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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

G Check all that apply: ☐ Initial return ☐ Initial Return of a former public charity ☐ Final return  
☐ Amended return ☐ Address change ☐ Name change

Use the IRS label. Otherwise, print or type. See Specific Instructions.	Name of foundation <b>THE BERAN FAMILY FOUNDATION</b>		A Employer identification number <b>22-6780379</b>
	Number and street (or P O box number if mail is not delivered to street address)	Room/suite	B Telephone number (see the instructions) <b>(201) 567-2333</b>
	City or town <b>TENAFLY</b>	State ZIP code <b>NJ 07670</b>	C If exemption application is pending, check here <input type="checkbox"/> D 1 Foreign organizations, check here <input type="checkbox"/> 2 Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/> E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/> F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>

H Check type of organization: ☒ Section 501(c)(3) exempt private foundation  
☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation

I Fair market value of all assets at end of year (from Part II, column (c), line 16)  
\$ **2,006,870.**

J Accounting method: ☒ Cash ☐ Accrual  
☐ Other (specify) \_\_\_\_\_  
(Part I, column (d) must be on cash basis.)

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see the instructions).)		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
REVENUE	1 Contributions, gifts, grants, etc. received (att sch)	1,816,688.			
	2 Ck <input type="checkbox"/> if the foundn is not req to att Sch B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities	50,416.			
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain/(loss) from sale of assets not on line 10				
	b Gross sales price for all assets on line 6a				
	7 Capital gain net income (from Part IV, line 2)		0.		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
b Less Cost of goods sold					
c Gross profit/(loss) (att sch)					
11 Other income (attach schedule)					
12 Total. Add lines 1 through 11	1,867,104.	0.			
ADMINISTRATIVE AND OPERATING EXPENSES	13 Compensation of officers, directors, trustees, etc				
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)				
	b Accounting fees (attach sch)				
	c Other prof fees (attach sch) L-16c Stmt	500.			
	17 Interest				
	18 Taxes (attach schedule X see instr)				
	19 Depreciation (attach sch) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule)				
	INVESTMENT FEES	3,166.			
24 Total operating and administrative expenses. Add lines 13 through 23	3,666.				
25 Contributions, gifts, grants paid	104,264.				
26 Total expenses and disbursements. Add lines 24 and 25	107,930.				
27 Subtract line 26 from line 12:					
a Excess of revenue over expenses and disbursements	1,759,174.				
b Net investment income (if negative, enter -0-)		0.			
c Adjusted net income (if negative, enter -0-)					

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**Part II Balance Sheets**

Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions.)

		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
<b>ASSETS</b>	1 Cash — non-interest-bearing			
	2 Savings and temporary cash investments	7,548.	70,855.	70,855.
	3 Accounts receivable			
	Less: allowance for doubtful accounts			
	4 Pledges receivable			
	Less: allowance for doubtful accounts			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see the instructions)			
	7 Other notes and loans receivable (attach sch.)			
	Less: allowance for doubtful accounts			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments — U.S. and state government obligations (attach schedule)			
	b Investments — corporate stock (attach schedule) <b>L-10b Stmt.</b>	192,985.	1,886,703.	1,936,015.
	c Investments — corporate bonds (attach schedule)			
	11 Investments — land, buildings, and equipment: basis			
<b>LIABILITIES</b>	Less: accumulated depreciation (attach schedule)			
	12 Investments — mortgage loans			
	13 Investments — other (attach schedule)			
	14 Land, buildings, and equipment: basis			
	Less: accumulated depreciation (attach schedule)			
	15 Other assets (describe)			
	16 <b>Total assets</b> (to be completed by all filers — see instructions. Also, see page 1, item I)	200,533.	1,957,558.	2,006,870.
	17 Accounts payable and accrued expenses			
	18 Grants payable			
	19 Deferred revenue			
<b>FUND ASSETS</b>	20 Loans from officers, directors, trustees, & other disqualified persons			
	21 Mortgages and other notes payable (attach schedule)			
	22 Other liabilities (describe)			
	23 <b>Total liabilities</b> (add lines 17 through 22)			
	<b>Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.</b> <input checked="" type="checkbox"/>			
	24 Unrestricted	200,533.	1,957,558.	
	25 Temporarily restricted			
	26 Permanently restricted			
	<b>Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.</b> <input type="checkbox"/>			
	27 Capital stock, trust principal, or current funds			
	28 Paid-in or capital surplus, or land, building, and equipment fund			
<b>FUND BALANCES</b>	29 Retained earnings, accumulated income, endowment, or other funds			
	30 <b>Total net assets or fund balances</b> (see the instructions)	200,533.	1,957,558.	
	31 <b>Total liabilities and net assets/fund balances</b> (see the instructions)	200,533.	1,957,558.	

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

1 Total net assets or fund balances at beginning of year —Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	200,533.
2 Enter amount from Part I, line 27a	2	1,759,174.
3 Other increases not included in line 2 (itemize)	3	
4 Add lines 1, 2, and 3	4	1,959,707.
5 Decreases not included in line 2 (itemize) <u>See Other Decreases Stmt</u>	5	2,149.
6 Total net assets or fund balances at end of year (line 4 minus line 5) —Part II, column (b), line 30	6	1,957,558.

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

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shares MLC Company)

(b) How acquired  
P — Purchase  
D — Donation(c) Date acquired  
(month, day, year)(d) Date sold  
(month, day, year)

<b>1 a SEE ATTACHED SCHEDULE</b>	<b>D</b>	<b>Various</b>	<b>Various</b>
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
<b>a</b> 799,308.		801,421.	-2,113.
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column (i) over column (j), if any	(l) Gains (Column (h) gain minus column (k), but not less than -0-) or Losses (from column (h))
<b>a</b>			-2,113.
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

**2** Capital gain net income or (net capital loss) — [ If gain, also enter in Part I, line 7  
If (loss), enter -0- in Part I, line 7 ] ... **2** -2,113.

**3** Net short-term capital gain or (loss) as defined in sections 1222(5) and (6).

If gain, also enter in Part I, line 8, column (c) (see the instructions). If (loss), enter -0- in Part I, line 8

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

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

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

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

☐ Yes☐ No

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

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

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (column (b) divided by column (c))
2008		0.	0.000000
2007	0.		
2006	0.	0.	0.000000
2005	0.	0.	0.000000
2004	0.	0.	0.000000

**2** Total of line 1, column (d) ... **2** 0.000000

**3** Average distribution ratio for the 5-year base period — divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years ... **3** 0.000000

**4** Enter the net value of noncharitable-use assets for 2009 from Part X, line 5 ... **4** 0.

**5** Multiply line 4 by line 3 ... **5** 0.

**6** Enter 1% of net investment income (1% of Part I, line 27b) ... **6** 0.

**7** Add lines 5 and 6 ... **7** 0.

**8** Enter qualifying distributions from Part XII, line 4 ... **8**

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

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

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

**Part VII-A Statements Regarding Activities**

	Yes	No
1 a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? ..		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?		X
If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.		
c Did the foundation file Form 1120-POL for this year?		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 \$		
e 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? If 'Yes,' attach a detailed description of the activities.		X
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes		X
4 a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		X
b If 'Yes,' has it filed a tax return on Form 990-T for this year?		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If 'Yes,' attach the statement required by General Instruction T.		X
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV	X	
8 a Enter the states to which the foundation reports or with which it is registered (see the instructions)		
b If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If 'No,' attach explanation	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If 'Yes,' complete Part XIV		X
10 Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses		X

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**Part VII-A Statements Regarding Activities Continued**

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes', attach schedule (see instructions)	11		X
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address <u>N/A</u>	13		X
14	The books are in care of <u>ORGANIZATION</u> Telephone no. <u>(201) 567-2333</u> Located at <u>T TENAFLY NJ</u> ZIP + 4 <u>07670</u>			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 -Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year <u>15</u>			

**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
<b>1 a</b> During the year did the foundation (either directly or indirectly):		
(1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<b>b</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 instructions)? Organizations relying on a current notice regarding disaster assistance check here <input type="checkbox"/>	1 b	
<b>c</b> 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?	1 c	X
<b>2</b> 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)).		
<b>a</b> At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2009? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'Yes,' list the years <u>20__ , 20__ , 20__ , 20__</u>		
<b>b</b> Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer 'No' and attach statement -see the instructions.)	2 b	
<b>c</b> If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. <u>20__ , 20__ , 20__ , 20__</u>		
<b>3 a</b> Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<b>b</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.)	3 b	
<b>4 a</b> Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4 a	X
<b>b</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?	4 b	X

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**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required** (continued)**5a** During the year did the foundation pay or incur any amount to:

- (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? ☐ Yes ☒ No
- (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive? ☐ Yes ☒ No
- (3) Provide a grant to an individual for travel, study, or other similar purposes? ☐ Yes ☒ No
- (4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see instructions) ☐ Yes ☒ No
- (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? ☐ Yes ☒ No

**b** If any answer is 'Yes' to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?

5b

Organizations relying on a current notice regarding disaster assistance check here ☐**c** If the answer is 'Yes' to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?☐ Yes ☐ No

If 'Yes,' attach the statement required by Regulations section 53.4945-5(d).

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

6b

If 'Yes' to 6b, file Form 8870.

**7a** At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?☐ Yes ☒ No**b** If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?

7b

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

(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
SAMUEL BERAN MT KISCO NY 07670	TRUSTEE 1.00	0.	0.	0.
DEBORAH ADOVCATE T ENAFLY NJ 07670	TRUSTEE 1.00	0.	0.	0.
CHAYA LOTTNER T ENAFLY NJ 07670	TRUSTEE 1.00	0.	0.	0.
See Information about Officers, Directors, Trustees, Etc.		0.	0.	0.

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

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

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

None

**Part VIII** Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

3 Five highest-paid independent contractors for professional services (see instructions). If none, enter 'NONE'.

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
	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 the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

	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. Foreign foundations, see instructions.)

<b>1</b> Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
<b>a</b> Average monthly fair market value of securities	<b>1a</b>	
<b>b</b> Average of monthly cash balances	<b>1b</b>	
<b>c</b> Fair market value of all other assets (see instructions)	<b>1c</b>	
<b>d</b> Total (add lines 1a, b, and c)	<b>1d</b>	
<b>e</b> Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	<b>1e</b>	
<b>2</b> Acquisition indebtedness applicable to line 1 assets	<b>2</b>	
<b>3</b> Subtract line 2 from line 1d	<b>3</b>	0.
<b>4</b> Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions)	<b>4</b>	0.
<b>5</b> Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	<b>5</b>	0.
<b>6</b> Minimum investment return. Enter 5% of line 5	<b>6</b>	0.

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

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

**Part XII Qualifying Distributions** (see instructions)

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

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

**Part XIII** Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI, line 7				0.
2 Undistributed income, if any, as of the end of 2009.			0.	
a Enter amount for 2008 only				
b Total for prior years: 20__, 20__, 20__				
3 Excess distributions carryover, if any, to 2009:				
a From 2004	0.			
b From 2005	0.			
c From 2006	0.			
d From 2007	0.			
e From 2008	0.			
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2009 from Part XII, line 4: ► \$				
a Applied to 2008, but not more than line 2a				
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				
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a).)				
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	0.			
b Prior years' undistributed income. Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
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			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)				
8 Excess distributions carryover from 2004 not applied on line 5 or line 7 (see instructions)	0.			
9 Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:				
a Excess from 2005	0.			
b Excess from 2006	0.			
c Excess from 2007	0.			
d Excess from 2008	0.			
e Excess from 2009	0.			



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

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	Purpose of grant or contribution	Amount
<b>a Paid during the year</b>				
AMIT WOMEN 817 BROADWAY #4 NEW YORK NY 10003	N/A	PUBLIC	UNRESTRICTED	9,030.
BRANDEIS UNIVERSITY PO BOX 549110-MS124 WALTHAM MA 02454	N/A	PUBLIC	UNRESTRICTED	5,854.
NATIONAL RIMAH COMMISSION INC 3080 BROADWAY NEW YORK NY 10027	N/A	PUBLIC	UNRESTRICTED	500.
SOLOMON SCHECHTER DAY SCHOOL 275 MCKINLEY AVENUE NEW MILFROD NJ 07646	N/A	PUBLIC	UNRESTRICTED	15,410.
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 NEW YORK NY 10075	N/A	PUBLIC	UNRESTRICTED	350.
UJA FEDERATION 50 EISENHOWER DRIVE PARAMUS NJ 07652	N/A	PUBLIC	UNRESTRICTED	5,000.
DANCE MARATHON OF NY NY NEW YORK NY 10075	N/A	PUBLIC	UNRESTRICTED	100.
AMERICAN JEWISH CONGRESS 115 EAST 57TH ST ST 11 NEW YORK NY 10022	N/A	PUBLIC	UNRESTRICTED	500.
See Line 3a statement				60,320.
<b>Total</b>			<b>3a</b>	<b>104,264.</b>
<b>b Approved for future payment</b>				
<b>Total</b>			<b>3b</b>	

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

Enter gross amounts unless otherwise indicated		Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (see the instructions)
		(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	
1	Program service revenue:					
a						
b						
c						
d						
e						
f						
g	Fees and contracts from government agencies ..					
2	Membership dues and assessments					
3	Interest on savings and temporary cash investments					
4	Dividends and interest from securities	900001	50,416.			
5	Net rental income or (loss) from real estate.					
a	Debt-financed property . . . . .					
b	Not debt-financed property ..					
6	Net rental income or (loss) from personal property . . . . .					
7	Other investment income . . . . .					
8	Gain or (loss) from sales of assets other than inventory .					
9	Net income or (loss) from special events ..					
10	Gross profit or (loss) from sales of inventory ...					
11	Other revenue.					
a						
b						
c						
d						
e						
12	Subtotal. Add columns (b), (d), and (e) .		50,416.			
13	Total. Add line 12, columns (b), (d), and (e)					

(See worksheet in the instructions for line 13 to verify calculations )

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

[illegible]



**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

**THE BERAN FAMILY FOUNDATION**

Employer identification number

**22-6780379**

**Organization type** (check one):

**Filers of:**

Form 990 or 990-EZ

**Section:**

- ☐ 501(c)(\_\_\_\_) (enter number) organization  
☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation  
☐ 527 political organization

Form 990-PF

- ☒ 501(c)(3) exempt private foundation  
☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation  
☐ 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

**Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

**General Rule –**

- ☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. (Complete Parts I and II.)

**Special Rules –**

- ☐ For a section 501(c)(3) organization filing Form 990 or 990-EZ, that met the 33-1/3% support test of the regulations under sections 509(a)(1)/170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- ☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ, that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- ☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ, that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc, purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc, purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc, contributions of \$5,000 or more during the year. . . . . ► \$ \_\_\_\_\_

**Caution:** An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF) but it **must** answer 'No' on Part IV, line 2 of their Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

**BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF.**

**Schedule B (Form 990, 990-EZ, or 990-PF) (2009)**

Form 990-PF, Page 2, Part III, Line 5

**Other Decreases Stmt**

LOSS ON SALE OF SECURITIES	2,113.
FEDERAL TAXES	36.
Total	2,149.

Form 990-PF, Page 6, Part VIII, Line 1

**Information about Officers, Directors, Trustees, Etc.**

(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
Person <input type="checkbox"/> Business <input type="checkbox"/> SARA SPINDEL H ACKENSACK NJ 07670	TRUSTEE 1.00	0.	0.	0.
Person <input type="checkbox"/> Business <input type="checkbox"/> MINDY SATSKY NEW YORK, NY NEW YORK NY 07670	TRUSTEE 1.00	0.	0.	0.

Total

0.      0.      0.

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

**Line 3a statement**

Recipient  Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Founda- tion status of re- cipient	Purpose of grant or contribution	Person or Business Checkbox  Amount
<b>a Paid during the year</b> JEFFERSON MEDICAL COLLEGE 1025 WALNUT ST PHILADELPHIA PA 19107	N/A	PUBLIC	UNRESTRICTED	Person or <input type="checkbox"/> Business <input checked="" type="checkbox"/> 500.
WILDLIFE CONSERVATION SOCIETY 2300 SOUTHERN BLVD BRONX NY 10460	N/A	PUBLIC	UNRESTRICTED	Person or <input type="checkbox"/> Business <input checked="" type="checkbox"/> 1,106.
DOROT FOUNDATION NY NEW YORK NY 10022	N/A	PUBLIC	UNRESTRICTED	Person or <input type="checkbox"/> Business <input checked="" type="checkbox"/> 1,055.
CHAPPAQUA SCHOOL FOUNDATION PO BOX 202 CHAPPAQUA NY 10514	N/A	PUBLIC	UNRESTRICTED	Person or <input type="checkbox"/> Business <input checked="" type="checkbox"/> 50.



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

Continued

## Line 3a statement

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foun- dation status of re- cipient	Purpose of grant or contribution	Person or Business Checkbox  Amount
<b>a Paid during the year</b>				
THE PENN FOUNDATION				Person or <input type="checkbox"/>
601 FRANKLIN BLDG				Business <input checked="" type="checkbox"/>
PHILA PA 19104	N/A	PUBLIC	UNRESTRICTED	2,600.
UNIVERSITY OF MARYLAND				Person or <input type="checkbox"/>
MD				Business <input checked="" type="checkbox"/>
COLLEGE PARK MD 20742	N/A	PUBLIC	UNRESTRICTED	160.
THE GILLEN BREWER SCHOOL				Person or <input type="checkbox"/>
410 EAST 92ND ST				Business <input checked="" type="checkbox"/>
NEW YORK NY 10128	N/A	PUBLIC	UNRESTRICTED	2,900.
PROJECT KIDS WORLDWIDE				Person or <input type="checkbox"/>
80 FIFTH AVE				Business <input checked="" type="checkbox"/>
NEW YORK NY 10027	N/A	PUBLIC	UNRESTRICTED	350.
NYU SCHOOL OF LAW				Person or <input type="checkbox"/>
110 WEST THIRD ST 2ND FL				Business <input checked="" type="checkbox"/>
NEW YORK NY 10012	N/A	PUBLIC	UNRESTRICTED	1,000.
CLINTON BUSH HAITI FUND				Person or <input type="checkbox"/>
PO BOX 632454				Business <input checked="" type="checkbox"/>
BALTIMORE MD 21263	N/A	PUBLIC	UNRESTRICTED	150.
NJ DIVISION OF CONSUMER AFFAIRS				Person or <input type="checkbox"/>
NJ				Business <input checked="" type="checkbox"/>
TRENTON NJ 08002	N/A	PUBLIC	UNRESTRICTED	30.
REED ACADEMY INC				Person or <input type="checkbox"/>
85 SUMMIT AVE				Business <input checked="" type="checkbox"/>
GARFIELD NJ 07026	N/A	PUBLIC	UNRESTRICTED	500.
NATIONAL MARFAN FOUNDATION				Person or <input type="checkbox"/>
22 MANHASSET AVE				Business <input checked="" type="checkbox"/>
PORT WASHINGTON NY 11050	N/A	PUBLIC	UNRESTRICTED	300.
GEORGE WASHINGTON UNIVERSITY				Person or <input type="checkbox"/>
2121 I ST NW				Business <input checked="" type="checkbox"/>
WASHINGTON DC 20032	N/A	PUBLIC	UNRESTRICTED	4,000.
GREAT NON PROFITS				Person or <input type="checkbox"/>
PO BOX 1133				Business <input checked="" type="checkbox"/>
PALO ALTO CA 94103	N/A	PUBLIC	UNRESTRICTED	6,100.
THE H CANCER FOUNDATION				Person or <input type="checkbox"/>
60 S. LA GRANGE RD				Business <input checked="" type="checkbox"/>
LA GRANGE IL 60525	N/A	PUBLIC	UNRESTRICTED	1,000.
GULF STREAM COUNCIL				Person or <input type="checkbox"/>
8335 N. MILITARY TRAIL				Business <input checked="" type="checkbox"/>
PALM BEACH GARENS FL 33410	N/A	PUBLIC	UNRESTRICTED	1,000.
JDRF				Person or <input type="checkbox"/>
26 BROADWAY				Business <input checked="" type="checkbox"/>
NEW YORK NY 10004	N/A	PUBLIC	UNRESTRICTED	1,350.
OAK FOUNDATION				Person or <input type="checkbox"/>
35 WEST 35TH ST ST 1200				Business <input checked="" type="checkbox"/>
NEW YORK NY 10001	N/A	PUBLIC	UNRESTRICTED	1,000.

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

Continued

## Line 3a statement

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Founda- tion status of re- cipient	Purpose of grant or contribution	Person or Business Checkbox  Amount
<b>a Paid during the year</b>				
SUSAN G. KOMEN GREATER NYC 470 SEVENTH AVE 7TH FL NEW YORK NY 10018	N/A	PUBLIC	UNRESTRICTED	Person or Business <input checked="" type="checkbox"/> 100.
CENTRAL ISRAEL FUND NY NEW YORK NY 1002	N/A	PUBLIC	UNRESTRICTED	Person or Business <input checked="" type="checkbox"/> 600.
AMERICAN DIABETES ASSOC 1701 N. BEAUREGARD ST ALEXANDRIA VA 12231	N/A	PUBLIC	UNRESTRICTED	Person or Business <input checked="" type="checkbox"/> 100.
TEMPLE EMANU-EL ONE EAST 65 ST NEW YORK NY 10065	N/A	PUBLIC	UNRESTRICTED	Person or Business <input checked="" type="checkbox"/> 6,906.
TEMPLE SHAARY TEFILA 250 EAST 79TH ST NEW YORK NY 10075	N/A	PUBLIC	UNRESTRICTED	Person or Business <input checked="" type="checkbox"/> 3,652.
CARES FOUNDATION NY NEW YORK NY 10022	N/A	PUBLIC	UNRESTRICTED	Person or Business <input checked="" type="checkbox"/> 500.
WESTCHESTER GOLF ASSOC 49 KNOLLWOOD RD STE 225 ELMSFORD NY 10523	N/A	PUBLIC	UNRESTRICTED	Person or Business <input checked="" type="checkbox"/> 300.
DUKE UNIVERSITY NC DURHAM NC 27708	N/A	PUBLIC	UNRESTRICTED	Person or Business <input checked="" type="checkbox"/> 2,500.
ALEPH SOCIETY 25 WEST 4TH ST STE 1405 NEW YORK NY 10036	N/A	PUBLIC	UNRESTRICTED	Person or Business <input checked="" type="checkbox"/> 1,200.
UTA FOUNDATION 9560 WILSHIE BLVD BEVERLY HILLS CA 90212	N/A	PUBLIC	UNRESTRICTED	Person or Business <input checked="" type="checkbox"/> 6,228.
YESHIVA KETANA 346 W. 89TH STREET NEW YORK NY 10024	N/A	PUBLIC	UNRESTRICTED	Person or Business <input checked="" type="checkbox"/> 5,000.
LEMA'AN ACHAI PO BOX 532 OCEANSIDE NY 11572	N/A	PUBLIC	UNRESTRICTED	Person or Business <input checked="" type="checkbox"/> 7,083.
AMERICAN CANCER SOCIETY NY NEW YORK NY 10022	N/A	PUBLIC	UNRESTRICTED	Person or Business <input checked="" type="checkbox"/> 500.
REMEMBER US PROJECT NY NEW YORK NY 10022	N/A	PUBLIC	UNRESTRICTED	Person or Business <input checked="" type="checkbox"/> 500.

Total

60,320.

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**

Line 10b - Investments - Corporate Stock:	End of Year	
	Book Value	Fair Market Value
PER INVESTMENT STATEMENT	1,886,703.	1,936,015.
Total	<u>1,886,703.</u>	<u>1,936,015.</u>

	<b>COST</b>	<b>FMV</b>	<b>ADJUST</b>
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

**Supporting Statement of:****Form 990-PF, p1/Line 1(a)**

Description	Amount
TRANSFER FROM IRA	1,816,688.
Total	<u>1,816,688.</u>

**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	4/21/2010	9/20/2010	16,201.22	18,871.50	(2,670.28)	-	(2,670.28)
FORD MOTOR COMPANY	25,000	4/22/2010	9/20/2010	24,727.08	22,100.00	2,627.08	-	2,627.08
ARCHER DANIELS MIDLAND	104	7/31/1995	9/29/2010	3,306.16	1,262.38	2,043.78	2,043.78	-
POPULAR INC	1,500	5/25/2010	9/29/2010	4,027.92	4,697.00	(669.08)	-	(669.08)
REPUBLIC SERVICES INC	500	3/10/2010	10/7/2010	15,222.72	14,696.75	525.97	-	525.97
BECKMAN COULTER INC	500	5/17/2010	10/11/2010	23,549.14	29,924.92	(6,375.78)	-	(6,375.78)
WILLIS NORTH AMERICA INC	50,000	5/24/2010	10/11/2010	53,075.28	53,843.75	(768.47)	-	(768.47)
FOREST OIL CORP	25,000	5/19/2010	10/13/2010	26,606.77	24,875.00	1,731.77	-	1,731.77
ENTERPRISE PRODUCTS	100	6/3/2010	10/14/2010	4,075.18	3,446.18	629.00	-	629.00
ENTERPRISE PRODUCTS	100	6/3/2010	10/14/2010	4,081.94	3,446.17	635.77	-	635.77
ENTERPRISE PRODUCTS	25	6/3/2010	10/14/2010	1,020.61	861.55	159.06	-	159.06
FORD MOTOR COMPANY	10,000	8/2/2010	10/14/2010	9,783.13	8,875.00	908.13	-	908.13
ALABAMA POWER COMPANY	1,000	6/15/2010	10/18/2010	27,259.53	25,550.00	1,709.53	-	1,709.53
NEW JERSEY ECONOMIC DEV AUTH	10,000	5/19/2010	10/18/2010	10,000.00	10,062.50	(62.50)	-	(62.50)
STEEL DYNAMICS INC	1,000	4/26/2010	10/28/2010	14,213.75	17,342.58	(3,128.83)	-	(3,128.83)
DOW CHEMICAL COMPANY	15,000	5/26/2010	10/28/2010	16,514.13	15,570.00	944.13	-	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

► **File a separate application for each return.**

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box ☒
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form)

**Do not complete Part II unless** you have already been granted an automatic 3-month extension on a previously filed Form 8868**Part I Automatic 3-Month Extension of Time.** Only submit original (no copies needed).A corporation required to file Form 990-T and requesting an automatic 6-month extension — check this box and complete Part I only ☐*All other corporations (including 1120-C filers), partnerships, REMICS, and trusts must use Form 7004 to request an extension of time to file income tax returns*

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

<b>Type or print</b>  File by the due date for filing your return. See instructions.	Name of Exempt Organization		Employer identification number
	THE BERAN FAMILY FOUNDATION		22-6780379
	Number, street, and room or suite number. If a P.O. box, see instructions.		
	145 KENT ROAD		
	City, town or post office, state, and ZIP code. For a foreign address, see instructions.		
	TENAFLY NJ 07670		

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

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

- The books are in the 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) \_\_\_\_\_. If this is for the whole group, check this box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension will cover.

- 1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until Jun 15, 20 11, to file the exempt organization return for the organization named above. The extension is for the organization's return for.

- ☐ calendar year 20 \_\_\_\_ or
- ☒ tax year beginning Nov 1, 20 09, and ending Oct 31, 20 10

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

<b>3a</b> If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	<b>3a</b>	\$	0.
<b>b</b> If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	<b>3b</b>	\$	0.
<b>c Balance Due.</b> Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	<b>3c</b>	\$	0.

**Caution.** If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.**BAA For Privacy Act and Paperwork Reduction Act Notice, see instructions.**

Form 8868 (Rev 4-2009)

- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** and check this box ☒ **X**

**Note.** Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** (on page 1).

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

Type or print  File by the extended due date for filing the return. See instructions.	Name of Exempt Organization	Employer identification number  22-6780379  For IRS use only
	THE BERAN FAMILY FOUNDATION	
	Number, street, and room or suite number. If a P.O. box, see instructions.	
	145 KENT ROAD	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions.	
	TENAFLY NJ 07670	

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

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

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

- The books are in 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) \_\_\_\_\_. If this is for the whole group, check this box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for.

- 4 I request an additional 3-month extension of time until 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.	8a \$	0.
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	8b \$	0.
c <b>Balance Due.</b> Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instrs.	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, and complete, and that I am authorized to prepare this form.

Signature *Saligman, Targum & Associates, LLC* Title CPA's Date 6-2-11