •	<u>.</u> L	1b		
	Organizations relying on a current notice regarding disaster assistance check here	_	- 1		i
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))				
а	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?	X No			ı
	If "Yes," list the years		- 1		
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	اما			
	all years listed, answer "No" and attach statement - see page 20 of the instructions )	. <b></b> . L	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	_			
		X No			
b	If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or		1		
	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		L
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		Х

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	rt VII-B Statements Regarding Activitie	es for \	Nhich Forn	n 4720	May Be	Requi	ed (co	ontinued)_			
5a	During the year did the foundation pay or incur any ar										
	(1) Carry on propaganda, or otherwise attempt to infl	luence le	gislation (sect	on 4945	(e))? · ·		Yes	X No	ŀ		
	(2) Influence the outcome of any specific public election	tion (see	section 4955)	or to ca	rry on,						
	directly or indirectly, any voter registration drive?						Yes	X No			
	(3) Provide a grant to an individual for travel, study, of	or other s	simılar purpose	ş?			Yes	X No			
	(4) Provide a grant to an organization other than a cl					•					
	section 509(a)(1), (2), or (3), or section 4940(d)(2	?)? (see ¡	page 22 of the	instructi	ons) · · ·	• • •	Yes	X No			
	(5) Provide for any purpose other than religious, cha	ritable, s	cientific, literar	y, or edu	ıcatıonal	•	_				
	purposes, or for the prevention of cruelty to child	ren or an	ımals? • •				Yes	X No			
b	If any answer is "Yes" to 5a(1)-(5), did any of the tran	sactions	fail to qualify u	inder the	exceptions	describe	ed in	(===	1	~ ;	
	Regulations section 53 4945 or in a current notice reg	garding o	lisaster assista	nce (se	e page 22 of	the insti	uctions)	?	5b		
	Organizations relying on a current notice regarding d	saster a	ssistance chec	k here			· · · <b>&gt;</b>				
С	If the answer is "Yes" to question 5a(4), does the four									{	
	because it maintained expenditure responsibility for t	he grant	,				Yes	No		,	
	If "Yes," attach the statement required by Regulations	s section	53 4945-5(d)			'	_				
6a	Did the foundation, during the year, receive any fund	s, directly	y or indirectly, t	o pay pr	emiums						
	on a personal benefit contract? • • • • • • • • • • • • • • • • • • •						Yes	X No	-1		
b	Did the foundation, during the year, pay premiums, d					ntract?		• • • • •	6b		X
	If "Yes" to 6b, file Form 8870	•	•	•					-	,	
7a	At any time during the tax year, was the foundation a	party to	a prohibited ta	x shelter	transaction	? .	Yes	X No			
	If yes, did the foundation receive any proceeds or har						•••		7b		
	nt VIII Information About Officers, Dire						s. High	lv Paid	Empl	ovee	s.
1.54	and Contractors	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,				, <del>.</del>	,	,	-,	-,
1 L	ist all officers, directors, trustees, foundation manag	ers and	their compens	ation (se	ee page 22 c	of the ins	tructions	5).			
	(a) Name and address	(b) Title	e, and average	(c) Co	mpensation	(d)	Contribution	ns to	(e) Expe	ense acc	count,
	(-)		s per week d to position		paid, enter -0-)		yee benefit rred comp		othera	illowanc	es
MAR	GIE B SIMON	DIREC	TOR								
			1011								
637	6 SAN MICHEL WAY, FL 33484		0		0			0			0
	6 SAN MICHEL WAY, FL 33484 ALD J BROWN	DIREC	0		0			0			0
RON		DIREC	0		0			0			0
RON.	ALD J BROWN	DIREC	0 TOR 0					<u>i</u>			
RON 411 JUD	ALD J BROWN 0 BASSWOOD RD, MN 55416		0 TOR 0					<u>i</u>			
RON 411 JUD	ALD J BROWN 0 BASSWOOD RD, MN 55416 Y EHRENWERTH		TOR 0		0			0			0
RON 411 JUD	ALD J BROWN 0 BASSWOOD RD, MN 55416 Y EHRENWERTH		TOR 0		0			0			0
RON. 411 JUD 200	ALD J BROWN 0 BASSWOOD RD, MN 55416 Y EHRENWERTH	DIREC	TOR 0	line 1 -	0	of the in	structio	0			0
2 (	ALD J BROWN 0 BASSWOOD RD, MN 55416 Y EHRENWERTH W WASHINGTON SQUARE 4107, PA 19106	DIREC	TOR 0	line 1 -	0	of the in	struction	0			0
2 (	ALD J BROWN 0 BASSWOOD RD, MN 55416 Y EHRENWERTH W WASHINGTON SQUARE 4107, PA 19106 Compensation of five highest-paid employees (other t	DIREC	TOR 0 TOR 0		0	of the ir	(d) Contr	0 0 ns).			0
2 (	ALD J BROWN 0 BASSWOOD RD, MN 55416 Y EHRENWERTH W WASHINGTON SQUARE 4107, PA 19106 Compensation of five highest-paid employees (other t	DIREC	TOR 0  TOR 0  TOR 0  Tolk eincluded on hours per w	verage eek	0		(d) Contri	0 0 ns).	(e) Exp	ense acc	0 0 count,
2 (	ALD J BROWN  0 BASSWOOD RD, MN 55416  Y EHRENWERTH  W WASHINGTON SQUARE 4107, PA 19106  Compensation of five highest-paid employees (other to find the property of the propert	DIREC	TOR 0 TOR 0 TOR 10 To Description of the control of	verage eek	0 0 see page 23		(d) Contr	0 0 ns).			0 0 count,
2 (	ALD J BROWN  0 BASSWOOD RD, MN 55416  Y EHRENWERTH  W WASHINGTON SQUARE 4107, PA 19106  Compensation of five highest-paid employees (other to find the paid more than \$50,000)  (a) Name and address of each employee paid more than \$50,000)	DIREC	TOR 0  TOR 0  TOR 0  Tolk eincluded on hours per w	verage eek	0 0 see page 23		(d) Contri employed plans and	0 0 ns).			0 0 count,
2 (	ALD J BROWN  0 BASSWOOD RD, MN 55416  Y EHRENWERTH  W WASHINGTON SQUARE 4107, PA 19106  Compensation of five highest-paid employees (other to find the paid more than \$50,000)  (a) Name and address of each employee paid more than \$50,000)	DIREC	TOR 0  TOR 0  TOR 0  Tolk eincluded on hours per w	verage eek	0 0 see page 23		(d) Contri employed plans and	0 0 ns).			0 0 count,
2 (	ALD J BROWN  0 BASSWOOD RD, MN 55416  Y EHRENWERTH  W WASHINGTON SQUARE 4107, PA 19106  Compensation of five highest-paid employees (other to find the paid more than \$50,000)  (a) Name and address of each employee paid more than \$50,000)	DIREC	TOR 0  TOR 0  TOR 0  Tolk eincluded on hours per w	verage eek	0 0 see page 23		(d) Contri employed plans and	0 0 ns).			0 0 count,
2 (	ALD J BROWN  0 BASSWOOD RD, MN 55416  Y EHRENWERTH  W WASHINGTON SQUARE 4107, PA 19106  Compensation of five highest-paid employees (other to find the paid more than \$50,000)  (a) Name and address of each employee paid more than \$50,000)	DIREC	TOR 0  TOR 0  TOR 0  Tolk eincluded on hours per w	verage eek	0 0 see page 23		(d) Contri employed plans and	0 0 ns).			0 0 count,
2 (	ALD J BROWN  0 BASSWOOD RD, MN 55416  Y EHRENWERTH  W WASHINGTON SQUARE 4107, PA 19106  Compensation of five highest-paid employees (other to find the paid more than \$50,000)  (a) Name and address of each employee paid more than \$50,000)	DIREC	TOR 0  TOR 0  TOR 0  Tolk eincluded on hours per w	verage eek	0 0 see page 23		(d) Contri employed plans and	0 0 ns).			0 0 count,
2 (	ALD J BROWN  0 BASSWOOD RD, MN 55416  Y EHRENWERTH  W WASHINGTON SQUARE 4107, PA 19106  Compensation of five highest-paid employees (other to find the paid more than \$50,000)  (a) Name and address of each employee paid more than \$50,000)	DIREC	TOR 0  TOR 0  TOR 0  Tolk eincluded on hours per w	verage eek	0 0 see page 23		(d) Contri employed plans and	0 0 ns).			0 0 count,
2 (	ALD J BROWN  0 BASSWOOD RD, MN 55416  Y EHRENWERTH  W WASHINGTON SQUARE 4107, PA 19106  Compensation of five highest-paid employees (other to find the paid more than \$50,000)  (a) Name and address of each employee paid more than \$50,000)	DIREC	TOR 0  TOR 0  TOR 0  Tolk eincluded on hours per w	verage eek	0 0 see page 23		(d) Contri employed plans and	0 0 ns).			0 0 count,
2 (	ALD J BROWN  0 BASSWOOD RD, MN 55416  Y EHRENWERTH  W WASHINGTON SQUARE 4107, PA 19106  Compensation of five highest-paid employees (other to find the paid more than \$50,000)  (a) Name and address of each employee paid more than \$50,000)	DIREC	TOR 0  TOR 0  TOR 0  Tolk eincluded on hours per w	verage eek	0 0 see page 23		(d) Contri employed plans and	0 0 ns).			0 0 count,
2 (	ALD J BROWN  0 BASSWOOD RD, MN 55416  Y EHRENWERTH  W WASHINGTON SQUARE 4107, PA 19106  Compensation of five highest-paid employees (other to find the paid more than \$50,000)  (a) Name and address of each employee paid more than \$50,000)	DIREC	TOR 0  TOR 0  TOR 0  Tolk eincluded on hours per w	verage eek	0 0 see page 23		(d) Contri employed plans and	0 0 ns).			0 0 count,

Part VIII Information About Officers, Directors, Trustees, F and Contractors (continued)		
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
ONE .		
,		
al number of others receiving over \$50,000 for professional services · · · · ·		<b>&gt;</b>
art IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Information such as the number of	Expenses
riguination and outside political to be read, so more than the first and a representation of the		
	····	
N 36.56 % (I		
Part X-B Summary of Program-Related Investments (see page 2)		
Describe the two largest program-related investments made by the foundation during the tax year on line	s 1 and 2	Amount
2		
		1
All other program-related investments See page 24 of the instructions		
3		
ntal Add lines 1 through 3		

ura	see page 24 of the instructions )	nualion	>,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes:	1.5	
а	Average monthly fair market value of securities	1a	180,202
b	Average of monthly cash balances	1b	104,970
С	Fair market value of all other assets (see page 24 of the instructions)	1c	0
đ	Total (add lines 1a, b, and c)	1d	285,172
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) · · · · · · · · · · · · · · · le		
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d · · · · · · · · · · · · · · · · · ·	3	285,172
4	Cash deemed held for charitable activities  Enter 1 1/2% of line 3 (for greater amount, see page 25 of		
	the instructions)	4	4,278
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4 · ·	5	280,894
6	Minimum investment return. Enter 5% of line 5	6	14,045
වෘ	Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) private op foundations and certain foreign organizations check here  and do not complete this part )	erating	
1	Minimum investment return from Part X, line 6 · · · · · · · · · · · · · · · · · ·	1	14,045
2a	Tax on investment income for 2009 from Part VI, line 5 · · · · · · · · 2a 74		
b	Income tax for 2009 (This does not include the tax from Part VI ) · · · · 2b		
С	Add lines 2a and 2b	2c	74
3	Distributable amount before adjustments Subtract line 2c from line 1	3	13,971
4	Recoveries of amounts treated as qualifying distributions • • • • • • • • • • • • • • • • • • •	4	
5	Add lines 3 and 4 · · · · · · · · · · · · · · · · · ·	5	13,971
6	Deduction from distributable amount (see page 25 of the instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1 • • • • • • • • • • • • • • • • • •	7	13,971
	Qualifying Distributions (see page 25 of the instructions)	1 1	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes	40	41 677
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26 · · · · · · · · · · · · · · · · · ·	1a	41,677
Ъ		10	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	2	
	k. k	2 2,32,1	
3	Amounts set aside for specific charitable projects that satisfy the	3a	
a	Suitability test (prior IRS approval required)	3b	
b	Cash distribution test (attach the required schedule)		A1 677
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	41,677
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income	5	74
6	Enter 1% of Part I, line 27b (see page 26 of the instructions)	6	41,603
6		سنب	-
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether t	iie iouii	uation
	qualifies for the section 4940(e) reduction of tax in those years		

_	rt XIII Undistributed Income (see p			42-15103	- raye s
Га	It All   Olidistributed income (000 P				
1	Distributable amount for 2009 from Part XI,	(a) Corpus	(b) Years pnor to 2008	(c) 2008	<b>(d)</b> 2009
	line 7				13,971
2	Undistributed income, if any, as of the end of	2009			· · · · · · · · · · · · · · · · · · ·
а	Enter amount for 2008 only	<b>i</b>			
b	Total for prior years:				
3	Excess distributions carryover, if any, to 2009				
а	From 2004				
b	<b>1</b>	1,327			
C	<u></u>	3,136			
ď		3,945			
e		0,906			
f	Total of lines 3a through e				
4	Qualifying distributions for 2009 from Part XII,				
	line 4 > \$ 41,677				
а					
	Applied to undistributed income of prior years				
	(Election required - see page 26 of the instruc	tions)			
С	Treated as distributions out of corpus (Electio	·			· · · · · · · · · · · · · · · · · · ·
•		·			•
d	Applied to 2009 distributable amount • • •				13,971
e	Remaining amount distributed out of corpus				10,571
5	Excess distributions carryover applied to 2009	<del></del>		<del></del>	
Ů	(If an amount appears in column (d), the same	<del></del>			
	amount must be shown in column (a).)	´			
6	Enter the net total of each column as				
•	indicated below:				,
а	Corpus Add lines 3f, 4c, and 4e. Subtract line	5 - 72,020			
b	Prior years' undistributed income. Subtract	12,020			<del></del>
-	line 4b from line 2b · · · · · · · ·				
•	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		<del></del>		
•					
е	Undistributed income for 2008 Subtract line				
·	4a from line 2a. Taxable amount - see page	]			
	27 of the instructions • • • • • • • • • •				,
f					<u> </u>
'	4d and 5 from line 1. This amount must be				
	distributed in 2010 · · · · · · · · ·				O
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) · · · · · · · · · · · · · ·				
8	Excess distributions carryover from 2004 not	-			<del></del>
J	applied on line 5 or line 7 (see page 27 of the				
	instructions) • • • • • • • • • • • • • • • • • • •				
9	Excess distributions carryover to 2010.		<u>, , , , , , , , , , , , , , , , , , , </u>		<del></del>
J	-	72,020			
40	Subtract lines 7 and 8 from line 6a · · · ·	12,020		-	<del> </del>
10	Analysis of line 9:  Excess from 2005	1 227			
a		1,327 3,136			
b		3,136			
C					
d		7, 706			
е	Excess from 2009 · · · · 2	7,706		1	

rm 9		OWN FAMILY FO			42-1310957	Pag
	XIV Private Operating Found				on 9)	
а	If the foundation has received a ruling or		·	-		
_	foundation, and the ruling is effective for					
b	Check box to indicate whether the found		erating foundation des	4942(J)(3) or 49	42(j)(5)	
3	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year	ļ	Prior 3 years		(e) Total
	investment return from Part X for each year listed	(a) 2009	<b>(b)</b> 2008	(c) 2007	(d) 2006	
)	85% of line 2a • • • • • • • • •					
;	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					
е	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:					
а	"Assets" alternative test - enter (1) Value of all assets · · · · ·					
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
)	"Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
;	"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 · · ·					
<u>rt</u>	Supplementary Informat any time during the year Information Regarding Foundation Man	- see page 28 agers:	of the instructio	ns.)		assets at
3	List any managers of the foundation who before the close of any tax year (but only	have contributed noted that they have contributed in the contributed i	nore than 2% of the to outed more than \$5,00	tal contributions receive 00) (See section 507(d)	ed by the foundation (2))	
	N/A,					
•	List any managers of the foundation who ownership of a partnership or other entity				rge portion of the	
	N/3					
	N/A, Information Regarding Contribution, Gr	ant Gift Loan Sch	olarship etc. Progra	ıms:		
	Check here ► X if the foundation only unsolicited requests for funds. If the four	makes contribution	s to preselected char	itable organizations and		
	organizations under other conditions, co					
а	The name, address, and telephone num			nould be addressed	· · ·	
	The form in which applications should be	oubmitted and infe	amotion and materials	thou should include		
b	THE TOTAL III WHICH APPRICATIONS SHOULD DE	s submitted and lift	zimativn anu materiali	s incy should molde		

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

EEA

Any submission deadlines:

factors:

Form 990-PF (2009)

Page 11

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

		If recipient is an individual, show any relationship to any foundation manager	status of	Purpose of grant or contribution	Amount	
business)	)	or substantial contributor	recipient			
				CHARITABLE		
PA	15230	NONE	501 (C) (3)		10,000	
				CHARITABLE		
				1		
IA	50312	NONE	501 (C) (3)		285	
CIETY				CHARITABLE		
FL	33310	NONE	501 (C) (3)		25	
MUSEU	м			EDUCATIONAL		
				CHARITABLE		
DC	20090	NONE	501 (C) (3)		200	
				EDUCATIONAL		
				1		
FL	33261	NONE	501 (C) (3)		50	
TTEE				CHARITABLE		
				EDUCATIONAL		
NY	10022	NONE	501 (C) (3)		100	
				CULTURAL		
				EDUCATIONAL		
FL	33432	NONE	501 (C) (3)		80	
				RESEARCH		
				İ		
TX	75231	NONE	501 (C) (3)		95	
				▶ 3a		
	<del></del>					
	ENY CTY 735 PA  IA OCIETY FL  DC  FL  ITTEE NY  FL	ENY CTY 735 PA 15230  IA 50312  OCIETY FL 33310  L MUSEUM DC 20090  FL 33261  ITTEE NY 10022  FL 33432  TX 75231	ENY CTY 735 PA 15230 NONE  IA 50312 NONE  CCIETY FL 33310 NONE  L MUSEUM  DC 20090 NONE  FL 33261 NONE  ITTEE  NY 10022 NONE  TX 75231 NONE	DUSINESS   Or Substantial Contributor	ENY CTY  735  PA 15230  NONE  501 (C) (3)  CHARITABLE  IA 50312  NONE  501 (C) (3)  CHARITABLE  EDUCATIONAL  TTEE  NY 10022  NONE  501 (C) (3)  CULTURAL  EDUCATIONAL  TX 75231  NONE  501 (C) (3)	

Supplementary Information (continued)

3. Grants and Contributions Paid During the Year or Approved for Future Payment

. Recipient			If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount	
Name and address (home or b	)	or substantial contributor	recipient				
a Paid during the year				}	i		
GREATER BOCA CANCER RE	SEARC	H F			RESEARCH		
Boca Raton	FL	33432	NONE	501 (C) (3)	EDUCATIONAL	230	
UNITED JEWISH FEDERATI	OM OF	nn n			CUARTMARKE		
234 MCKEE PLACE	ON OF	PB .			CHARITABLE		
Pittsburgh	PA	15213	NONE	501 (C) (3)		0.000	
Pictsburgn	PA	15213	NONE	501(C)(3)		8,060	
JEWISH FEDERATION OF S	PB CT	Y		į	CHARITABLE		
9901 DONNA KLEIN BLVD		_					
Boca Raton	FL	33428	NONE	501 (C) (3)		6,080	
HADASSAH					CHARITABLE		
2900 N MILITARY TRAIL					CHARTIABLE		
Boca Raton	FL	33431	NONE	501 (C) (3)	ļ	100	
Boca Racon		33431	NONE	301(0)(3)	1	100	
EASTER SEALS SOCIETY				}	RESEARCH		
233 S WACKER DR							
Chicago	IL	60606	NONE	501 (C) (3)		50	
ALZHEIMERS ASSOCIATION	Ī			]	RESEARCH		
3333 FOREST HILL BLVD					EDUCATIONAL		
West Palm Beach	FL	33406	NONE	501 (C) (3)		50	
HOSPICE OF PALM BEACH	COUNT	Y		<u> </u>	CHARITABLE		
5300 EAST AVE							
West Palm Beach	FL	33407	NONE	501 (C) (3)		100	
PITTSBURGH AREA JEWISH	COMM	<b>ተ</b> ጥጥ			EDUCATIONAL		
4905 FIFTH AVE SUITE 5					RELIGIOUS		
Pittsburgh	PA	15213	NONE	501 (C) (3)	CHARITABLE	5,000	
						5,000	
					▶ 3a		
<b>b</b> Approved for future payment			}	{			
			Ĭ	Ì			
				1	l l		
					<u> </u>		
				1	1		
				1			
			1	1			
					]		
				ļ			
Total					3b		

Parit XV Supplementary Information (continued)

UNIV MED CTR FDN UNIV OF AZ 655 E RIVER RD TOUGON AZ 85704 NONE 501 (C) (3)  RESEARCH 1.00  RELIGIOUS 1.11  REMAINSTANT ON 44505 NONE 501 (C) (3)  RELIGIOUS  1.11  REMAINSTANT ON 44505 NONE 501 (C) (3)  RELIGIOUS  1.11  REMAINSTANT ON 44505 NONE 501 (C) (3)  RELIGIOUS  1.11  REMAINSTANT ON 44505 NONE 501 (C) (3)  RELIGIOUS  1.11  REMAINSTANT ON 4500 NONE 501 (C) (3)  RELIGIOUS  1.11  RELIGIOUS  1.12  RELIGIOUS  1.13  RELIGIOUS  1.14  RELIGIOUS  1.15  RELIGIOUS  1.15  RELIGIOUS  1.16  RELIGIOUS  1.17  RELIGIOUS  1.18  RELIGIOUS  1.19  RELIGIOUS  1.10  RELIG	<b>Grants and Contribu</b>	<u>itions Pa</u>	aid During the	e Year or Approve	<u>d for Future P</u>	ayment	
NAME DIA DIOTOSS (NOME OF DUBLINSS)  a Paid duming the year  PITTSBURGH STMENORY  600 Fenn Aw 1  PALLEBURGH STMENORY  ESSEARCH  ESSEARCH  EDUCATIONAL  LUNIV MED CTR FON UNIV OF AZ  655 E RIVER RD  TUGBON  AZ 85704  MONE 501(C)(3)  ESSEARCH  EDUCATIONAL  LONGEGRATION ROTER SHALCH  LI19 EIM STREET  YOUNGSTOWN ON 44505  MONE 501(C)(3)  RELIGIOUS  TEMBLE ISBREL MINNEAPOLIS  2324 EMERSON AVE SOUTH  MAINEAPOLIS IN SUBUM OF BOCA RATO  4396 CRAMFORD BLVD  BOCA RATON  FL 33432  MONE 501(C)(3)  TOTAL  Approved for future payment				any foundation manager	status of	Purpose of grant or contribution	Amount
PITTSBUGGI STMERONY SOOP Penn Ave 1 Pittsburgh PA 15222 NONE 501(C)(3)  SOOP Penn Ave 1 Pittsburgh PA 15222 NONE 501(C)(3)  UNIV MED CTR FON UNIV OF AZ 655 E RIVER RO TOSON AZ 85704 NONE 501(C)(3)  MEMORIAL SLOAN RETTERING 1275 YORK AVE New York NY 10065 NONE 501(C)(3)  CONGREGATION RODEF SHALOM 1119 ELM STREET TOUNGSTOWN OH 44505 NONE 501(C)(3)  TEMPLE ISRAEL MINNEAPOLIS 2324 EMERSON AVE SOUTH MINNEAPOLIS MN 55405 NONE 501(C)(3)  CHILDREN'S MUSEUM OF BOCA RATO 436 CANAFORD BLVD BOCA RATON FL 33432 NONE 501(C)(3)  Total  Total  Total  Total  Total  Total		or business	·)	or substantial contributor			
### 501 (c) (3)					İ		
### Pattsburgh				}	}	COLTORAL	
UNIV MED CTR FDN UNIV OF AZ 655 E RIVER RD TGGSON AZ 85704 NONE 501(C)(3)  MEMORIAL SLOAN RETTERING 1275 YORK AVE New York NY 10065 NONE 501(C)(3)  RESEARCH  CONGREGATION RODEF SHALOM 1119 ELIM STREET Youngstown OH 44505 NONE 501(C)(3)  TEMBLE ISRAEL MINNEAPOLIS 2224 REMERSON AVE SOUTH Minneapolis NN 55405 NONE 501(C)(3)  CHILDREN'S MUSEUM OF BOCA RATO 498 CRAMFORD BLVD BOCA RATON FL 33432 NONE 501(C)(3)  Total  Total  Total  Total  Total  Total  Total  Total  Total  RESEARCH EDUCATIONAL  CULTURAL EDUCATIONAL  39,45		-	15000	, vov.	505 (5) (3)	l l	
### STORY   ST	Pittsburgn	PA	15222	NONE	501 (C) (3)		5,000
### STORY   ST	, , , , , , , , , , , , , , , , , , ,		~		}		
Tugeon AZ 85704 NONE 501(C)(3) 1,00  MEMORIAL SLOAN KETTERING 1275 YORK AVE New York NY 10065 NONE 501(C)(3)  RESEARCH  RESEARCH  RESEARCH  RESEARCH  RESEARCH  RELIGIOUS  111  RELIGIOUS  112  RELIGIOUS  113  RELIGIOUS  114  RELIGIOUS  12324 EMBERSON ANVE SOUTH Minneapolis NN 55405 NONE 501(C)(3)  CHILDREN'S HUSEUM OF BOCA RATO 498 CRAMFORD BLVD  Boca Raton FL 33432 NONE 501(C)(3)  Total  Total  Total  Total  Total		IIV OF A	Z		İ		
MEMORIAL SLOAN KETTERING  1275 YORK AVE  New York  NY 10065  NONE  501(C)(3)  RELIGIOUS  1119 ELM STREET  YOUNGSTOWN  ON 44505  NONE  501(C)(3)  RELIGIOUS  115  TEMPLE ISRAEL MINNEAPOLIS 2224 EMERSON AVE SOUTH Minneapolis  Minneapolis  Minneapolis  CHILDREN'S MUSEUM OF BOCA RATO 498 CRAMFORD BLVD  Boca Raton  FL 33432  NONE  501(C)(3)  CULTURAL  EDUCATIONAL  117  Total  Total  Total						EDUCATIONAL	
1275 YORK AVE New York No York New York	Tucson	AZ	85704	NONE	501 (C) (3)	ļ	1,000
1275 YORK AVE New York No York New York	\#\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\	D-110					
New York NY 10065 NONE 501(C)(3)  CONGREGATION RODEF SHALOM 1119 ELM STREET Youngstown OH 44505 NONE 501(C)(3)  RELIGIOUS  12  RELIGIOUS  12  RELIGIOUS  12  RELIGIOUS  12  RELIGIOUS  12  RELIGIOUS  12  RELIGIOUS  12  RELIGIOUS  12  RELIGIOUS  13  RELIGIOUS  14  RELIGIOUS  15  RELIGIOUS  16  RELIGIOUS  17  RELIGIOUS  17  RELIGIOUS  18  RELIGIOUS  19  RELIGIOUS  19  RELIGIOUS  10  RELIGIOUS  10  RELIGIOUS  10  RELIGIOUS  11  RELIGIOUS  11  RELIGIOUS  11  RELIGIOUS  12  RELIGIOUS  12  RELIGIOUS  12  RELIGIOUS  13  RELIGIOUS  14  RELIGIOUS  15  RELIGIOUS  15  RELIGIOUS  16  RELIGIOUS  16  RELIGIOUS  17  RELIGIOUS  16  RELIGIOUS  16  RELIGIOUS  17  RELIGIOUS  16  RELIGIOUS  17  RELIGIOUS  17  RELIGIOUS  19		KING			ì	RESEARCH	
CONGREGATION RODEF SHALOM  1119 ELM STREET Youngstown OH 44505 NONE 501(C)(3)  TEMPLE ISRAEL MINNEAPOLIS 2324 EMERSON AVE SOUTH Minneapolis MM 55405 NONE 501(C)(3)  CHILDREN'S MUSEUM OF BOCA RATO 498 CRAWFORD BLVD Boca Raton FL 33432 NONE 501(C)(3)  Total  Total  Total  Total  Total  Total  Total  RELIGIOUS  11  RELIGIOUS  12  RELIGIOUS  12  RELIGIOUS  12  RELIGIOUS  13  Approved for fultre payment			40045			į	
1119 ELM STREET YOUNGSTOWN OH 44505 NONE 501(C)(3)  TEMPLE ISRAEL MINNEAPOLIS 2324 EMERSON AVE SOUTH Minneapolis MN 55405 NONE 501(C)(3)  CHILDREN'S MUSEUM OF BOCA RATO 498 CRAWFORD BLVD Boca Raton FL 33432 NONE 501(C)(3)  Total  Total  Total  Total  Approved for future payment	New York	NY	10065	NONE	501 (C) (3)		50
1119 ELM STREET YOUNGSTOWN OH 44505 NONE 501(C)(3)  TEMPLE ISRAEL MINNEAPOLIS 2324 EMERSON AVE SOUTH Minneapolis MN 55405 NONE 501(C)(3)  CHILDREN'S MUSEUM OF BOCA RATO 498 CRAWFORD BLVD Boca Raton FL 33432 NONE 501(C)(3)  Total  Total  Total  Total  Approved for future payment							
Youngstown OH 44505 NONE 501(C)(3)  TEMPLE ISRAEL MINNEAPOLIS 2324 EMERSON AVE SOUTH Minneapolis MN 55405 NONE 501(C)(3)  CHILDREN'S MUSEUM OF BOCA RATO 498 CRAWFORD BLVD Boca Raton FL 33432 NONE 501(C)(3)  Total		HALOM				RELIGIOUS	
TEMPLE ISRAEL MINNEAPOLIS 2324 EMERSON AVE SOUTH Minneapolis MN 55405 NONE 501(C)(3)  CHILDREN'S MUSEUM OF BOCA RATO 498 CRAWFORD BLVD Boca Raton FL 33432 NONE 501(C)(3)  Total			44555				
2324 EMERSON AVE SOUTH Minneapolis MN 55405 NONE 501(C)(3)  CHILDREN'S MUSEUM OF BOCA RATO 498 CRAWFORD BLVD Boca Raton FL 33432 NONE 501(C)(3)  Total  Tota	Youngstown	ОН	44505	NONE	501 (C) (3)		150
2324 EMERSON AVE SOUTH Minneapolis MN 55405 NONE 501(C)(3)  CHILDREN'S MUSEUM OF BOCA RATO 498 CRAWFORD BLVD Boca Raton FL 33432 NONE 501(C)(3)  Total  Total  Total  Total  Approved for future payment  33 39,45							
Minneapolis MN 55405 NONE 501(C)(3) 2,66  CHILDREN'S MUSEUM OF BOCA RATO 498 CRAWFORD BLVD Boca Raton FL 33432 NONE 501(C)(3) 1:  Total  Approved for future payment 3a 39,45						RELIGIOUS	
CHILDREN'S MUSEUM OF BOCA RATO  498 CRAWFORD BLVD  Boca Raton FL 33432 NONE 501(C)(3)  Total  Total  Approved for future payment  Total  Approved for future payment						l l	
498 CRAWFORD BLVD Boca Raton FL 33432 NONE 501 (C) (3) EDUCATIONAL  1:  Total  b Approved for future payment	Minneapolis	MN	55405	NONE	501 (C) (3)		2,665
498 CRAWFORD BLVD Boca Raton FL 33432 NONE 501 (C) (3) EDUCATIONAL  1:  Total  b Approved for future payment					}		
Boca Raton FL 33432 NONE 501 (C) (3) 12  Total		BOCA R	АТО			I	
Total   Approved for future payment  3a 39,45						EDUCATIONAL	
b Approved for future payment	Boca Raton	FL	33432	NONE	501 (C) (3)	Į Į	125
b Approved for future payment							
						▶ 3a	39,495
Total	Total · · · · · · · · · · · · · · · · · · ·					b 3b	

Part XVIEAL Analysis of Income-Producing Enter gross amounts unless otherwise indicated	l .	d business income	Excluded by se	ection 512, 513, or 514	(e)
4 Dragger converse	(a) Business	(b) Amount	(C) Exclusion	(d) Amount	Related or exempt function income (See page 28 of
1 Program service revenue	code	<del> </del>	code		the instructions )
a b	<b></b>	<del> </del>	<del> </del>		<del></del>
·	<b></b>	<del> </del>			<del></del>
۲	ļ	<del>                                     </del>	<del>                                     </del>		
	<del></del>	<del> </del>	<del>   </del>		<del>                                     </del>
·		<del> </del>	<del> </del>		+
g Fees and contracts from government agencies · ·		<del> </del>	<del> </del>		<del> </del>
2 Membership dues and assessments · · · · · · ·		<del> </del>	<u> </u>		<del> </del>
3 Interest on savings and temporary cash investments	.	<del> </del>	<del> </del>	<del></del>	<del> </del>
4 Dividends and interest from securities · · · · · ·		<del> </del>	<del></del>	<del></del>	<del> </del>
5 Net rental income or (loss) from real estate.		22 20 20 20	, * n	<del></del>	,
a Debt-financed property · · · · · · · · · · ·		3 100 100 2	<del>                                     </del>	<del></del>	<del> </del>
b Not debt-financed property · · · · · · · ·	J	<del>                                     </del>	<del> </del>	<del></del>	<del> </del>
6 Net rental income or (loss) from personal property • •		<del> </del>	<del> </del>		<del> </del>
7 Other investment income · · · · · · · · · · · · · · · · · · ·		<del> </del>	<del> </del>		<del> </del>
8 Gain or (loss) from sales of assets other than inventory		<del> </del>	<del> </del>	<del></del>	<del> </del>
9 Net income or (loss) from special events · · · · ·	.	<del> </del>	<del> </del>	<del></del>	<del> </del>
10 Gross profit or (loss) from sales of inventory · · · ·		<del>                                     </del>	<del>                                     </del>	<del></del>	<del> </del>
11 Other revenue: a		<del> </del>	1		<del>                                     </del>
b	ļ	<del> </del>	<del> </del>		<del> </del>
c	<b> </b>	<del> </del>	<del>                                     </del>		<del> </del>
d	<del> </del>	<del> </del>	<del> </del>		<del> </del>
е		<del>                                     </del>	<del>                                     </del>	<del></del>	<del></del>
	. 1				<del> </del>
12 Subtotal Add columns (b) (d) and (e)					
		• • • • • • • • • •	[2008/25/10/00/25/2005]	13	<del></del>
12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions on page 28 to verify c		• • • • • • • • • •		13	
13 Total. Add line 12, columns (b), (d), and (e) · · · · · · (See worksheet in line 13 instructions on page 28 to verify c	alculations)				· L
13 Total. Add line 12, columns (b), (d), and (e)  (See worksheet in line 13 instructions on page 28 to verify c  PartXXVIBI Relationship of Activities to the	alculations) e Accomp	lishment of Exe	empt Purpo	ses	o the
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13 Total. Add line 12, columns (b), (d), and (e)  (See worksheet in line 13 instructions on page 28 to verify columns (b).  Relationship of Activities to the Explain below how each activity for which in accomplishment of the foundation's exempt	alculations)  e Accomp	lishment of Exerted in column (e) of	empt Purpo	ses	

Pi	rt X\	VII Information	on Regarding Tr	ansfers To and Tr	ansactions and	Relation	ships With No	oncharit	able	<u> </u>
1	Did			age in any of the following	ng with any other orga	anızatıon de	scribed		Yes	No
		_	· · ·	tion 501(c)(3) organizati	• •					
		anizations?		.,	•		•	-	ĺ	
а	-		rting foundation to a	noncharitable exempt or	ganization of			ŀ	ł	
					•		<i></i> .	· 1a(1)	·	X
		Other assets · · ·						· 1a(2)	<del>                                     </del>	X
b	٠,	er transactions						10(2)	├──	<u> </u>
_			noncharitable exemi	ot organization • • • •				- 1b(1)	·	X
				e exempt organization				1b(2)		X
				ssets				· 1b(3)	<del> </del>	
		•	• •	• • • • • • • • • • • • •				- 1b(4)	├	X
			•					1b(5)		X
		_		or fundraising solicitation				· 1b(6)		X
c				other assets, or paid en			· · · · · · · · · · ·		┼─╌	X
		-		mplete the following sch	· •			1	L	X
·				given by the reporting for		-				
		,	<del></del>	ent, show in column (d)						
<u>(a)</u>	Line no	(b) Amount involved	(c) Name of nor	nchantable exempt organization	(d) Desc	nption of transfe	ers, transactions, and sh	aring arrangei	nents	
		<del></del>	<del></del>	<del></del>						
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_	`		ļ	<del>,                                      </del>						
		L	<u> </u>							
2a b	des		1(c) of the Code (other	d with, or related to, one er than section 501(c)(3)	•	•		· [] Ye	es [	] No
		(a) Name of organ	nization	(b) Type of orga	anization		(c) Description of rela	ationship		
			<del>-,</del>							
_	Unde	er penalties of perjury, i de	clare that I have examined	this return, including accompar parer (other than taxpayer or fid	nying schedules and statem	nents, and to th	e best of my knowledge	and		
c	) Delici		. 77 () + 1		boary) is based on all thor	I .	i preparci nas any know	code		
S i	<b>.</b>	Marga	L D Sen	wor		<u> </u>	DIRECTOR			
g	Sig	gnature of officer or fuste	, e		Datte		Title			
n			$\sim$ / $\chi$		Date			er's identifyin		
н	Paid					Check if		r (see <b>Sign</b> at O of the unstru		
6	Prep	ar- Preparer's	: X , [] [N/h		12/11/11	self-employe	M   9 p     ' "	o or ure than r	13)	
r e	Use	signature/	· USALI BALL		2////			19/884	<u> </u>	
-	Only	Firm's name (or )	ours if Marla	Share, CPA			EIN >			
	L_	self-employed), a and ZIP code	Boca :	Raton, FL 33496				-241-70	21	
					EEA			Form 9	30-PF (	2009)

	Federal Supporting Statements	2009 PG 01
Name(s) as shown on return		FEIN
MARGIE L BRO	WN FAMILY FOUNDATION	42-1310957
•	Form 990PF, Part III, Line 5 Other Decreases Schedule	Statement #116
OTHER EXPENS ROUNDING	EES	3 2
Total		5

Form 990PF, Part II, Line 13
Investments: Other Schedule

PG 01 Statement #118

Category STATE OF ISRAEL BOND	Book value (BOY)	Book value (EOY)	FMV (EOY)
SECTOR SPDR TECH SELECT	5,061	5,061	6,906
	•	•	•
POWERSHARES QQQ	12,337	12,337	24,535
PLAINS ALL AM PPL LP PTP	8,890		
NUSTAR ENERGY	11,087		
EPP	5,278		
GNMA MORTGAGE POOL	569	460	415
Total	44,308	17,858	31,856

Federal Supporting Statements	2009 PG 01
Name(s) as shown on return	FEIN
MARGIE L BROWN FAMILY FOUNDATION	42-1310957

# Form 990PF, Part II, Line 10(b) Investments: Corporate Stock Schedule

Statement #137

Category	BOY	Book Value	EOY FMV
ADOBE SYSTEMS	18,168	9,084	7,845
ALTRIA GROUP	5,906	5,906	7,206
CISCO SYSTEMS	11,400	21,928	21,900
INTEL CORP	8,952	8,952	7,680
CSX CORP	5,513	5,513	5,532
MASCO CORP	8,762		·
MICROSOFT CORP	14,400	14,400	9,796
MEDCO HEALTH SOLUTIONS	4,500	4,500	5,206
PFIZER CORP	2,888	2,888	3,434
TEVA PHARMACEUTICALS	14,735	14,735	18,462
PSEG	3,244	3,244	3,308
SMITH & WESSON	5,359		
TEMPLE INLAND	2,756	2,756	3,732
BRISTOL MYERS SQUIBB		12,694	13,555
Totals	106,583	106,600	107,656

Form 990PF, Part II, Line 10(c)
Investments: Corporate Bond Schedule

PG 01 Statement #138

Category	BOY	Book Value	EOY FMV
GE CAPITAL CORP SR DEB	25,000	25,000	25,750
Totals	25,000	25,000	25,750

	Federal Supporting Statements	2000
Name(s) as shown on return MARGIE 1. BROWN FAMILY FOUNDATION		Your Social Security Number 42-1310957
	Form 990PF, Part I, Line 23 - Other Expenses Schedule	Statement #103
Description	Revenue Net Adjusted Charitable and expenses investment net income purpose	
INVESTMENT ADV FEES Totals	707 707	
	Form 990PF, Part I, Line 11 - Other Income Schedule	PG 01 Statement #106
Description INVESCO SH SUIT RECOVERY OTHER INVESTMENT LOSS Totals	Revenue     Net     Adjusted       and expenses     investment     net income       156     156     156       (759)     (759)     (759)       (603)     (603)     (603)	
STM-LD		

		Federal Sup	Federal Supporting Statements	nents	2009	PG 01
Name(s) as shown on return MARGIE I BROWN FAMILY FOUNDATION					Your Social Security 42~1310957	Your Social Security Nymber 42-1310957
	Form 990PF, Part	I,	Line 16(b) - Accounting Fees Schedule	Schedule	Statem	Statement #108
Description	Revenue and expenses i	Net investment	Adjusted net income	Charitable purpose		
ACCOUNTING FEES Totals	1,347	0	1,347	1,347		
	Form 990PF	Form 990PE, Part I, Line 18	18 - Taxes Schedule	ψ	Statem	PG 01 Statement #110
Description FOREIGN TAXES ON INVESTMENT IN FL FILING FEES Totals	And expenses 67 67 61 128	Investment 67 67	Adjusted net income 67 61	Charitable purpose 67 61		
STM-LD						

		Federal	Federal Supporting Statements	Statement	Ų		-	
Namodel 30 chara on robum		- 5051	Simolodos	Joratement	2		2009 PG 01	
Name(s) as snown on return MARGIE I BROWN FAMILY FOUNDATION							Your Social Secun 42-1310957	Your Social Security Number 42-1310957
For	Form 990-PF, Part IV,		Capital Gains And Losses Information (Overflow)	s Information	(Overflow)		Statement #134	nt #134
	P-Purchase					Cost or		Pre-1970 Gains
Description	D-Donation	Date Acquired	Date Sold	Sales Price	Depreciation	other basis	Gain or Loss	or Losses
	ď	2009-05-21	2009-10-28	4,521		5,359		
ADOBE SYSTEMS INC	щ	2004-11-30	VARIOUS	10,413		9,084	1,329	
PIMCO TOTAL RETURN FD	ы	2010-02-24	2010-03-02	50,197		50,019	178	
MASCO CORP	Ф	2009-06-05	2010-06-15	990'6		8,762	304	
EPP	Δι	2009-06-05	2010-06-05	5,278		4,503	775	
NUSTAR ENERGY	щ	2009-06-05	2010-06-05	11,087		10,104	883	
PLAINS ALL AMERICAN	ф	2009-06-05	2010-06-05	8,890		8,331	559	
Total				99,452		96,162	3,290	

. . . .

#### Form **8868**

(Rev April 2009)

# Application for Extension of Time to File an **Exempt Organization Return**

OMB No 1545-1709

Department of the Treasury

Internal Revenue S	Service	ľ		
<ul> <li>If you are fi</li> </ul>	ling for an Automatic 3-Month Extension, complete only Part I and check this box	• • • • •		· · · ▶ 🗓
	ling for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form	n)		برين الماري
	ete Part II unless you have already been granted an automatic 3-month extension on a previously filed			
	Automatic 3-Month Extension of Time. Only submit original (no copies needed)			
	required to file Form 990-T and requesting an automatic 6-month extension - check this box and compl	oto		
Part I only • •		• • • • •		▶ 🗀
	rations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an opmetax returns	extension o	f	
one of the retu electronically r returns, or a co	ng (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of the form solved below (6 months for a corporation required to file Form 990-T). However, you cannot file Form form formation (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or somposite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 to details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Charities & No	m 8868 870, group (Part II) of		
Type or	Name of Exempt Organization	mployer ide	entificatio	n number
print		2-13109		
File by the	Number, street, and room or suite no. If a P.O. box, see instructions			·
due date for filing your	6376 SAN MICHEL WAY			
return See	City, town or post office, state, and ZIP code. For a foreign address, see instructions	<del></del>		
instructions	Delray Beach, FL 33484			
Check type of	return to be filed (file a separate application for each return).			<del></del>
Form 990		Form 4720		
Form 990-E		Form 5227		
Form 990-E		Form 6069		
X Form 990-F		Form 8870		
X 1 Oill 990-F		-01111 0070		
Telephone If the organ If this is for for the whole of	are in the care of ► MARGIE L SIMON 6376 SAN MICHEL WAY, FL 33484  No. ► 561-498-4499  FAX No. ►  ization does not have an office or place of business in the United States, check this box  a Group Return, enter the organization's four digit Group Exemption Number (GEN)  iroup, check this box  If it is for part of the group, check this box  and attach  is ames and EINs of all members the extension will cover.	If this is		…▶ []
	t an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time			
until	05-16 , 20 11, to file the exempt organization return for the organization named above. The	no extensio	n ie	
	rganization's return for	ie exterisio	1113	
. —				
_	alendar year 20 or ax year beginning 10~01 , 20 09, and ending 09~30	. 20 1	0	
- A.	ax year beginning	' 20_=	_	
2 If this ta	x year is for less than 12 months, check reason	counting p	eriod	
3a If this ap	plication is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax,			-
less any	nonrefundable credits. See instructions	3a	\$	138
	plication is for Form 990-PF or 990-T, enter any refundable credits and estimated tax		<del></del>	
	is made. Include any prior year overpayment allowed as a credit	3ь	\$	138
	Due. Subtract line 3b from line 3a Include your payment with this form, or, if required,	7 7		<del></del>
	with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment			
=	. See instructions	3c	\$	0
	are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8		<u> </u>	
for payment in				
paymont m	<u> </u>			