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Form 990-PF

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

OMB No 1545 0052

2009

Department of the Treasury Internal Revenue Service Note: The foundation may be able to use a copy of this return to satisfy state reporting requirements For calendar year 2009, or tax year beginning Nov 1 , 2009, and ending Oct 31 2010 Initial return Initial Return of a former public charity G Check all that apply: Final return Amended return Address change Name change Name of foundation Employer identification number Use the IRS label. THE BERAN FAMILY FOUNDATION 22-6780379 Otherwise, Number and street (or P O box number if mail is not delivered to street address) Room/suite Telephone number (see the instructions) R print (201) 567-2333 145 KENT ROAD or type. State ZIP code See Specific City or town С If exemption application is pending, check here Instructions. TENAFLY NJ 07670 1 Foreign organizations, check here Check type of organization: |X | Section 501(c)(3) exempt private foundation 2 Foreign organizations meeting the 85% test, check here and attach computation . . Section 4947(a)(1) nonexempt charitable trust \ Other taxable private foundation If private foundation status was terminated J Accounting method: X Cash Fair market value of all assets at end of year under section 507(b)(1)(A), check here (from Part II, column (c), line 16) Other (specify) If the foundation is in a 60-month termination ► S (Part I, column (d) must be on cash basis.) 2,006,870. under section 507(b)(1)(B), check here Part I | Analysis of Revenue and (a) Revenue and (b) Net investment (c) Adjusted net (d) Disbursements Expenses (The total of amounts in for charitable expenses per books income income columns (b), (c), and (d) may not neces-sarily equal the amounts in column (a) purposes (cash basis only) (see the instructions).) 1,816,688. Contributions, gifts, grants, etc, received (att sch) 2 Ck If the foundn is not req to att Sch B Interest on savings and temporary cash investments . Dividends and interest from securities 50,416. 5a Gross rents ... **b** Net rental income or (loss) 1.1% (1996) (1996) (1996) (1996) (1996) (1996) (1996) (1996) (1996) (1996) (1996) (1996) (1996) (1996) (1996) 6a Net gain/(loss) from sale of assets not on line 10 SCANNED SEP b Gross sales price for all assets on line 6a With the State of THAT TO SHE WAS A SHE WAS 0. Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain . Income modifications 10a Gross sales less returns and allowances ~)> (2 % \$2)*, Professional Professional b Less Cost of 我说:一切成的 c Gross profit/(loss) (att sch)

1,867,104

500

104,264.

107,930

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,759,174

· 12.

| | | 15 | Pension plans, employee benefits |
|-------------|----------|------|--|
| | A | 16 a | Legal fees (attach schedule) |
| | A D S | t | Accounting fees (attach sch) |
| | 1 | c | Other prof fees (attach sch) L-16c Stmi |
| Q P | ï | 17 | Interest |
| Ë | Ĭ | 18 | Taxes (attach schedule)(see instr) |
| OPERATING | N-STRAT- | 19 | Depreciation (attach sch) and depletion |
| Ņ | v | 20 | Occupancy |
| G | Ē | 21 | Travel, conferences, and meetings . |
| A N D | Ē | 22 | Printing and publications . |
| Ď | ê. | 23 | Other expenses (attach schedule) |
| | N | | INVESTMENT FEES |
| | MXPEZ0E0 | 24 | Total operating and administrative expenses. Add lines 13 through 23 |
| | | 25 | Contributions, gifts, grants paid |
| | | 26 | Total expenses and disbursements. |

13

| Taxes (attach schedule)(see instr.) | | 000 | <u>1 ≅</u> |
|--|--------|---------|------------|
| Depreciation (attach sch) and depletion | | OGDEN, | UT |
| Occupancy | | | |
| Travel, conferences, and meetings . | | _ | |
| Printing and publications . | | | |
| Other expenses (attach schedule) | | | |
| INVESTMENT FEES | 3,166. | | |
| Total operating and administrative expenses. Add lines 13 through 23 | 3,666. | | |

b Net investment income (if negative, enter -0-) C Adjusted net income (if negative, enter -0-) 374 BAA For Privacy Act and Paperwork Reduction Act Notice, see the instructions.

11 Other income (attach schedule) . . .

Compensation of officers, directors, trustees, etc

Total expenses and disbursements.

Add lines 24 and 25

and disbursements

Subtract line 26 from line 12:

a Excess of revenue over expenses

12 Total. Add lines 1 through 11.

14 Other employee salaries and wages ...

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0.

Form 990-PF (2009)

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RECEIVED

| 1 Cash — non-interest bearing 2 Savings and temporary cash investments. 3 Accounts receivable Less allowance for doubtful accounts ** 4 Piedges receivable Less: allowance for doubtful accounts ** 5 Grants receivable Less: allowance for doubtful accounts ** 5 Grants receivable Less: allowance for doubtful accounts ** 5 Grants receivable Less: allowance for doubtful accounts ** 5 Remarkles due from differs, directors, treates, and other disqualified persons (letter schools) (see the instructions) 7 Other notes and least receivable (letter school) Less. allowance for doubtful accounts ** 5 In length of the school (letter schools) 10 a Investments — Usa and state government obligations (affacts schoold) b Investments— Corporate books (letter schoold) c Investments— Corporate books (letter schoold) b Investments— Corporate books (letter schoold) c Investments— Corporate books (letter schoold) 11 investments— comprate books (letter schoold) 12 investments— onther (affacts schoold) 13 investments— onther (affacts schoold) 14 Land, budings, and equipment boass* Less accumulated deprecation (letter schoold) 15 Other assets (Cleenche** 16 Total assets (to be completed by all filers— see instructions, Also, see page 1, item I) 200, 533 1, 957, 558. 1 Rants payable 1 Counts payable and accrued expenses. 1 Rants payable 1 Rants payable 1 Rants payable 1 Rants payable 2 Description of the schools of the sc | Par | t II | Balance Sheets | column should be for end-of-year amounts only | Beginning of year | ENU | or year |
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| <u> Pa</u> | (a) List and describ | e the kind(s) of property sold (e.g., r se; or common stock, 200 shares ML | eal estate. | (b) How a P — Pure D — Don | chase | (C) Date acquired (month, day, year) | (d) Date sold (month, day, year) |
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| | a 799,308. | · · · · · · · · · · · · · · · · · · · | 901 | | | | 2 113 |
| | a 799,308. b | | | L,421. | | | -2,113. |
| - | <u>с</u> | | | | | | |
| | d | | | | | | |
| | e | | | | - | · · · · · · · · · · · · · · · · · | |
| | - | ng gain in column (h) and owned by | the foundation on 12/21/69 | | | | |
| | (i) Fair Market Value | (i) Adjusted basis | (k) Excess of column | <u>(1)</u> | ۱ , | (I) Gains (Coli gain minus column (k | ımn (h)), but not less |
| | as of 12/31/69 | as of 12/31/69 | over column (j), if ar | | th | an -0-) or Losses (fr | om column (h)) |
| | | | <u> </u> | | | | 2 112 |
| | <u>a</u> b | | | | | | -2,113. |
| | <u>. </u> | | | | | | |
| | d | | | | | | |
| | 9 | | | | | | |
| | Capital gain net income or (net | capital loss) — If gain, also | enter in Part I, line 7 er -0- in Part I, line 7 | | 2 | | 2 112 |
| 3 | Net short term capital gain or (| oss) as defined in sections 1222(5) a | — " | | | <u> </u> | -2,113. |
| 3 | . • | • | ··· | | | | |
| _ | ın Part I, line 8 | 8, column (c) (see the instructions). | <u></u> | | 3 | | |
| Pa | rt V Qualification Under | Section 4940(e) for Reduced | l Tax on Net Investmer | it Incon | 1e | | |
| Was | es,' the foundation does not quali | ion 4942 tax on the distributable ame fy under section 4940(e). Do not con n each column for each year, see the | nplete this part. Instructions before making a | | s. | (d) | No |
| | Base period years Calendar year (or tax year beginning in) | Adjusted qualifying distributions | (c) Net value of noncharitable-use assi | ets | (colı | Distribution umn (b) divided t | |
| | _2008 | | | 0. | | | 0.00000 |
| | 2007 | 0. | | | | | |
| | 2006 | 0. | | 0. | | | 0.00000 |
| | 2005 | 0. | | 0. | | | 0.00000 |
| | 2004 | 0. | | 0. | | | 0.00000 |
| 2 | Total of line 1, column (d) . | | | | 2 | | 0.000000 |
| 3 | Average distribution ratio for the number of years the foundation | 5-year base period — divide the tota has been in existence if less than 5 | al on line 2 by 5, or by the | Ī | 3 | | 0.000000 |
| 4 | • | able-use assets for 2009 from Part X | | | 4 | | 0. |
| _ | | | | Ī | | ****** | |
| 5 | Multiply line 4 by line 3 | • | • | . } | 5 | | 0. |
| 6 | Enter 1% of net investment inco | ome (1% of Part I, line 27b) . | | } | 6 | | 0. |
| 7 | Add lines 5 and 6 | | | . | 7 | | 0. |
| 8 | Enter qualifying distributions fro | · | | . [| 8 | | |
| | If line 8 is equal to or greater the Part VI instructions | an line 7, check the box in Part VI, li | ne 1b, and complete that pa | rt using a | 1% ta | | |
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| | m 990-PF (2009) THE BERAN FAMILY FOUNDATION | | 780379 | | | Page |
|-----|---|----------------------|---------------------|---------------------------------------|---------------------|---|
| | rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 | -see th | e instruc | ctions | | |
| 1 | a Exempt operating foundations described in section 4940(d)(2), check here and enter 'N/A' on line 1. Date of ruling or determination letter: (attach copy of letter if necessary - see instr.) | | | | | ·; |
| | b Domestic foundations that meet the section 4940(e) requirements in Part V. | _ | 1 | | | ٥ |
| | check here . And enter 1% of Part I, line 27b | H | | | | |
| | c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, column (b). | } | · · · · · : | | ٠. ; | `, `, |
| | C An other domestic roundations enter 276 of fine 276. Exempt foreign organizations enter 476 of Part 1, line 12, column (b) | | | - | , | , |
| 2 | | | | ~ ~ | • • • | ``` |
| _ | foundations only Others enter -0-) | · - | 2 | | | <u> </u> |
| 3 | Add lines 1 and 2 | <u>,</u> , | 3 | | | 0. |
| 4 | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter | ^{ე.}) · ├ | 4 | | | <u> </u> |
| 5 | Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0 | · - | 5 | -> | | 0. |
| 6 | | | | | · . | , , |
| | a 2009 estimated tax pmts and 2008 overpayment credited to 2009 | | | | | 10,503 |
| | b Exempt foreign organizations —tax withheld at source | | | | (4) | 200 |
| | c Tax paid with application for extension of time to file (Form 8868) | 0. | | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | ا هجره کي) د چيک | |
| | d Backup withholding erroneously withheld | | | . تايلانيلان قاعلانيلان | Š., C | 25. |
| 7 | Total credits and payments. Add lines 6a through 6d | ·· | 7 | | | 0. |
| 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 | | | 0. |
| 10 | Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid | <u> </u> | 0 | | | 0. |
| 11 | | ▶ 1 | 1 | | | |
| Pai | रे VII-A Statements Regarding Activities | | | | , | |
| 1 | a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did participate or intervene in any political campaign? | lit. | • | 1 a | Yes | No X |
| ı | b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)? | | | 1 b | | Х |
| | If the answer is 'Yes' to 1a or 1b , attach a detailed description of the activities and copies of any material or distributed by the foundation in connection with the activities. | als publi: | shed | | y 1 | 43 V |
| • | c Did the foundation file Form 1120-POL for this year? | | • | 1 c | * * | X |
| | e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imp foundation managers ► \$ | osed on | | | % , ~ . | |
| 2 | Has the foundation engaged in any activities that have not previously been reported to the IRS? | | | 2 | L | Х |
| | If 'Yes,' attach a detailed description of the activities. | | | | | A |
| 3 | Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, a of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the change | rticles | | 3 | · . Š | x |
| | a Did the foundation have unrelated business gross income of \$1,000 or more during the year? | | | 4a | | Х |
| | b If 'Yes,' has it filed a tax return on Form 990-T for this year? | | | 4b | | |
| | Was there a liquidation, termination, dissolution, or substantial contraction during the year? | | | 5 | | Х |
| | If 'Yes,' attach the statement required by General Instruction T. | | | | 7. 3 | 105 |
| 6 | Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either. | | | 32 | 185 | , |
| | By language in the governing instrument, or | | | | ~~ ' | 4 |
| | | | | 5 | ** * | _ , ' 1 |
| _ | By state legislation that effectively amends the governing instrument so that no mandatory directions that the state law remain in the governing instrument? | nat confi | | [*] 6 | х | |
| | Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV | | • • | 7 | Х | 1 |
| 8 2 | Enter the states to which the foundation reports or with which it is registered (see the instructions) | - | | 100 | ' , ' | . (· (· (· (· (· (· (· (· (· (|
| | | | | ~ | | 45) |
| Ł | o If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General | | | 3" " | | ٠, ١ |
| | (or designate) of each state as required by General Instruction G? If 'No,' attach explanation | | • | 86 | Х | |
| 9 | Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If 'Yes,' con | 3) or 49 nplete P | 42(j)(5) art XIV | 9 | J 5 3 | X |
| 10 | Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing to and addresses | neir nam | nes | 10 | | _x |

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|---|------------------|--|----------------|
| Part VII-A Statements Regarding Activities Continued | | | |
| 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). | | 11 | х |
| 12 Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008? | | 12 | x |
| 13 Did the foundation comply with the public inspection requirements for its annual returns and exemption | application? | 13 | х |
| Website address ► N/A 14 The books are in care of ► ORGANIZATION Telephone | no. ► (201) | 567- | 2333 |
| Located at ► T TENAFLY NJ ZIP + 4 ► | 07670 | - = - : | |
| 15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 -Check here | | | - F [] |
| and enter the amount of tax-exempt interest received or accrued during the year | ▶ 15 | | |
| Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required | | · | |
| File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies. | | * : ' | Yes No |
| 1 a During the year did the foundation (either directly or indirectly): | | 2.3 | |
| | Yes X No | | |
| (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? | Yes X No | 12 TE 1 | |
| (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? | Yes X No | 135 m E | Signal Control |
| (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? | Yes X No | | \$2.00 |
| (5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? | Yes X No | | |
| (6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) | Yes X No | | |
| b If any answer is 'Yes' to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see the instruction | ns)? | 1 b | |
| Organizations relying on a current notice regarding disaster assistance check here | ▶ 🔲 | - Tr 1. | y : 16.5 |
| 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? | | 5 | X , TX |
| 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)). | | 3 | |
| 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 ▶ 20, 20, 20 | | S | 1 1/2/20 |
| b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a) all years listed, answer 'No' and attach statement —see the instructions.) | a)(2))(2) to | 26 | |
| c if the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years he | ere. | 20 | |
| ► 20, 20, 20, 20 | | | |
| 3a Did the foundation hold more than a 2% direct or indirect interest in any business | Yes X No | を(か)。 (************************************ | 3 1 |
| b If 'Yes,' did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2009.) | | 3b | |
| 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? | <u></u> | 4b | x |
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|--|--|---|--|--|
| Part VII-B Statements Regarding Act | | m 4/20 May Be Red | uirea (continuea) | |
| 5a During the year did the foundation pay or(1) Carry on propaganda, or otherwise att | _ | on (section 4945(e))? . | Yes X | No No |
| (2) Influence the outcome of any specific on, directly or indirectly, any voter reg | istration drive? | | | No Significant |
| (3) Provide a grant to an individual for tra | vel, study, or other similar | r purposes? | <u> </u> | No The State of th |
| (4) Provide a grant to an organization oth in section 509(a)(1), (2), or (3), or sec | tion 4940(d)(2)? (see inst | ructions) | Yes 🗓 |] No |
| (5) Provide for any purpose other than rel educational purposes, or for the preve | igious, charitable, scientif ntion of cruelty to childrer | ic, literary, or n or animals? . | . Yes 🗓 |] No |
| b If any answer is 'Yes' to 5a(1)-(5), did any described in Regulations section 53.4945 ((see instructions)? | or in a current notice regai | qualify under the exception disaster assistance | otions e | 5b |
| Organizations relying on a current notice r | egarding disaster assistar | nce check here | ▶ [| |
| c If the answer is 'Yes' to question 5a(4), do tax because it maintained expenditure resisting 'Yes,' attach the statement required by F | ponsibility for the grant? | · | . Yes |] No |
| • | • | ` ' | | |
| | | | Yes X | No S |
| b Did the foundation, during the year, pay pr If 'Yes' to 6b, file Form 8870. | emiums, directly or indire | ctly, on a personal bene | fit contract? | 6b X |
| 7a At any time during the tax year, was the fo | oundation a party to a prof | nibited tax shelter transa | action? Yes X | No |
| b If yes, did the foundation receive any process. | eds or have any net inco | me attributable to the tr | ansaction? | 7b |
| Part VIII Information About Officers and Contractors | Directors, Trustees, | Foundation Mana | gers, Highly Paid E | mployees, |
| 1 List all officers, directors, trustees, found | ation managers and their | compensation (see inst | tructions). | |
| (a) Name and address | (b) Title and average hours per week devoted to position | (c) Compensation (If not paid, enter -0-) | (d) Contributions to employee benefit plans and deferred compensation | (e) Expense account, other allowances |
| SAMUEL BERAN | | | compensation | |
| MT | TRUSTEE | | | |
| KISCO NY 07670 DEBORAH ADOVCATE | 1.00 | 0. | 0. | 0. |
| T | TRUSTEE | | | |
| ENAFLY NJ 07670 | | 0. | 0. | 0. |
| CHAYA LOTTNER | | | | |
| T | TRUSTEE | | | |
| ENAFLY NJ 07670 See Information about Officers, Directors, Trustees, E | 1.00 | 0. | 0. | 0. |
| See information about Onicers, Directors, Trustees, E | 10. | ! ! | | |
| 2 Compensation of five highest-paid employ | rees (athor than the se inc | 0. | 0. | 0. |
| Compensation of five highest-paid employ (a) Name and address of each employee | (b) Title and average | (c) Compensation | | |
| paid more than \$50,000 | hours per week devoted to position | (c) compensation | (d) Contributions to employee benefit plans and deferred compensation | (e) Expense account, other allowances |
| NONE | | | | |
| 0 | | | | |
| 0 | | | | |
| | | <u> </u> | | |
| 0 | | - | | |
| 0 | | | | |
| otal number of other employees paid over \$50,0 | | | > | |
| BAA | TEEA0306 0 | 7/06/09 | | None Form 990-PF (2009) |

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|---|---------------------------------------|
| Part VIII Information About Officers, Directors, Trustees, Foundation Manag and Contractors (continued) | ers, Highly Paid Employees, |
| 3 Five highest-paid independent contractors for professional services –(see instructions). If r enter 'NONE.' | none, |
| (a) Name and address of each person paid more than \$50,000 (b) Typ | e of service (c) Compensation |
| NONE | |
| | 27/2 |
| | N/A |
| | |
| | |
| | |
| | |
| Total number of others receiving over \$50,000 for professional services | None |
| Part:IX-A Summary of Direct Charitable Activities | |
| | |
| List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as organizations and other beneficiaries served, conferences convened, research papers produced, etc | the number of Expenses |
| 1 | |
| | |
| 2 | |
| | |
| | |
| 3 | |
| | |
| 4 | |
| | |
| Part:IX-B: Summary of Program-Related Investments (see instructions) | · · · · · · · · · · · · · · · · · · · |
| Describe the two largest program-related investments made by the foundation during the tax year | on lines 1 and 2. Amount |
| 1 | |
| | |
| 2 | |
| | |
| All other program-related investments. See instructions. | |
| 3 | |
| Total. Add lines 1 through 3 | |
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|---|------------|------|
| Part X Minimum Investment Return (All domestic foundations must complete this part see instructions.) | | |
| 1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes. a Average monthly fair market value of securities | 1 a | |
| b Average of monthly cash balances | 1 b | |
| c Fair market value of all other assets (see instructions) | 1c | |
| d Total (add lines 1a, b, and c) | 1d | |
| e Reduction claimed for blockage or other factors reported on lines 1a and 1c | | |
| (attach detailed explanation) | | |
| 2 Acquisition indebtedness applicable to line 1 assets | 2 | |
| 3 Subtract line 2 from line 1d | 3 | 0 |
| 4 Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions) | 4 | 0 |
| 5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 | . 5 | 0 |
| 6 Minimum investment return. Enter 5% of line 5 | . 6 | 0 |
| Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private or and certain foreign organizations check here ► ☐ and do not complete this | | ons |
| 1 Minimum investment return from Part X, line 6 | 1 | 0 |
| 2a Tax on investment income for 2009 from Part VI, line 5 | 0. | |
| b Income tax for 2009. (This does not include the tax from Part VI.) | | |
| c Add lines 2a and 2b | 2 c | 0. |
| 3 Distributable amount before adjustments. Subtract line 2c from line 1 | . 3 | 0. |
| 4 Recoveries of amounts treated as qualifying distributions | 4 | |
| 5 Add lines 3 and 4 | 5 | 0. |
| 6 Deduction from distributable amount (see instructions) | 6 | |
| 7 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1. | 7 | 0. |
| Part XII Qualifying Distributions (see instructions) | | |
| 1 Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes: a Expenses, contributions, gifts, etc —total from Part I, column (d), line 26 | . 1a | |
| b Program-related investments —total from Part IX-B | 1b | |
| 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: a Suitability test (prior IRS approval required) | 3a | |

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

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

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions)

 ${f b}$ Cash distribution test (attach the required schedule)

Adjusted qualifying distributions. Subtract line 5 from line 4.

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0.

0.

3ь

4

5

6

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 | | | - 0 | 0. |
| 2 Undistributed income, if any, as of the end of 2009. | ~ * * * * * * * * * * * * * * * * * * * | | | 1 |
| a Enter amount for 2008 only | | | 0. | ~ |
| b Total for prior years: 20, 20, 20 | , | | . 1 | * |
| 3 Excess distributions carryover, if any, to 2009: | W11. 4.1 | A STATE OF THE | 3 | |
| a From 2004 . 0. | | | No. of the state o | |
| b From 2005 0 . | ` · · · · · · · · · · · · · · · · · · · | | | ` . · · · · · · · · · · · · · · · · · · |
| c From 2006 . 0 . |] , , , , , , | · . | , , , , , | · · · · · · · · · · · · · · · · · · · |
| d From 2007 0. | 1. , | 1 1 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | | |
| e From 2008 0 . | | > 1, 20 h, | 34 | |
| f Total of lines 3a through e | 0. | | | |
| 4 Qualifying distributions for 2009 from Part | | , , , , , , , , , , , , , , , , , , , | | |
| XII, line 4: ► \$ | | , | ا دسر د ا | (4, 1) |
| a Applied to 2008, but not more than line 2a | out the same of the | . , \ | | 1100 |
| b Applied to undistributed income of prior years (Election required – see instructions) | | | | , , , , , , , , , , , , , , , , , , , |
| c Treated as distributions out of corpus (Election required – see instructions) | | | | |
| d Applied to 2009 distributable amount | 1 1 / giron Entry | Service Control | 3.34 | |
| e Remaining amount distributed out of corpus | 0. | * 25000 - 1 | \$ 5 G 1 | |
| 5 Excess distributions carryover applied to 2009 | | The state of the s | **, | |
| (If an amount appears in column (d), the same amount must be shown in column (a).) | | | | |
| 6 Enter the net total of each column as indicated below: | | | marine and the second | |
| a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 . | 0. | - India | (° ° ° ° ° ° ° ° ° ° ° ° ° ° ° ° ° ° ° | . 14 34- |
| b Prior years' undistributed income Subtract line 4b from line 2b | | 0. | | |
| c Enter the amount of prior years' undistribut- ed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed | | | | |
| d Subtract line 6c from line 6b. Taxable amount — see instructions | | 0. | | |
| e Undistributed income for 2008. Subtract line 4a from line 2a. Taxable amount — see instructions | A Comment of the Comm | | 0. | |
| f Undistributed income for 2009. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2010 | | | | 0. |
| 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) | | | | |
| (see instructions) | 0. | 34,00 | ž . | |
| 9 Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a | 0. | West of the second | | . क्षु । स्त्री |
| 10 Analysis of line 9 | payers of a | ATT STATE OF THE STATE OF | | , , |
| a Excess from 2005 0. | | | | 1 2 2 1 |
| b Excess from 2006 0. | | | | |
| c Excess from 2007 . 0. | | | 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - | |
| d Excess from 2008 0. | | | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |
| e Excess from 2009 0. | 1 | , , | , ` | |
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|---|--|--|--|---------------------------|-------------------------|
| Part XIV Private Operating Foundation | | | | | N/A |
| 1 a If the foundation has received a ruling or our is, effective for 2009, enter the date of the | ruling | | • | | N/A |
| b Check box to indicate whether the foundate | ion is a private op | erating foundation of | | 4942(j)(3) or | 4942(j)(5) |
| 2a Enter the lesser of the adjusted net income from Part I or the minimum | Tax year | | Prior 3 years | · | |
| income from Part I or the minimum investment return from Part X for each year listed | (a) 2009 | (b) 2008 | (c) 2007 | (d) 2006 | (e) Total |
| 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 | | | _ | | |
| Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c | | | | | |
| 3 Complete 3a, b, or c for the alternative test relied upon: | | | | | |
| a 'Assets' alternative test —enter: | | | | | |
| (1) Value of all assets | | | | | |
| (2) Value of assets qualifying under section 4942(j)(3)(B)(i) | | | | | |
| b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed | | | | | |
| c 'Support' alternative test -enter: | | | | | |
| (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) | | | | | |
| (2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii) | | | | | |
| (3) Largest amount of support from an exempt organization | | | | | |
| (4) Gross investment income | | - | | | |
| Part XV Supplementary Information (| Complete this | part only if the | organization ha | d \$5,000 or more | e in |
| assets at any time during the | e year – see in | structions.) | | | |
| 1 Information Regarding Foundation Manag a List any managers of the foundation who h close of any tax year (but only if they have | ave contributed m | ore than 2% of the than \$5,000). (See | total contributions r section 507(d)(2).) | eceived by the found | ation before the |
| NONE | | | | | |
| b List any managers of the foundation who o a partnership or other entity) of which the f N/A | | | | ally large portion of the | ne ownership of |
| 2 Information Regarding Contribution, Gran Check here if the foundation only m requests for funds. If the foundation makes complete items 2a, b, c, and d. | akes contributions gifts, grants, etc, | to preselected char (see instructions) to | ritable organizations o individuals or orga | anizations under othe | |
| a The name, address, and telephone number DEBORAH ADVOCATE 145 KENT ROAD | of the person to v | vnom applications s | should be addressed | 3 : | |
| TENAFLY | NJ 0176 | 7-0 (20 | 1) 567-2333 | | |
| b The form in which applications should be sin/A | ubmitted and infor | mation and materia | Is they should inclu | de: | |
| c Any submission deadlines. NONE | · | | | | |
| d Any restrictions or limitations on awards, so NONE | uch as by geograp | hical areas, charitat | ble fields, kinds of i | nstitutions, or other fa | actors: |
| BAA | TE | EA0310 07/06/09 | . <u> </u> | Fo | rm 990-PF (2009) |

Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Foundation Recipient Purpose of grant or contribution show any relationship to status of **Amount** any foundation manager or recipient Name and address (home or business) substantial contributor a Paid during the year AMIT WOMEN 817 BROADWAY #4 N/A NEW YORK NY 10003 PUBLIC UNRESTRICTED 9,030. BRANDEIS UNIVERSITY PO BOX 549110-MS124 WALTHAM 02454 N/A PUBLIC UNRESTRICTED 5,854. NATIONAL RIMAH COMMISSION INC 3080 BROADWAY NY 10027 N/A NEW YORK PUBLIC UNRESTRICTED 500. SOLOMON SCHECHTER DAY SCHOOL 275 MCKINLEY AVENUE NEW MILFROD 07646 N/A PUBLIC UNRESTRICTED 15,410. N.T BIRCH WATHEN LENOX SCHOOL 210 EAST 77TH STREET NEW YORK NY 10075 N/A PUBLIC UNRESTRICTED 7,200. CROHN'S & COLITIS FOUNDATION 386 PARK AVE S FL 17TH UNRECTRICTED NEW YORK NY 10075 N/A 350. PUBLIC UJA FEDERATION 50 EISENHOWER DRIVE **PARAMUS** 07652 N/A PUBLIC UNRESTRICTED 5,000. DANCE MARATHON OF NY NY 10075 N/A 100. NEW YORK NY PUBLIC UNRESTRICTED AMERICAN JEWISH CONGRESS 115 EAST 57TH ST ST 11 NEW YORK 10022 N/A PUBLIC UNRESTRICTED 500. See Line 3a statement 60,320. **Total** 3a 104,264. **b** Approved for future payment Total 3ь

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

| Enter gross amounts unless otherwise indicated | | Unrelat | ed business income | Exclude | d by section 512, 513, or 514 | |
|--|--|--------------------------|---------------------------------|--|--|--|
| | Program service revenue: | (a) Business code | (b) Amount | (c) Exclu- sion code | (d) Amount | (e) Related or exempt function income (see the instructions) |
| | a | | | | | |
| ١ | b | | | | | <u> </u> |
| (| c | ļ | | <u> </u> | | |
| (| d | | | ļ | | |
| (| e | | | ļ | | |
| 1 | <u> </u> | | | | | |
| | g Fees and contracts from government agencies | | | | | |
| | Membership dues and assessments | | | ├ | | |
| 3 | Interest on savings and temporary cash investments | | | | | |
| 4 | Dividends and interest from securities | 900001 | | The sale | Security to the second decrease of the second | E |
| 5 | Net rental income or (loss) from real estate. | F | | SCY YET | MARIAN TANKS | - A - 1 |
| | a Debt-financed property | | | ļ | | |
| _ | Not debt-financed property | | | ļ | | |
| 6 | Net rental income or (loss) from personal property | | | ļ | | |
| 7 | Other investment income | | ···· | | | |
| 8 | Gain or (loss) from sales of assets other than inventory . | | | ļ | | |
| 9 | Net income or (loss) from special events | | | ļ | | |
| 10 | Gross profit or (loss) from sales of inventory | # 10 W S | W. 4 | 4.5 (2.0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | *************************************** | |
| 11 | Other revenue. | 00 40 20 A | Add Strate Street Street Street | T. W. | 788 15 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | |
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| t | D | | | | | |
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| C | 1 | | | - | | |
| € | | BE C. Frank L. Hardenik. | | 10.7.58% f. es | | |
| | | | | | | |
| | Subtotal. Add columns (b), (d), and (e) | | 50,416. | Contract of | | |
| 13 | Total. Add line 12, columns (b), (d), and (e) | | | Grand Control | 13 | 50,416. |
| 13 | | | | | | 50,416. |
| 13 (See | Total. Add line 12, columns (b), (d), and (e) | culations) | | | 13 | 50,416. |
| 13 See Pär Lin | Total. Add line 12, columns (b), (d), and (e) worksheet in the instructions for line 13 to verify cale | culations) Accompli | shment of Exempt | Purpos | 13 ₋ | |
| 13 See Pär Lin | Total. Add line 12, columns (b), (d), and (e) worksheet in the instructions for line 13 to verify cale | culations) Accompli | shment of Exempt | Purpos | 13 ₋ | |
| 13 See Pär Lin | Total. Add line 12, columns (b), (d), and (e) worksheet in the instructions for line 13 to verify cale | culations) Accompli | shment of Exempt | Purpos | 13 ₋ | |
| 13 See Pär Lin | Total. Add line 12, columns (b), (d), and (e) worksheet in the instructions for line 13 to verify cale | culations) Accompli | shment of Exempt | Purpos | 13 ₋ | |
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| 13 See Pär Lin | Total. Add line 12, columns (b), (d), and (e) worksheet in the instructions for line 13 to verify cale | culations) Accompli | shment of Exempt | Purpos | 13 ₋ | |
| 13 See Pär Lin | Total. Add line 12, columns (b), (d), and (e) worksheet in the instructions for line 13 to verify cale | culations) Accompli | shment of Exempt | Purpos | 13 ₋ | |
| 13 See Pär Lin | Total. Add line 12, columns (b), (d), and (e) worksheet in the instructions for line 13 to verify cale | culations) Accompli | shment of Exempt | Purpos | 13 ₋ | |
| 13 See Pär Lin | Total. Add line 12, columns (b), (d), and (e) worksheet in the instructions for line 13 to verify cale | culations) Accompli | shment of Exempt | Purpos | 13 ₋ | |
| 13 See Pär Lin | Total. Add line 12, columns (b), (d), and (e) worksheet in the instructions for line 13 to verify cale | culations) Accompli | shment of Exempt | Purpos | 13 ₋ | |
| 13 See Pär Lin | Total. Add line 12, columns (b), (d), and (e) worksheet in the instructions for line 13 to verify cale | culations) Accompli | shment of Exempt | Purpos | 13 ₋ | |
| 13 See Pär Lin | Total. Add line 12, columns (b), (d), and (e) worksheet in the instructions for line 13 to verify cale | culations) Accompli | shment of Exempt | Purpos | 13 ₋ | |
| 13 See Pär Lin | Total. Add line 12, columns (b), (d), and (e) worksheet in the instructions for line 13 to verify cale | culations) Accompli | shment of Exempt | Purpos | 13 ₋ | |
| 13 See Pär Lin | Total. Add line 12, columns (b), (d), and (e) worksheet in the instructions for line 13 to verify cale | culations) Accompli | shment of Exempt | Purpos | 13 ₋ | |
| 13 See Pär Lin | Total. Add line 12, columns (b), (d), and (e) worksheet in the instructions for line 13 to verify cale | culations) Accompli | shment of Exempt | Purpos | 13 ₋ | |
| 13 See Pär Lin | Total. Add line 12, columns (b), (d), and (e) worksheet in the instructions for line 13 to verify cale | culations) Accompli | shment of Exempt | Purpos | 13 ₋ | |
| 13 See Pär Lin | Total. Add line 12, columns (b), (d), and (e) worksheet in the instructions for line 13 to verify cale | culations) Accompli | shment of Exempt | Purpos | 13 ₋ | |
| 13 See Pär Lin | Total. Add line 12, columns (b), (d), and (e) worksheet in the instructions for line 13 to verify cale | culations) Accompli | shment of Exempt | Purpos | 13 ₋ | |
| 13 See Pär Lin | Total. Add line 12, columns (b), (d), and (e) worksheet in the instructions for line 13 to verify cale | culations) Accompli | shment of Exempt | Purpos | 13 ₋ | |
| 13 See Pär Lin | Total. Add line 12, columns (b), (d), and (e) worksheet in the instructions for line 13 to verify cale | culations) Accompli | shment of Exempt | Purpos | 13 ₋ | |
| 13 See Pär Lin | Total. Add line 12, columns (b), (d), and (e) worksheet in the instructions for line 13 to verify cale | culations) Accompli | shment of Exempt | Purpos | 13 ₋ | |
| 13 See Pär Lin | Total. Add line 12, columns (b), (d), and (e) worksheet in the instructions for line 13 to verify cale | culations) Accompli | shment of Exempt | Purpos | 13 ₋ | |

BAA

(856) 910-8300

Form 990-PF (2009)

Phone no

| Part XV | II Information F Exempt Orga | Regarding T | ransfers To and Trans | actions ar | nd Relations | hips With Nonc | haritable | • | - 5 - |
|--------------------------|---|---------------------------------------|--|--|--|--|------------------------------------|-------------|-------|
| • | | | | | | | 1 | Yes | No |
| desc | the organization directl cribed in section 501(c) ting to political organiz | of the Code (| engage in any of the followir other than section 501(c)(3) | ng with any o organization | other organizati s) or in section | on 527, | | SA, Y | , S. |
| | | | o a noncharitable exempt org | nanization of | ;. | | | | |
| | 0 | | | | • | | 1a (1) | · · ' | |
| • • | Other assets . | | | | | | 1a(1) | | X |
| | er transactions: | •• | | | • | • | 10 (2) | l | |
| | Sales of assets to a no | ncharitable ex | empt organization | | | | 1 b (1) | | x |
| | | | table exempt organization | | | | 1b (2) | | X |
| | Rental of facilities, equ | | • • | | | | 1 b (3) | | x |
| (4) F | Reimbursement arrang | ements | | • | | | 1 b (4) | | X |
| | Loans or loan guarante | | | | | | 1 b (5) | | х |
| (6) F | Performance of service | s or membersl | hip or fundraising solicitation | ıs | | | 1 b (6) | | х |
| | | | ists, other assets, or paid em | | | | 1c | | х |
| d If the the cany i | | | ' complete the following sche by the reporting foundation show in column (d) the value of noncharitable exempt organization | | | ways show the fair n less than fair marke or services received insfers, transactions, and | | | ts. |
| · | | | | | 2 | | onaring arrain | gomon | |
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| | <u> </u> | | | | | | | | |
| | | | | | | · —————————— | <u> </u> | | |
| descr | e foundation directly or libed in section 501(c) s,' complete the follow | of the Code (o | ated with, or related to, one ther than section 501(c)(3)) | or more tax- or in section | exempt organiz 527? | ations . | Yes | x I | No |
| | (a) Name of organizat | ion | (b) Type of organiza | ation | (c |) Description of rela | tionship | | |
| | | | | | X | | T | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | <u> </u> | | | | | | |
| Under pena complete (| alties of perjury, I declare that Declaration of preparer (other t | have examined the han taxpayer or fid | is return, including accompanying scho uciary) is based on all information of v | edules and stater which preparer ha | ments, and to the be as any knowledge | st of my knowledge and be | lief, it is true, | correct | , and |
| - | Dol | ~ Z - | 1 | 9 | delu | Trus | tee | _ | |
| Signa | ature of officer or trustee | | | Date | 170-7- | Title | | | |
| Paid Pre- | Preparer's signature | Mc Di | 19.7 | Date 9 | 1/1 | | er's Identifyini ignature in th | | |
| parer's | Firm's name (or SELA | MAN, TAR | OUINI & ASSOCIATES | LLC | / | | 21758 | | |
| Use Only | yours if self- employed), 1800 | | VENUE WEST SUITE 3 | | | | | | |
| ļ , | address and | RY HILL | | NJ 080 | 002 | Phone no ► (856 |) 910- | 8300 |) |

NJ 08002

Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

► Attach to Form 990, 990-EZ, or 990-PF

OMB No 1545-0047

2009

| Name of the organization | | Employer identification number |
|--|---|--|
| THE BERAN FAMILY FOUNDATION | | 22-6780379 |
| Organization type (check one): | | |
| Filers of: | Section: | |
| Form 990 or 990-EZ | 501(c)() (enter number) organization | |
| | 4947(a)(1) nonexempt charitable trust not treated as | a private foundation |
| | 527 political organization | |
| Form 990-PF | X 501(c)(3) exempt private foundation | |
| 1 01111 990-F1 | 4947(a)(1) nonexempt charitable trust treated as a p | rusta foundation |
| | 501(c)(3) taxable private foundation | invate foundation |
| | | |
| Check if your organization is covered by the Ge Note: Only a section 501(c)(7), (8), or (10) organization | eneral Rule or a Special Rule. anization can check boxes for both the General Rule and a | a Special Rule. See instructions. |
| General Rule – X For an organization filing Form 990, 990-E2 contributor. (Complete Parts I and II.) | , or 990-PF that received, during the year, \$5,000 or more | e (in money or property) from any one |
| Special Rules – | | |
| 509(a)(1)/170(b)(1)(A)(vi) and received from | orm 990 or 990-EZ, that met the 33-1/3% support test of to any one contributor, during the year, a contribution of the rull Form 990-EZ, line 1. Complete Parts I and II. | he regulations under sections e greater of (1) \$5,000 or (2) 2% of the |
| For a section 501(c)(7), (8), or (10) organizaggregate contributions of more than \$1,000 prevention of cruelty to children or animals | ation filing Form 990 or 990-EZ, that received from any on 0 for use exclusively for religious, charitable, scientific, lite Complete Parts I, II, and III. | e contributor, during the year, erary, or educational purposes, or the |
| contributions for use exclusively for religious this box is checked, enter here the total con | ation filing Form 990 or 990-EZ, that received from any on s, charitable, etc, purposes, but these contributions did no itributions that were received during the year for an <i>exclu</i> s unless the General Rule applies to this organization becau | ot aggregate to more than \$1,000 If |
| religious, charitable, etc, contributions of \$5 | ,000 or more during the year | > \$ |
| 990-PF) but it must answer 'No' on Part IV, line | the General Rule and/or the Special Rules does not file Se 2 of their Form 990, or check the box on line H of its Forg requirements of Schedule B (Form 990, 990-EZ, or 990-I | m 990-EZ, or on line 2 of its Form |
| BAA For Privacy Act and Paperwork Reduction | on Act Notice, see the Instructions Schedule E | 3 (Form 990, 990-EZ, or 990-PF) (2009) |

| _ | | | | | |
|--|---|---|-------|---|--|
| Form 990-PF, Page 2, Part III, Line Other Decreases Stmt | 5 | | | | |
| LOSS ON SALE OF SECURITI FEDERAL TAXES | ES | | 2 | 2,113. 36. | |
| Total | | = | 2 | 2,149. | |
| Form 990-PF, Page 6, Part VIII, Lin Information about Officers, Director | | | | , | |
| (a) Name and address | (b) Title, and average hours per week devoted to position | (c) Compensation (If not paid, enter -0-) | | (d) Contributions to employee benefit plans and deferred compensation | account, other allowances |
| Person Business . SARA SPINDEL H ACKENSACK NJ 07670 Person Business MINDY SATSKY NEW YORK, NY NEW YORK, NY | TRUSTEE 1.00 | | 0. | 0 | |
| Total Form 990-PF, Page 11, Part XV, lin | a 32 | | 0. | 0 | <u>.</u> <u>0.</u> |
| Line 3a statement | e Ja | | | | |
| Recipient Name and address (home or business) | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | 1 | Purpose of or contribution | Person or Business Checkbox Amount |
| a Paid during the year JEFFERSON MEDICAL COLLEGE 1025 WALNUT ST PHILADELPHIA PA 19107 WILDLIFE CONSERVATION SOCIETY 2300 SOUTHERN BLVD BRONX NY 10460 DOROT FOUNDATION NY NEW YORK NY 10022 | N/A N/A | PUBLIC PUBLIC | UNRES | STRICTED STRICTED | Person or Business X 700. Person or Business X 1,106. Person or Business X 1,055. |
| CHAPPAQUA SCHOOL FOUNDATION PO BOX 202 CHAPPAQUA NY 10514 | N/A | PUBLIC | UNRES | TRICTED | Person or Business X |

Form 990-PF, Page 11, Part XV, line 3a Line 3a statement

Continued

| Recipient | If recipient is | Foun- | Purpose of | Person or |
|-----------------------------------|-----------------|-----------|-----------------------|------------|
| Noorpiciti | an individual, | dation | grant or contribution | |
| Name and address | show any | status | grant or contribution | Checkbox |
| (home or business) | 1 | | 1 | Checkbox |
| (nome or business) | relationship to | of re- | | A |
| | any foundation | cipient | | Amount |
| | manager or | } | | |
| | substantial | | | |
| | contributor | | | <u></u> |
| a Paid during the year | | | | |
| THE PENN FOUNDATION | | | | Person or |
| 601 FRANKLIN BLDG | | | | Business X |
| PHILA PA 19104 | N/A | PUBLIC | UNRESTRICTED | 2,600. |
| UNIVERSITY OF MARYLAND | | | | Person or |
| MD | | | | Business X |
| COLLEGE PARK MD 20742 | N/A | PUBLIC | UNRESTRICTED | 160. |
| THE GILLEN BREWER SCHOOL | | | | Person or |
| 410 EAST 92ND ST | | | | Business X |
| NEW YORK NY 10128 | N/A | PUBLIC | UNRESTRICTED | 2,900. |
| PROJECT KIDS WORLDWIDE | | <u> </u> | | Person or |
| 80 FIFTH AVE | | | | Business X |
| NEW YORK NY 10027 | | PURTITO | UNRESTRICTED | 350. |
| NYU SCHOOL OF LAW | , | TODBIC | OWNEDTRICIED | Person or |
| 110 WEST THIRD ST 2ND FL | | | | Business X |
| NEW YORK NY 10012 | N/A | PURITO | UNRESTRICTED | 1,000. |
| CLINTON BUSH HAITI FUND | N/A | TOBBIC | ONNESTRICIED | Person or |
| PO_BOX_632454 | | - | | Business X |
| BALTIMORE MD 21263 | N/A | DIBITC | UNRESTRICTED | 150. |
| NJ DIVISION OF CONSUMER AFFAIRS | N/A | POBLIC | UNKESTRICIED | Person or |
| NJ | | | | Business X |
| | N/A | | INDECEDICATED | |
| TRENTON NJ 08002 REED ACADEMY INC | N/A | PUBLIC | UNRESTRICTED | 30. |
| | | | | Person or |
| 85 SUMMIT AVE GARFIELD NJ 07026 | | | | Business X |
| | N/A | PUBLIC | UNRESTRICTED | 500. |
| NATIONAL MARFAN FOUNDATION | | | | Person or |
| 22 MANHASSET AVE | | | | Business X |
| PORT WASHINGTON NY 11050 | N/A | POBLIC | UNRESTRICTED | 300. |
| GEORGE WASHINGTON UNIVERSITY | | | | Person or |
| 2121 I ST NW | | | | Business X |
| WASHINGTON DC 20032 | N/A | PUBLIC | UNRESTRICTED | 4,000. |
| GREAT NON PROFITS | | | | Person or |
| PO BOX 1133 | | | | Business X |
| PALO ALTO CA 94103 | N/A | PUBLIC | UNRESTRICTED | 6,100. |
| THE H CANCER FOUNDATION | | | | Person or |
| 60 S. LA GRANGE RD | | | | Business X |
| LA GRANGE IL 60525 | N/A | PUBLIC | UNRESTRICTED | 1,000. |
| | | | | Person or |
| 8335 N. MILITARY TRAIL | | | | Business X |
| PALM BEACH GARENS FL 33410 | N/A | PUBLIC | UNRESTRICTED | 1,000. |
| | | | | Person or |
| 26 BROADWAY | | | | Business X |
| NEW YORK NY 10004 | | PUBLIC | UNRESTRICTED | 1,350. |
| OAK FOUNDATION | | | | Person or |
| 35 WEST 35TH ST ST 1200 | | | | Business X |
| NEW YORK NY 10001 | N/A | PUBLIC | UNRESTRICTED | 1,000. |

Form 990-PF, Page 11, Part XV, line 3a Line 3a statement

Continued

| Recipient Name and address (home or business) a Paid during the year SUSAN G. KOMEN GREATER NYC 470 SEVENTH AVE 7TH FL | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution | Person or Business Checkbox Amount |
|--|--|--------------------------------|----------------------------------|---|
| SUSAN G. KOMEN GREATER NYC | | | | |
| SUSAN G. KOMEN GREATER NYC | | Ì | | |
| | | | | Person or |
| | | | | Business X |
| NEW YORK NY 10018 | N/A | | UNRESTRICTED | 100. |
| CENTRAL ISRAEL FUND | | | | Person or |
| NY | | | | Business X |
| NEW YORK NY 1002 | N/A | PUBLIC | UNRESTRICTED | 600. |
| AMERICAN DIABETES ASSOC | | | | Person or |
| 1701 N. BEAUREGARD ST | | | | Business X |
| ALEXANDRIA VA 12231 | N/A | | UNRESTRICTED | 100. |
| TEMPLE EMANU-EL | | | | Person or |
| ONE EAST 65 ST | | | | Business X |
| NEW YORK NY 10065 | | | UNRESTRICTED | 6,906. |
| TEMPLE SHAARY TEFILA | | | | Person or |
| 250 EAST 79TH ST | | | | Business X |
| NEW YORK NY 10075 | | | UNRESTRICTED | 3,652. |
| CARES FOUNDATION | . | | | Person or |
| NY | | | | Business X |
| NEW YORK NY 10022 | N/A | PUBLIC | UNRESTRICTED | 500. |
| WESTCHESTER GOLF ASSOC | | | | Person or |
| 49 KNOLLWOOD RD_STE_225 | | | | Business X |
| ELMSFORD NY 10523 | N/A | PUBLIC | UNRESTRICTED | 300. |
| | | | | Person or |
| <u>NC</u> | | | | Business X |
| DURHAN NC 27708 | N/A | PUBLIC | UNRESTRICTED | 2,500. |
| ALEPH SOCIETY | | | | Person or |
| 25 WEST 4TH ST STE 1405 | | | UNRESTRICTED | Business X |
| NEW YORK NY 10036 | N/A | PUBLIC | UNRESTRICTED | 1,200. |
| UTA FOUNDATION | | | | Person or |
| 9560 WILSHIE BLVD BEVERLY HILLS CA 90212 | | | | Business X |
| VEGUTUR VERRANA | | PUBLIC | UNRESTRICTED | 6,228. |
| YESHIVA KETANA | | | | Person or |
| 346 W. 89TH STREET NEW YORK NY 10024 N | N/A | | UNRESTRICTED | Business X 5,000. |
| TEMPLAN ACUAT | | FABRIC | | Person or |
| PO BOX 532 | | | | Business X |
| OCEANSIDE NY 11572 | N / A | PURTIC | UNRESTRICTED | 7,083. |
| AMERICAN CANCER SOCIETY | , | 200010 | | Person or |
| NY CANCER BOOTETT | | | | Business X |
| NEW YORK NY 10022 N | N/A | PUBLTC | UNRESTRICTED | 500. |
| REMEMBER US PROJECT | | 202010 | | Person or |
| NY | | | | Business X |
| NEW YORK NY 10022 N | | PUBLIC | UNRESTRICTED | 500. |

Form 990-PF, Page 1, Part I

Line 16c - Other Professional Fees

| Name of Provider | Type of Service Provided | Amount Paid Per Books | Net Investment Income | Adjusted Net Income | Disbursements for Charitable Purposes |
|---------------------|-----------------------------|-----------------------------|-----------------------------|---------------------------|---|
| STA ASSOC LLC | TAX PREP | 500. | | | |

Total

500.

Form 990-PF, Page 2, Part II, Line 10b

L-10b Stmt

| | End o | Year | |
|---|---------------|----------------------|--|
| Line 10b - Investments - Corporate Stock: | Book Value | Fair Market Value | |
| PER INVESTMENT STATEMENT | 1,886,703. | 1,936,015. | |
| Total | 1,886,703. | 1,936,015. | |

| | COST | FMV | ADJUST |
|--------------|--------------|--------------|---------------|
| STOCKS | 974,813.34 | 1,010,540.45 | 35,727.11 |
| MUTUAL | 75,051.01 | 76,682.72 | 1,631.71 |
| BONDS | 733,950.17 | 740,348.50 | 6,398.33 |
| PARTNERSHIPS | 102,889.04 | 108,444.00 | 5,554.96 |
| | 1,886,703.56 | 1,936,015.67 | 49,312.11 |
| CASH | 70,854.82 | 70,854.82 | |
| | 1,957,558.38 | 2,006,870.49 | 49,312.11 |

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Supporting Statement of:

Form 990-PF, p1/Line 1(a)

| Amount |
|------------|
| 1,816,688. |
| |

Total

1,816,688.

THE BERAN FAMILY FOUNDATION SCHEDULE OF LONG/SHORT TERM GAIN/(LOSS)

11/1/09 - 10/31/10

| DESCRIPTION | QUANTITY | DATE ACQUIRED | DATE SOLD | GROSS PROCEEDS | COST BASIS | GAIN (LOSS) | LONG TERM | SHORT TERM |
|---|------------------|------------------------|--------------|------------------------|---------------|----------------|--------------|---------------|
| FLORIDA HSG FIN GROUP REV | 25,000 | 3/30/2010 | 4/21/2010 | 25,308.16 | 25,437.50 | (129 34) | _ | (129 34) |
| GOLDMAN SACHS GROUP INC | 25,000 | 3/23/2009 | 4/21/2010 | 26,839 93 | 23,916.00 | 2,923 93 | 2,923.93 | - |
| GENERAL ELECTRIC CAPITAL | 1,150 | 3/23/2009 | 4/21/2010 | 28,370.01 | 25,163.06 | 3,206 95 | 3,206 95 | - |
| PNC CAPITAL TRUST E | 600 | 3/23/2009 | 4/21/2010 | 15,787.70 | 12,219 00 | 3,568 70 | 3,568.70 | • |
| VISTEON CORP | 26 | 4/12/1999 | 4/21/2010 | 19 71 | 435.74 | (416.03) | (416.03) | - |
| WELLS FARGO CAPITAL XII | 600 | 3/23/2009 | 4/21/2010 | 15,298.71 | 12,384.00 | 2,914.71 | 2,914.71 | - |
| LIBERTY NY DEV CORP | 25,000 | 3/9/2010 | 4/22/2010 | 24,969 79 | 25,624 00 | (654.21) | - | (654.21) |
| JPMORGAN CHASE CAPITAL | 750 | 3/23/2009 | 4/22/2010 | 18,590 67 | 15,022 50 | 3,568 17 | 3,568.17 | • |
| NEW YORK ST MTG AGY RV | 10,000 | 3/16/2010 | 4/28/2010 | 9,723 00 | 10,050 00 | (327 00) | - | (327 00) |
| PNC CAPITAL TRUST E | 200 | 3/23/2009 | 5/3/2010 | 5,160 24 | 4,073 00 | 1,087.24 | 1,087.24 | • |
| PNC CAPITAL TRUST E | 100 | 3/23/2009 | 5/3/2010 | 2,572.82 | 2,036.50 | 536.32 | 536 32 | - |
| COLORADO HOUSING FINL | 15,000 | 3/12/2010 | 5/3/2010 | 15,000 00 | 15,112 50 | (112 50) | - | (112.50) |
| COLORADO HOUSING FINL | 10,000 | 3/12/2010 | 5/5/2010 | 9,687.75 | 10,075.00 | (387 25) | - | (387.25) |
| PNC CAPITAL TRUST E | 300 | 3/23/2009 | 5/6/2010 | 7,296.10 | 6,109.50 | 1,186.60 | 1,186 60 | - |
| WELLS FARGO CAPITAL XII | 500 | 3/23/2009 | 5/10/2010 | 12,703.91 | 10,320 00 | 2,383.91 | 2,383.91 | - |
| WELLS FARGO CAPITAL XII | 100 | 3/23/2009 | 5/10/2010 | 2,533.38 | 2,064 00 | 469 38 | 469.38 | - |
| NOKIA CORP | 750 | 3/15/2010 | 6/2/2010 | 7,363 62 | 11,448 75 | (4,085.13) | - | (4,085 13) |
| JPMORGAN CHASE CAPITAL | 172 | 3/23/2009 | 6/4/2010 | 4,195 55 | 3,445.16 | 750.39 | 750.39 | - |
| JPMORGAN CHASE CAPITAL | 128 | 3/23/2009 | 6/4/2010 | 3,120.28 | 2,563.84 | 556 44 | 556.44 | - |
| JPMORGAN CHASE CAPITAL | 100 | 3/23/2009 | 6/4/2010 | 2,441.22 | 2,003 00 | 438 22 | 438 22 | - |
| JPMORGAN CHASE CAPITAL | 100 | 3/23/2009 | 6/4/2010 | 2,440 24 | 2,003 00 | 437 24 | 437 24 | - |
| TOYOTA MOTOR CREDIT CORP | 25,000 | 3/15/2010 | 6/29/2010 | 25,599 65 | 25,475.00 | 124.65 | - | 124.65 |
| BP PLC | 1,000 | 5/18/2010 | 7/6/2010 | 30,803.47 | 51,890.90 | (21,087.43) | - | (21,087.43) |
| CITIGROUP FUNDING INC | 25,000 | 6/3/2010 | 7/20/2010 | 25,000 00 | 25,250.00 | (250 00) | - | (250.00) |
| FRONTIER COMMUNICATIONS | 180 | 3/15/2010 | 7/28/2010 | 1,296 67 | 1,427.21 | (130.54) | - | (130 54) |
| HSBC HOLDINGS PLC | 1,000 | 6/17/2010 | 8/10/2010 | 26,022 55 | 25,000.00 | 1,022.55 | - | 1,022.55 |
| BARCLAYS BANK PLC | 25,000 | 6/7/2010 | 8/27/2010 | 25,000.00 | 24,375 00 | 625.00 | - | 625.00 |
| BARCLAYS BANK PLC | 1,000 | 5/6/2010 | 8/30/2010 | 23,214 19 | 20,045 00 | 3,169 19 | - | 3,169.19 |
| GARMIN LTD | 500 | 3/9/2010 | 8/30/2010 | 13,250.89 | 17,785.09 | (4,534 20) | - | (4,534.20) |
| COMSTOCK RESOURCES INC | 275 | 4/5/2010 | 9/7/2010 | 5,709 29 | 9,659.65 | (3,950 36) | - | (3,950 36) |
| BNP PARIBAS CMS SPREAD | 25,000 | 5/5/2010 | 9/7/2010 | 25,000.00 | 25,125.00 | (125 00) | - | (125.00) |
| FPL GROUP CAPITAL INC | 25,000 | 3/23/2010 | 9/7/2010 | 28,825.00 | 26,256 75 | 2,568 25 | 2,568 25 | - |
| MERRILL LYNCH & CO INC | 30,000 | 6/2/2010 | 9/13/2010 | 30,000 00 | 30,000 00 | | - | |
| SATURNS CAPITAL | 500 | 3/9/2010 | 9/16/2010 | 11,397 30 | 10,740 00 | 657 30 | - | 657 30 |
| SATURNS CAPITAL | 200 | 3/9/2010 | 9/16/2010 | 4,565.92 | 4,296 00 | 269 92 | - | 269 92 |
| SATURNS CAPITAL | 130 | 3/9/2010 | 9/16/2010 | 2,968 49 | 2,792 40 | 176 09 | • | 176 09 |
| SATURNS CAPITAL | 100 | 3/9/2010 | 9/16/2010 | 2,275.66 | 2,148.00 | 127 66 | • | 127 66 |
| SATURNS CAPITAL | 70 | 3/9/2010 | 9/16/2010 | 1,592 12 | 1,503 60 | 88.52 | - | 88.52 |
| BARCLAYS BANK PLC | 1,000 | 5/18/2010 | 9/20/2010 | 23,699.59 | 20,720.00 | 2,979 59 | - | 2,979 59 |
| GENERAL ELECTRIC COMPANY | 1,000 25,000 | 4/21/2010 | 9/20/2010 | 16,201.22 | 18,871 50 | (2,670.28) | - | (2,670 28) |
| FORD MOTOR COMPANY | | 4/22/2010 | 9/20/2010 | 24,727 08 | 22,100.00 | 2,627.08 | - | 2,627.08 |
| ARCHER DANIELS MIDLAND POPULAR INC | 104 | 7/31/1995 | 9/29/2010 | 3,306 16 | 1,262 38 | 2,043.78 | 2,043.78 | (000.00) |
| REPUBLIC SERVICES INC | 1,500 | 5/25/2010 | 9/29/2010 | 4,027 92 | 4,697.00 | (669.08) | - | (669 08) |
| BECKMAN COULTER INC | 500 500 | 3/10/2010 | 10/7/2010 | 15,222.72 | 14,696.75 | 525 97 | • | 525.97 |
| WILLIS NORTH AMERICA INC | | 5/17/2010 | 10/11/2010 | 23,549 14 | 29,924 92 | (6,375.78) | - | (6,375 78) |
| FOREST OIL CORP | 50,000 25,000 | 5/24/2010 5/19/2010 | 10/11/2010 | 53,075 28 26,606.77 | 53,843 75 | (768 47) | - | (768 47) |
| ENTERPRISE PRODUCTS | | 01010010 | 10/13/2010 | | 24,875 00 | 1,731 77 | • | 1,731.77 |
| ENTERPRISE PRODUCTS ENTERPRISE PRODUCTS | 100 100 | 6/3/2010 6/3/2010 | 10/14/2010 | 4,075.18 | 3,446 18 | 629.00 | - | 629 00 |
| ENTERPRISE PRODUCTS | 25 | 6/3/2010 | 10/14/2010 | 4,081.94 | 3,446.17 | 635.77 | - | 635.77 |
| FORD MOTOR COMPANY | 10,000 | | 10/14/2010 | 1,020.61 | 861.55 | 159 06 | - | 159.06 |
| ALABAMA POWER COMPANY | 1,000 | 8/2/2010 6/15/2010 | 10/14/2010 | 9,783.13 | 8,875 00 | 908 13 | - | 908 13 |
| | | 6/15/2010 | 10/18/2010 | 27,259.53 | 25,550 00 | 1,709.53 | - | 1,709 53 |
| NEW JERSEY ECONOMIC DEV AUTH STEEL DYNAMICS INC | 10,000 | 5/19/2010 | 10/18/2010 | 10,000.00 | 10,062 50 | (62.50) | - | (62 50) |
| DOW CHEMICAL COMPANY | 1,000 | 4/26/2010 | 10/28/2010 | 14,213.75 | 17,342.58 | (3,128 83) | - | (3,128 83) |
| DOTE OF LIVEOUR CONTENT | 15,000 | 5/26/2010 | 10/28/2010 | 16,514 13 | 15,570 00 | 944.13 | <u> </u> | 944 13 |
| | | | _ | 799,308 14 | 801,420 93 | (2,112 79) | 28,224 20 | (30,336 99) |

Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

| Department of the Internal Revenue | ne Treasury e Service | | ► File a separat | e application for eac | h return. | | İ | | |
|--|--|---|---|--|---------------------------------|-----------------------------------|---------------------------|--------------------------------------|-----------|
| • If you are | e filing for an A | Automatic 3-Month | Extension, complete | only Part I and ched | k this box | | | | ► X |
| If you are | e filing for an A | Additional (Not Aut | omatic) 3-Month Exte | nsion, complete onl | y Part II (on | page 2 of this | form) | | _ |
| Do not comp | olete Part II un | <i>less</i> you have alrea | ady been granted an a | automatic 3-month ex | tension on a | previously file | d Form 88 | 168 | |
| Part I | Automatic | 3-Month Exten | sion of Time. Onl | y submit original | I (no copie | s needed). | | | |
| A corporation | n required to fi | ile Form 990-T and | requesting an automa | atic 6-month extension | on – check th | nis box and coi | mplete Par | t I only | - |
| All other corp income tax r | | luding 1120-C filers, |), partnerships, REMI | CS, and trusts must i | use Form 700 | 04 to request a | n extensio | n of time to fi | le |
| returns noted the additiona Form 990-T | d below (6 mor Il (not automat Instead, you n | nths for a corporation tic) 3-month extens must submit the full | lectronically file Form on required to file For ion or (2) you file For y completed and sign e-file for Charities & N | m 990-T) However, y ns 990-BL, 6069, or ed page 2 (Part II) of | you cannot fi 8870, group | le Form 8868 e returns, or a c | electronica omposite d | illy if (1) you w or consolidated | vant d |
| | Name of Exempt | Organization | | | | | Employer id | lentification numb | er |
| Type or print | | | | | | | ! | | |
| • | | N FAMILY FO | | | <u></u> | | 22-678 | 0379 | |
| File by the due date for filing your | | | If a P O box, see instruction | ons | | | | | |
| return See | 145 KENT | | de For a foreign address, s | ee instructions | | | | | |
| | TENAFLY | | • | | | | ŊJ | 07670 | |
| Check type of | | filed (file a separat | te application for each | return) | | | | | |
| X Form 990 |) | · · · | Form 990-T (corpo | ration) | | Form 472 | 0 | | |
| Form 990 |)-BL | | Form 990-T (section | on 401(a) or 408(a) ti | rust) | Form 522 | 7 | | |
| Form 990 |)-EZ | | Form 990-T (trust | other than above) | | Form 606 | 9 | | |
| Form 990 |)-PF | | Form 1041-A | | | Form 887 | 0 | | |
| • The book | s are in the ca | are of | | | | | | | |
| Telephon | e No.► | | F | AX No ► | | | | | |
| • | | not have an office | or place of business | | check this be | ox | | | ▶ □ |
| • | | | nnization's four digit G | | | | this is for t | he whole grou | ıp, |
| check this | s box ► | If it is for part of t | he group, check this t | oox 🕒 🗌 and atta | ich a list with | the names an | d EINs of | all members | |
| | sion will cover | | | | | | | | |
| • | | • | ns for a corporation re | • | • | | | | |
| | | , 20 <u>11</u> , to file he organization's re | the exempt organizations for | ion return for the org | janization na | med above | | | |
| | calendar year | J | turri for. | | | | | | |
| — | - | | , 20_ <u>09</u> _, and | ending Oct 31 | 20 1 | 0 | | | |
| | | ess than 12 months | | Initial return | Final retu | | nange in a | ccounting peri | od |
| | | or Form 990-BL, 990 See instructions | D-PF, 990-T, 4720, or | 6069, enter the tenta | ative tax, less | s any | 3a Ş | | 0. |
| b If this a | pplication is fo | or Form 990-PF or 9 | 990-T, enter any refun nt allowed as a credit | dable credits and es | tımated tax p | ayments | 3b \$ | | 0. |
| made II | neruue arry prii | or year overpayme | in allowed as a credit | | | | 300 | | <u> </u> |
| deposit | e Due. Subtract with FTD coup tructions | t line 3b from line 3 oon or, if required, b | Ba. Include your paym by using EFTPS (Elec | ent with this form, or fronic Federal Tax Pa | r, if required, ayment Syste | em). | 3c \$ | | 0. |
| Caution. If yo payment instr | | make an electronic | fund withdrawal with | this Form 8868, see | Form 8453- | EO and Form | 8879-EO fo | or ' | |
| BAA For Priv | acy Act and P | Paperwork Reduction | on Act Notice, see in: | structions. | | | Forn | n 8868 (Rev 4 | -2009) |

| Form 8868 | (Rev 4-2009) THE BERAN FAMILY FOUNDATION | | 22-6780379 Page 2 |
|--|--|----------------------|--------------------------------|
| • If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this box | | | |
| Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868. | | | |
| If you are filing for an Automatic 3-Month Extension, complete only Part I (on page 1). | | | |
| Part II | Additional (Not Automatic) 3-Month Extension of Time. Only | file the original | (no copies needed). |
| | Name of Exempt Organization | | Employer identification number |
| Type or | | | |
| print | THE BERAN FAMILY FOUNDATION | | 22-6780379 |
| Cita bir Aba | Number, street, and room or suite number. If a P.O. box, see instructions. | | For IRS use only |
| File by the extended | | | |
| due date for filing the | 145 KENT ROAD | | , |
| return See instructions | City, town or post office, state, and ZIP code. For a foreign address, see instructions | · . | |
| | TENAFLY NJ 07670 | <u> </u> | , t |
| Check type of return to be filed (File a separate application for each return): | | | |
| Form 9 | | Form 1041-A | Form 6069 |
| Form 9 | 90-BL Form 990-T (section 401(a) or 408(a) trust) | Form 4720 | Form 8870 |
| Form 9 | | Form 5227 | |
| STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868. | | | |
| The books are in care of ▶ | | | |
| Telephone No. ► FAX No. ► | | | |
| • If the organization does not have an office or place of business in the United States, check this box | | | |
| • If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) | | | |
| whole group, check this box If it is for part of the group, check this box I and attach a list with the names and EINs of all | | | |
| members the extension is for | | | |
| 4 I request an additional 3-month extension of time until Sep 15 , 20 11. | | | |
| 5 For calendar year, or other tax year beginning Nov 1, 20 09, and ending Oct 31, 20 10 6 If this tax year is for less than 12 months, check reason: Initial return Final return Change in accounting period | | | |
| | | | |
| 7 State in detail why you need the extension | | | |
| | | | |
| | | | |
| 8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. | | | |
| b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax | | | |
| | ents made Include any prior year overpayment allowed as a credit and any an orm 8868 | nount paid previous | 8ь \$ 0. |
| c Balan | ce Due. Subtract line 8b from line 8a Include your payment with this form, or, TD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment S | if required, deposit | 8c\$ 0. |
| Signature and Verification | | | |
| Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, | | | |
| Correct, appropriete, and that the authorized to prepare the form cicligancian, Casquiss of Phisococieties, LEC (OD's | | | |
| Signature | Title CTT 3 | | Date - C C. |

FIFZ0502 03/11/09

BAA

Form 8868 (Rev 4-2009)