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EXTENSION ATTACHED

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

OMB No 1545-0052

Departme Internal f	ent of the Revenue	Service	Note: The fo	undation n	nay be able to use a copy of the	s return to satisfy state repo	rting requirements	
For ca	lendar	year 2009, or	tax year beginni			and ending $11/$	30 , 2010	
		that apply	Initial return		al Return of a former p	ublic charity		Final return
			Amended ret	ш	Address of		change	
			, unonded to			I A	Employer identification	1 number
Use t IRS la	ne hel	SHORSTEIN	FAMILY FO	TAGNI	ION, INC.		59-2473526	
Otherv	vise,	3265 BAYRI	ERRY ROAD		2011, 21101	lī ē		the instructions)
prir	it [LLE, FL 322	256			904-739-13	11
or typ	ne i		·			To To		on is pending, check here
Instruct							1 Foreign organizations,	
H	hook :	type of organiz	zation: Y Se	stion 50	1(c)(3) exempt private f		- '	meeting the 85% test, check
ו ר) nonexempt cha			orivate foundation	here and attach compi	
I F			ets at end of year	T Acc	counting method: X C			
		rt II, column (c), lii			Other (specify)		under section 507(b)(a 60-month termination
► c	•		1,139.	(Part I	, column (d) must be or		under section 507(b)(
Part I	, Λ,		evenue and	(art i				
ranti			e total of amoun	ts in	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net	t (d) Disbursements for charitable
	co	lumns (b), (c),	and (d) may no	t neces-	expenses per books	income	liteorite	purposes
	sa	rily equal the a	amounts ın colun	ın (a)			ĺ	(cash basis only)
	(56	e the instructi		1 4-14	66,148.		- market with a con-	
		r	s, grants, etc, received		00,140.			250
	2		foundn is not req to a		<u> </u>	28532 . 1 (188		
	3	cash investme		лагу	7,387.	7,387	'. N	I/A . 💷 🔏 🧏 👍
	4	Dividends and int	terest from securities		36,779.	36,779).	12.2 14.
		Gross rents						72 San 18 18 1
	þ	Net rental income or (loss)			1 18 . NE. 18	171 11 12 12 12	Eller Think Eller	The Contract of
R			m sale of assets not o	n line 10	18,538.			
E V	þ	Gross sales price assets on line 6a	for all104	<u>,038.</u>				
Ε	7	Capital gain net in	ncome (from Part IV, I	ne 2)	the state of the	18,538). 5 13 & 14 \$ 1 ac	· 新文章: (1) (1) (1) (2)
N U		Net short-term	, ,				<u>· </u>	
Ē	9	Income modif	ications			2 72 14 282	2 50 8 .7 .7 31.6	31. 4
_	IUa	Gross sales less returns and allowances						
	Ь	Less. Cost of				1 M. M		·新日本企業等等 3
		goods sold	-) (att aab)		No. 12. 1		23	
		Gross profit/(loss	s) (att scn) : (attach schedul	a)		* ****	<u> </u>	
	'''	Other income	SEE STATEM		3,695.	3,69	5.	1
		Total Addulm	es 1 through 11	DIVI 1	132,547.	66,399		\$1, 44 1-E, 1, W1 + 4
			officers, directors, trus	tees, etc.	0.			
- 1			alaries and wages					
- 1				efits				
/¤	164	Uegal fees Pattach	s∤employee ben i schedule≵ SEE	ST 2	61.			61.
A D M	ا ا	Accounting tope-(attach coh					
fi.	6	Other prof fees (attach sch)					
9 1	11%	Intelest !				<u></u>		
E P	18	Taxes (attach schedule	(see instr.)					
OPERAT	19	Depreciation						^
	20	sch) and depl	letion					
Paga Paga	20	Occupancy	rences, and mee	tinas				
ÂE	22	Printing and		ungs				
GN: X	23		es (attach sched	lule)				
SE N								
בָּרְ בַּרְּבְּרָּ בַּרְבְּיִבְּיִי	24	Total operati	ng and administ	rative				C1
≒ 5		expenses. Ac	dd lines 13 throu	gh 23	61.			61. 62,345.
-	25		ts, grants paid PAF		62,345.			02,345.
۱ ۲ د :	26	Total expens	es and disburse	ments.	62,406.		o.	62,406.
	27	Add lines 24	and 25 26 from line 12:		02,400.			32,130.
<u> </u>			venue over expe	nses				
4	"	and disburse	ements		70,141.			
,	t	Net investment in	icome (if negative, en	ter -0-)		66,39	9.	
	c	Adjusted net inco	ome (if negative, enter	-0)	<u> </u>	<u> L</u>		F- 000 PF (0000)
BAA	For Pr	ivacy Act and	Paperwork Redu	ction A	ct Notice, see the instr	uctions.	TEEA0504L 02/02/10	Form 990-PF (2009)

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	Losses for Iax on Investment to the kind(s) of property sold (e g , re- se; or common stock, 200 shares MLC	al estate,) How acquired - Purchase D - Donation	(C) Date acquired (month, day, year)	(d) Date sold (month, day, year)
1a PUBLICLY TRADED SEC	P				
b	,0112122				
d					
ее					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (e) plus (f) m	
a 104,038.		85,	500.		18,538.
b				- · · · · · · · · · · · · · · · · · · ·	
с					
d				·	
<u>e</u>	<u> </u>				
	ring gain in column (h) and owned by			(I) Gains (Colu gain minus column (k	
(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	t	nan -0-) or Losses (fr	om column (h))
<u>a</u> b					18,538.
c				· · · · ·	
d					
e					
2 Capital gain net income or (ne	t capital loss). If gain, also enter the first the first the lift (loss), enter the lift (loss), enter the lift (loss), enter the lift (loss).	enter in Part I, line 7 r -0- in Part I, line 7	2		18,538.
3 Net short-term capital gain or	(loss) as defined in sections 1222(5) a	_			10,000.
in Part I, line 8	e 8, column (c) (see the instructions)	ii (loss), enter -o-	3		0.
Part V 🗐 Qualification Unde	r Section 4940(e) for Reduced	Tax on Net Investmen	t Income		
If 'Yes,' the foundation does not qua	ction 4942 tax on the distributable amo	plete this part		Yes	X No
	n each column for each year; see the	(c)	any entires.	(d)	
(a) Base period years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of noncharitable-use asset	s (co	Distribution Jumn (b) divided	ratio by column (c))
2008	101,034.	1,125,	095.		0.089800
2007	51,666.	1,231,			0.041938
2006	54,312.	1,202,			0.045160
2005	49,508.	1,058,		·	0.046760
2004	24,317.	961,	095.		0.025301
2 Total of line 1, column (d)			2		0.248959
Average distribution ratio for the number of years the foundation	ne 5-year base period — divide the totan has been in existence if less than 5	al on line 2 by 5, or by the	3		
•	That been in existence in less than e	,		+	0.049792
4 Enter the net value of nonchar		/ l 5			0.049792
	itable-use assets for 2009 from Part X	K, line 5	4	1	0.049792
5 Multiply line 4 by line 3	itable-use assets for 2009 from Part X	(, line 5	5	1	
5 Multiply line 4 by line 36 Enter 1% of net investment inc		(, line 5		1	,201,934.
		(, line 5	5	1	59,847.
6 Enter 1% of net investment inc	come (1% of Part I, line 27b)	K, line 5	5	1	59,847. 664.

Form	990-PF (2009) SHORSTEIN FAMILY FOUNDATION, INC.		173526_		Pa	ge 4
Part	VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948	– see th	e instruct	ions)		
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter 'N/A' on line 1.					
	Date of ruling or determination letter (attach copy of letter if necessary - see instr.)					
Ь	Domestic foundations that meet the section 4940(e) requirements in Part V,	-	1		66	<u>54.</u>
	check here ► X and enter 1% of Part I, line 27b		_		,	
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, column (b)		.,:	, 12st	igh .	
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable			<u></u>		السب
	foundations only Others enter -0-).		2		6.6	$\frac{0.}{64.}$
3	Add lines 1 and 2	-	3		00	0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -		5		66	54.
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	-	- :		, 00	<u> </u>
6	Credits/Payments. 2009 estimated tax pmts and 2008 overnayment credited to 2009 6a 1, 3	335.	77 1-21	1		\$5.4
	2009 estimated tax pmts and 2008 overpayment credited to 2009 Exempt foreign organizations — tax withheld at source 6b	,55.		as is to) _x^	
	Tax paid with application for extension of time to file (Form 8868) 6c	-	1. T. 38.35.		18 July 1	27,24
	Backup withholding erroneously withheld 6d		See See	- 12 - Th	(Kirk	32.3
	Total credits and payments Add lines 6a through 6d	\neg	7		1,33	35.
, R	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	▶ 1	10		6	71.
11	Enter the amount of line 10 to be: Credited to 2010 estimated tax 671 . Refunded	▶ 1	11			0.
	VII-A Statements Regarding Activities					
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or di	d it		74		No_
	participate or intervene in any political campaign?			1a	\dashv	<u>X</u>
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?		}	1 b		X
	If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any mater or distributed by the foundation in connection with the activities	als publ	'ished			
С	Did the foundation file Form 1120-POL for this year?			1 c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year		0			
_	(1) On the foundation \$\ \Sigma\\$ 0. (2) On foundation managers \$\ \Sigma\\$	nosed or	0.			
	foundation managers > \$ 0.	,0000		-		
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2	3 : 1 2	<u>X</u>
	If 'Yes,' attach a detailed description of the activities.				ing Talk	
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the change	articles ges		3		X
4 a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		ļ	4a		X
	If 'Yes,' has it filed a tax return on Form 990-T for this year?			4 b	N/	A
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		X
	If 'Yes,' attach the statement required by General Instruction T					100
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either					
	By language in the governing instrument, or				18 mg 18	
	• By state legislation that effectively amends the governing instrument so that no mandatory directions	that cor	nflict		4	لنث
	with the state law remain in the governing instrument?			6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV	_		7	Х	7 **]
8 a	Enter the states to which the foundation reports or with which it is registered (see the instructions) FL					ر دور مسائر
b	off 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			8 b	Х	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942 (for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If 'Yes,' contact the second section 4942 (see instructions for Part XIV)?	j)(3) or ² omplete	1942(j)(5) Part XIV	9		X
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing					х
BAA	and addresses			10 rm 99	 0-PF (2	
~~~			· -		•	•

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Par	t 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		<u>X</u>
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?		12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption Website address  N/A	application	n? <b>13</b>	X	
1/1	The books are in care of ► MARK J. SHORSTEIN  Telephone	a		311	
1-4	Located at 8265 BAYBERRY RD JACKSONVILLE FL ZIP + 4 >	32256		<u> </u>	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> — Check here	_52250	′Ñ/Ã		<u> </u>
	and enter the amount of tax-exempt interest received or accrued during the year	► 15			N/A
Parl	t VII-B   Statements Regarding Activities for Which Form 4720 May Be Required	<del></del>	<del></del>		
	File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.	<del></del>		Yes	No
1 a	During the year did the foundation (either directly or indirectly):				7 /
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes X	No :	3-11	1 × 3
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a		_   " ;		- \
	disqualified person?  (2) Evraph goods convers or facilities to (or secont them from) a disqualified person?		No No	',	,
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?		No		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	_]Yes [X	-   ,		
	(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	1 1	
	(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 <b>any</b> 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) ⁷	1 b	N	<u>'A</u>
	Organizations relying on a current notice regarding disaster assistance check here	▶ [			(i) 57.]
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2009?		1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))				32
а	At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2009?	Yes X	No		
	If 'Yes,' list the years > 20 , 20 , 20 , 20		5 200	. , 4	
b	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a <b>all</b> years listed, answer 'No' and attach statement — see the instructions)	a)(2) )(2) to	2b	N	
_	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years he	ere	<u> </u>	111	-
·	► 20, 20, 20, 20	216	* .	- 3	
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	Yes X	No P		
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	N	<u>'A</u>
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4a		Х
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2009?		4b		X
BAA	the tax year beginning in 2009.		Form 99		
-, .,			1 01111 92	~-: i (4	

Form 990-PF (2009) SHORSTEIN FAMILY E				173526 Page <b>6</b>
Part VII-B Statements Regarding Activiti	ies for Which Form	1 4720 May Be Req	uired (continued)	·
5a During the year did the foundation pay or incu	r any amount to			_
(1) Carry on propaganda, or otherwise attempt	ot to influence legislatio	on (section 4945(e))?	Yes X	No
(2) Influence the outcome of any specific pub on, directly or indirectly, any voter registra	lic election (see section ation drive?	1 4955), or to carry		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 the in section 509(a)(1), (2), or (3), or section	nan a charitable, etc, or 4940(d)(2)? (see instru	rganization described uctions)	Yes X	No
(5) Provide for any purpose other than religion educational purposes, or for the prevention	us, charitable, scientific n of cruelty to children	c, literary, or or animals?	Yes	No
<b>b</b> If any answer is 'Yes' to 5a(1)-(5), did <b>any</b> of described in Regulations section 53.4945 or in (see instructions)?	the transactions fail to a current notice regard	qualify under the exceptions disaster assistance	tions	5b N/A
Organizations relying on a current notice rega	rding disaster assistand	ce check here	►[	]   JO W.A.
c If the answer is 'Yes' to question 5a(4), does to tax because it maintained expenditure response	sibility for the grant?		N/A Yes	No
If 'Yes,' attach the statement required by Regulation and the foundation, during the year, receive an			5	
on a personal benefit contract ⁵ <b>b</b> Did the foundation, during the year, pay premi	ums, directly or indirec	tly, on a personal bene		No 6b X
If 'Yes' to 6b, file Form 8870.		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		* * * * * * * * * * * * * * * * * * * *
7a At any time during the tax year, was the found			h	No No
<b>b</b> If yes, did the foundation receive any proceed				76 N/A
Part VIII Information About Officers, Di and Contractors	irectors, Trustees,	roungation manag	gers, mignly Paid	Employees,
1 List all officers, directors, trustees, foundation	n managers and their	compensation (see inst	ructions).	<del></del>
(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	other allowances
SAMUEL R. SHORSTEIN	PRES/TRUSTEE	0.	0.	0.
8265 BAYBERRY RD JACKSONVILLE, FL 32256	0			
JACK F. SHORSTEIN	VP/SEC/TTEE	0.	0.	0.
8265 BAYBERRY RD JACKSONVILLE, FL 32256	0			
MARK J. SHORSTEIN	VP/TREA/TTEE	0.	0.	0.
8265 BAYBERRY RD	0			
JACKSONVILLE, FL 32256				
2 Compensation of five highest-paid employee	es (other than those inc	luded on line 1 – see ir	structions). 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	other allowances
NONE				
				<del> </del>
			<u>1</u>	
Total number of other employees and ever \$50.000	<u> </u>		<u> </u>	<u> </u>
Total number of other employees paid over \$50,000 BAA	TEEA0306L (	07/06/09		Form <b>990-PF</b> (2009)

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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid and Contractors (continued)	Employees,
3 Five highest-paid independent contractors for professional services – (see instructions). If none,	<del></del>
enter 'NONE.'	(2) (2)
(a) Name and address of each person paid more than \$50,000 (b) Type of service  NONE	(c) Compensation
	<del></del>
Total number of others receiving over \$50,000 for professional services	0
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	Expenses
organizations and other beneficiaries served, conferences convened, research papers produced, etc  1 N/A	
N/A	_
2	-
3	_
	-
4	
	_
	<u></u>
Part X-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 <u>N/A</u>	-
2	_
	-
All other program-related investments. See instructions	
3	-
	-
Total. Add lines 1 through 3	0.
BAA	Form <b>990-PF</b> (2009)

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations see instructions.) 1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes: 1 a 616,883. a Average monthly fair market value of securities. b Average of monthly cash balances 1 b 523,392. 79,963. 1 c c Fair market value of all other assets (see instructions) 1,220,238. d Total (add lines 1a, b, and c) 1 d e Reduction claimed for blockage or other factors reported on lines 1a and 1c 1 e 0 (attach detailed explanation) Acquisition indebtedness applicable to line 1 assets 0. 3 Subtract line 2 from line 1d 3 1,220,238. Cash deemed held for charitable activities. Enter 1-1/2% of line 3 4 18,304. (for greater amount, see instructions) 5 1,201,934. Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4. 60,097. Minimum investment return. Enter 5% of line 5 6 Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and do not complete this part.) and certain foreign organizations check here 60,097. 1 Minimum investment return from Part X, line 6 2a Tax on investment income for 2009 from Part VI. line 5 2a 664. 2b b Income tax for 2009. (This does not include the tax from Part VI) 2c 664. c Add lines 2a and 2b 3 59,433. 3 Distributable amount before adjustments Subtract line 2c from line 1 4 4 Recoveries of amounts treated as qualifying distributions Add lines 3 and 4 5 59,433 6 Deduction from distributable amount (see instructions) Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1 59,433. Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes: a Expenses, contributions, gifts, etc — total from Part I, column (d), line 26 1 a 62,406. 1 b **b** Program-related investments — total from Part IX-B 2 2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes. Amounts set aside for specific charitable projects that satisfy the: a Suitability test (prior IRS approval required) За 3 b **b** Cash distribution test (attach the required schedule) 62,406. 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) 5 5 664 6 61,742. Adjusted qualifying distributions. Subtract line 5 from line 4

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

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Part XIII Undistributed Income (see instructions)

	(a) Corpus	<b>(b)</b> Years prior to 2008	<b>(c)</b> 2008	<b>(d)</b> 2009		
Distributable amount for 2009 from Part XI, line 7		*		59,433.		
2 Undistributed income, if any, as of the end of 2009.						
a Enter amount for 2008 only	2		0.	۶ ,		
<b>b</b> Total for prior years. 20 , 20 , 20		0.				
3 Excess distributions carryover, if any, to 2009.			•	, ,		
a From 2004	ş* '4	₹	a gi	۰ ٪ ،		
<b>b</b> From 2005	. y , ,		٠			
<b>c</b> From 2006	, )	· '	* •	^`		
<b>d</b> From 2007		2 3 A				
e From 2008 35, 565.	,34 <u></u>	ن پر س				
f Total of lines 3a through e	35,565.	, , , , , , , , , , , , , , , , , , , ,	***	, , , , , , , , , , , , , , , , , , , ,		
4 Qualifying distributions for 2009 from Part			5. 4 特别人	一点 喇叭点一		
XII, line 4: ► \$ 62,406.		· .				
a Applied to 2008, but not more than line 2a		* *	0.			
<ul> <li>Applied to undistributed income of prior years (Election required – see instructions)</li> </ul>		0.	The second secon			
c Treated as distributions out of corpus						
(Election required – see instructions)	0.	📸, 🕯 🕠 🖄 🕾 🚶	2 x 2 x 2 x 2 x 2 x 3 x 3 x 3 x 3 x 3 x	1. 1 . 1 . 1 . 1 . 1 . 1 . 1 . 1 . 1 .		
d Applied to 2009 distributable amount	<u> </u>	<u>.</u>		59,433.		
e Remaining amount distributed out of corpus	2,973.			THE STATE OF THE S		
5 Excess distributions carryover applied to 2009	0.	1, ~ <u>\$\frac{1}{2}</u> \tau \frac{1}{2} \tau \frac{1}{2}	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	U.		
(If an amount appears in column (d), the same amount must be shown in column (a).)		The way of a first				
6 Enter the net total of each column as indicated below:						
a Corpus. Add lines 3f, 4c, and 4e Subtract line 5	38,538.	But to But to be				
<b>b</b> Prior years' undistributed income Subtract	Berney or is	0.	· · · · · · · · · · · · · · · · · · ·	Side Company		
line 4b from line 2b	Birth Certain commission	0.	308 1877	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
c Enter the amount of prior years' undistribut- ed income for which a notice of deficiency has been issued, or on which the section		0.				
4942(a) tax has been previously assessed	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	<u> </u>	H . E . H .	~ /y4% ~ %		
d Subtract line 6c from line 6b Taxable amount — see instructions	23	0.				
e Undistributed income for 2008. Subtract line 4a from		las a la l	0.	b to the		
line 2a. Taxable amount — see instructions	<u> </u>					
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)				2		
(see instructions)	0.		,			
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	38,538.		,			
10 Analysis of line 9.						
a Excess from 2005						
<b>b</b> Excess from 2006	]					
c Excess from 2007						
<b>d</b> Excess from 2008 35, 565.	]					
e Excess from 2009 2, 973.			<u></u>	Form 990-PF (2009		

Form 990-PF (2009) SHORSTEIN FAMILY	FOUNDATION,	INC.		59-2473526	Page <b>10</b>
PärtiXIV Private Operating Foundation					N/A
1 a If the foundation has received a ruling or on its effective for 2009, enter the date of the	ruling				
<b>b</b> Check box to indicate whether the foundat	ion is a private ope	erating foundation de		4942(j)(3) or	4942(j)(5)
2a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum investment return from Part X for each year listed	(a) 2009	<b>(b)</b> 2008	(c) 2007	(d) 2006	(e) Total
<b>b</b> 85% of line 2a.					
<ul> <li>Qualifying distributions from Part XII, line 4 for each year listed</li> </ul>					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
<ul> <li>Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c</li> </ul>					
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			<u> </u>		
Supplementary Information assets at any time during the	(Complete this e year – see in	part only if the structions.)	organization ha	d \$5,000 or mor	e in
1 Information Regarding Foundation Managers a List any managers of the foundation who had close of any tax year (but only if they have SEE STATEMENT 5	nave contributed me	ore than 2% of the t than \$5,000) (See	total contributions r section 507(d)(2))	eceived by the found	dation before the
<b>b</b> List any managers of the foundation who ca partnership or other entity) of which the NONE	own 10% or more of foundation has a 1	f the stock of a corp 0% or greater intere	poration (or an equalist	ally large portion of	the ownership of
2 Information Regarding Contribution, Gran Check here X if the foundation only makes requests for funds. If the foundation makes complete items 2a, b, c, and d	nakes contributions	to preselected cha-	ritable organization:	s and does not acce anizations under oth	pt unsolicited er conditions,
a The name, address, and telephone numbe	r of the person to	whom applications s	should be addressed	d:	
<b>b</b> The form in which applications should be s	submitted and infor	mation and materia	als they should inclu	de:	
c Any submission deadlines:					
d Any restrictions or limitations on awards, s	such as by geograp	hical areas, charita	ble fields, kinds of i	nstitutions, or other	factors

_Page **11** 

3 Grants and Contributions Paid During the Y	ear or Approved for Fut	ure Paymen	<u>t</u>	
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	substantial contributor	recipient		<u> </u>
Name and address (home or business)  a Paid during the year  SEE STATEMENT 6	substantial contributor			
Total			▶ 3:	a 62,345.
<b>b</b> Approved for future payment				
Total			<b>&gt;</b> 3	h
Total				ַ ַ ַ ַ ַ ַ ַ ַ ַ ַ ַ ַ ַ ַ ַ ַ

#### Part.XVI-A: Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated	Unrelated business income			by section 512, 513, or 514	
Program service revenue	(a) Business code	<b>(b)</b> Amount	(c) Exclu- sion code	<b>(d)</b> Amount	(e) Related or exempt function income (see the instructions)
a				-	
b					
с					
d					
e					
1					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments			14		
4 Dividends and interest from securities			14	36,779.	
5 Net rental income or (loss) from real estate.	- 14 7 A		3.74°.	文字 <b>体</b> 等发出。20年8年	<b>对身体的形型和</b> 在
a Debt-financed property					
<b>b</b> Not debt-financed property					
6 Net rental income or (loss) from personal property		.,.	<u></u>		
7 Other investment income			<u> </u>		
8 Gain or (loss) from sales of assets other than inventory	<u></u>		18	18,538.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory	T 100 E and to be serve	COTTON OF THE PARTY OF THE PART	(1865 1863 v 3		and the same of th
11 Other revenue	12.4	A St. Caller		30.1. <b>建</b> 联系数-36.8.6.6.6	
a BANK FEE REFUNDS			14	82.	
b MORTGAGE INTEREST INCOME			14	3,613.	
С			<u> </u>		
d					
e	2 A2474 (100742)		No. IN DESIGNA .		
12 Subtotal Add columns (b), (d), and (e)			L SEL		
13 Total. Add line 12, columns (b), (d), and (e)				13	66,399.
(See worksheet in the instructions for line 13 to verify	calculations)				

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See the instructions)
N/A	
·	
	<u> </u>

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

					· -				Yes	No
desc	he organization directly ribed in section 501(c) or ing to political organizat	of the Code (c	engage in any of other than section	the following with 501(c)(3) organi	n any othe zations) o	er organization section s	n 527,	,		
	ing to political organizat sfers from the reporting		a noncharitable	evernt organiza	tion of					
(1)		TOUTHOUTH TO	a nonchamable	exempt organiza	(1011 01.			1a (1)		X
` '	Other assets							1a (2)		X
<b>b</b> Othe	<b>b</b> Other transactions:									
(1)	Sales of assets to a non	charitable exe	empt organization	า				1 b (1)		X
<b>(2)</b> F	Purchases of assets fror	m a noncharita	able exempt orga	nızatıon				1 b (2)		X
(3) F	Rental of facilities, equip	oment, or othe	er assets					1 b (3)		_X
(4) F	Reimbursement arrange	ments						1 b (4)		<u>X</u>
<b>(5)</b> L	oans or loan guarantee.	s						1 b (5)		X
٠,,	Performance of services							1b (6)		X
<b>c</b> Shar	ing of facilities, equipme	ent, mailing li	sts, other assets,	or paid employe	es.			1 c		X
d If the	e answer to any of the a loods, other assets, or s transaction or sharing a	bove is 'Yes,' services given	complete the fol	lowing schedule foundation. If the	Column (	(b) should alw on received l	vays show the fa	air market val arket value in	ue of	
a) Line no.	(b) Amount involved		of noncharitable exem				sfers, transactions,			
<u> </u>	0.		or Horional Table exem	ipt organization			orolog danouodono,	and onlaring arrai	igamoni	
		***								
						<del></del>				
		<u> </u>								
<del></del>			<del></del>				<del></del>			
	<del>                                     </del>	<u> </u>								
	<u> </u>		<del></del>							
	<del> </del>		<del></del>							
	<del> </del>	<del></del>								
	- · · · · · · · · · · · · · · · · · · ·									
desci	e foundation directly or ribed in section 501(c) o s,' complete the followi	of the Code (o	ated with, or rela ther than section	ated to, one or m n 501(c)(3)) or in	ore tax-ex section 5	277 		Yes	s X	No
	(a) Name of organizati	on	<b>(b)</b> Type	of organization		(c	) Description of	relationship		
<u>/A</u>										
\				·				<del> </del>		
			<del></del>				<del></del>			
				-						
Under pen complete	alties of perjury, I declare that I Declaration of preparer (other t	have examined the	ns return, including ac duciary) is based on al	companying schedules Il information of which	and statement preparer has	ents, and to the b	est of my knowledge	and belief, it is tri	ue, corre	ct, and
<b>-</b>	Xau 6	Show	6		17-	- 13 -11	- Ins	tee		
Sign	ature of officer or trustee				Date Date		Title	Preparer's Identify	una num	———
Paid (	Preparer's	WAh	mA			17-11	Check if	(See Signature in		
Pre-	JAUK	F. SHORS				17 - 11	employed -	N/A		
parer's Use	yours if self			P.A			EIN - N/A			
Only	employed), 8265 address, and TACK	BAYBERRY SONVILLE,						(004) 720	_101	. 1
<u> </u>	ZIP code JACK	OONATPTE,	гь 34436			<del></del>	Phone no	(904) 739		

## 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

Name of the organization		Employer identification number
SHORSTEIN FAMILY FOUNDATIO	N, INC.	59-2473526
Organization type (check one)		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organiza	
	4947(a)(1) nonexempt charitable trust <b>n</b>	ot treated as a private foundation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust tr	eated as a private foundation
	501(c)(3) taxable private foundation	
Check if your organization is covered by the Note: Only a section 501(c)(7), (8), or (10)	ne <b>General Rule</b> or a <b>Special Rule</b> ) organization can check boxes for both the Gener	ral Rule and a Special Rule. See instructions
General Rule —  X For an organization filing Form 990, 99 contributor (Complete Parts I and II)	90-EZ, or 990-PF that received, during the year, \$	5,000 or more (in money or property) from any one
Special Rules —		
509(a)(1)/170(b)(1)(Å)(vi) and received from	ing Form 990 or 990-EZ, that met the 33-1/3% sum any one contributor, during the year, a contribution of 1h or (ii) Form 990-EZ, line 1 Complete Parts I a	f the greater of (1) \$5,000 or (2) 2% of the
For a section 501(c)(7), (8), or (10) organgeregate contributions of more than sprevention of cruelty to children or anii	ganization filing Form 990 or 990-EZ, that received \$1,000 for use <i>exclusively</i> for religious, charitable, mals Complete Parts I, II, and III	d from any one contributor, during the year, , scientific, literary, or educational purposes, or the
contributions for use <i>exclusively</i> for rel	ganization filing Form 990 or 990-EZ, that received ligious, charitable, etc, purposes, but these contribal al contributions that were received during the year parts unless the <b>General Rule</b> applies to this organ	butions did not aggregate to more than \$1,000 If reforming the structure of the structure o
religious, charitable, etc, contributions	of \$5,000 or more during the year	<b>▶</b> \$
990-PF) but it must answer 'No' on Part IV	ed by the General Rule and/or the Special Rules of Ine 2 of their Form 990, or check the box on line of filing requirements of Schedule B (Form 990, 99	ne H of its Form 990-EZ, or on line 2 of its Form
BAA For Privacy Act and Paperwork Rec for Form 990, 990EZ, or 990-PF.	duction Act Notice, see the Instructions	Schedule B (Form 990, 990-EZ, or 990-PF) (2009)

•	•				•	•
Schedule	<b>B</b> (Form 990, 990-EZ, or 990-PF) (2009)	Pa	age 1	of 1		of Part I
Name of org				r identification n 173526	umber	
Partil	Contributors (see instructions)					
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contribution	าร	Type of	(d) contrib	ution
1	JACK F. SHORSTEIN  8265 BAYBERRY RD  JACKSONVILLE, FL 32256	\$30,	<u>877.</u>	Person Payroll Noncash (Complete		
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contribution	15		(d)	
2	SAMUEL R. SHORSTEIN  8265 BAYBERRY RD  JACKSONVILLE, FL 32256	\$30 <u>,</u>	771.	Person Payroll Noncash (Complete is a noncas	X Part II	if there
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributior	าร	Type of e	(d) contrib	ution
		\$		Person Payroll Noncash (Complete is a noncas	Part II	of there
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contribution	าร	Type of o	(d) contrib	ution
			ļ	Person	П	

Schedule <b>B</b> (Form 990, 990-EZ, or 990-PF) (2009)	Page	1	of 1	of Part II
ame of organization		Employer	dentification	on number
CHODOTETN CANTLY POLINDATION INC		50-24	73526	

Part II	Noncash Property (see instructions )			
(a) No. from Part I	(b)  Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
	475 JOHNSON & JOHNSON	_		
1		4		
		-  \$_	30,877.	1/14/10
(a) No. from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
	475 JOHNSON & JOHNSON			
2		    \$_	30,771.	12/30/09
(a) No. from Part I	(b)  Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
		_ \$_		
(a) No. from Part I	(b)  Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
		-		
		_ \$ ₋		
(a) No. from Part I	(b)  Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
				<u> </u>
		\$.		
(a) No. from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
		$\frac{1}{2}$		
<del></del>				
		<b>- </b> \$.		

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

BAA

Schedule E	3 (Form 990, 990-EZ, or 990-PF) (2009)		Pa	ige 1	of 1	of Part III		
Name of organ					Employer identifica			
	EIN FAMILY FOUNDATION, INC.				59-247352			
Part III	Exclusively religious, charitable, et organizations aggregating more that	an \$1,000 for the year.(Co	omplete cols (a)	1 501(c)( through (	7), (8), or (10) e) and the follow	ing line entry)		
	For organizations completing Part III, enter t contributions of \$1,000 or less for the year	Enter this information once –	naritable, etc, see instructions	s)	<b>►</b> \$	N/A		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		Desci	(d) ription of how gi	ft is held		
	N/A							
	Transferee's name, address	(e) Transfer of gift s, and ZIP + 4	Relatio	onship of t	transferor to tran	sferee		
(a)	(b)	(c)			(d)			
No. from	Purpose of gift	Use of gift		Desci	ription of how git	ft is held		
Part I					<u></u>			
				<del></del>		<del></del> -		
						<del></del>		
	Transferee's name, address	(e) Transfer of gift a and ZIP + 4	Relatio	onship of t	transferor to tran	sferee		
		,		<u> </u>		<u> </u>		
			<del></del>					
- (-)	(1)	(-)	<del></del> -		<u> </u>			
(a) No. from	(b) Purpose of gift	(c) Use of gift		Dece	(d) ription of how git	ft is hold		
Part I	Furpose of glit				inputoti of flow git	it is lielu		
<del></del>								
ŀ								
		(e)						
		Transfer of gift	<b>5.1</b>					
	Transferee's name, address	s, and ZIP + 4	Relatio	onship of t	transferor to tran	steree		
ŀ					<del></del>			
			<del></del>		<del></del>			
j				<del> </del>				
(a)	(b)	(c)			(d)			
No. from Part I	Purpose of gift	Use of gift	Ì	Desc	ription of how gi	ft is held		
-								
	(e) Transfer of gift							
	Transferee's name, address		Relatio	onship of	transferor to tran	sferee		
ľ								

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٠,	"	"	•
_			•

#### **FEDERAL STATEMENTS**

PAGE 1

SHORSTEIN FAMILY FOUNDATION, INC.

59-2473526

STATEMENT 1 FORM 990-PF, PART I, LINE 11 OTHER INCOME

	-	(A) REVENUE ER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME
BANK FEE REFUNDS MORTGAGE INTEREST INCOME	\$ TOTAL <u>\$</u>	82.9 3,613. 3,695.9	\$ 82. 3,613. \$ 3,695.	\$ 0.

STATEMENT 2 FORM 990-PF, PART I, LINE 16A LEGAL FEES

		(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ANNUAL FILING FEE	TOTAL	\$ 61. \$ 61.	<u>\$ 0.</u>		\$ 61. \$ 61.

#### STATEMENT 3 FORM 990-PF, PART II, LINE 10B INVESTMENTS - CORPORATE STOCKS

CORPORATE STOCKS	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
BRISTOL MYERS SQUIBB	COST \$	4,476.	\$ 5,048.
JANUS FUND	COST	20,159.	18,551.
CISCO SYSTEMS INC	COST	45,830.	13,412.
PFIZER INC	COST	4,415.	1,630.
MERCK AND CO INC SHS	COST	8,876.	3,447.
ZIMMER HOLDINGS INC	COST	7,167.	5,911.
MEDCO HEALTH SOLUTIONS	COST	502.	1,472.
AT&T INC	COST	51,700.	55,580.
INTERNATIONAL GAME TECHNOLOGY	COST	30,111.	12,384.
CORNING INC	COST	9,707.	7,064.
ANNALY CAP MGMT INC	COST	35,970.	36,380.
WELLS FARGO & CO NEW DEL	COST	51,860.	54,420.
BANK OF AMERICA	COST	85,970.	100,280.
WELLS FARGO & CO NEW	COST	104,460.	129,331.
CENTURYLINK INC '	COST	55,938.	55,938.
JOHNSON & JOHNSON	COST	61,648.	58,473.
VODAFONE GROUP PLC SP ADR	COST	45,670.	50,120.
	TOTAL S	624,459.	\$ 609,441.

20	^	^
ZU	u	9

#### **FEDERAL STATEMENTS**

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SHORSTEIN FAMILY FOUNDATION, INC.

59-2473526

#### STATEMENT 4 FORM 990-PF, PART II, LINE 13 INVESTMENTS - OTHER

	VALUATION METHOD		BOOK VALUE		R MARKET VALUE
OTHER PUBLICLY TRADED SECURITIES					
POWERSHARES FIN PFD POWERSHARES GLOBAL	COST COST	\$	33,090. 27,880.	\$	35,280. 28,500.
	TOT	TAL \$	60,970.	\$	63,780.

#### STATEMENT 5 FORM 990-PF, PART XV, LINE 1A FOUNDATION MANAGERS - 2% OR MORE CONTRIBUTORS

SAMUEL R. SHORSTEIN JACK F. SHORSTEIN MARK J. SHORSTEIN

#### STATEMENT 6 FORM 990-PF, PART XV, LINE 3A RECIPIENT PAID DURING THE YEAR

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	 AMOUNT
UNIV OF FLORIDA FDN PO BOX 14425 GAINESVILLE, FL 32604	N/A	PUBLIC	EDUCATION	\$ 6,000.
RIVER GARDEN FDN 11401 OLD ST AUGUSTINE RD JACKSONVILLE, FL 32258	N/A	PUBLIC	CARE FOR THE ELDERLY	875.
JACKSONVILLE JEWISH CTR 3662 CROWN PT RD JACKSONVILLE, FL 32257	N/A	PUBLIC	RELIGIOUS	43,945.
MAZON INC 10495 SANTA MONICA BLVD STE 100 LOS ANGELES, CA 90025	N/A	PUBLIC	FEED THE HUNGRY	100.
JEWISH FAMILY & COMM SVCS 6261 DUPONT STATION CT E. JACKSONVILLE, FL 32217	N/A	PUBLIC	COMMUNITY SERVICES	1,350.
CONGREGATION AHAVATH CHESED 8727 SAN JOSE BLVD JACKSONVILLE, FL 32217	N/A	PUBLIC	RELIGIOUS	500.

2009

### **FEDERAL STATEMENTS**

PAGE 3

SHORSTEIN FAMILY FOUNDATION, INC.

59-2473526

#### STATEMENT 6 (CONTINUED) FORM 990-PF, PART XV, LINE 3A RECIPIENT PAID DURING THE YEAR

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	 AMOUNT
JACKSONVILLE JEWISH FEDER 8505 SAN JOSE BLVD JACKSONVILLE, FL 32217	N/A	PUBLIC	RELIGIOUS	\$ 30.
JEWISH MUSEUM OF FLORIDA 301 WASHINGTON AVE MIAMI BEACH, FL 33139	N/A	PUBLIC	SUPPORT MUSEUM	200.
JACKSONVILLE SYMPHONY ORCHESTRA 300 WATER ST STE 200 JACKSONVILLE, FL 32202	N/A	PUBLIC	SUPPORT SYMPHONY	1,000.
FCCJ FDN 501 W STATE ST JACKSONVILLE, FL 32202	N/A	PUBLIC	EDUCATION	150.
SLABODKA YESHIVA KNESSETH 169 PARKVILLE AVE BROOKLYN, NY 11230	N/A	PUBLIC	RELIGIOUS EDUCATION	100.
FLORIDA HILLEL COUNCIL 2020 W UNIVERSITY AVE GAINESVILLE, FL 32603	N/A	PUBLIC	JEWISH STUDENT SUPPORT	7,000.
MARCH OF DIMES 4040 WOODCOCK DR STE 147 JACKSONVILLE, FL 32207	N/A	PUBLIC	PUBLIC HEALTH	20.
NATIONAL MS SOCIETY 4237 SALISBURY RD BLDG 4 STE 406 JACKSONVILLE, FL 32216	N/A	PUBLIC	MULTIPLE SCLEROSIS PATIENT SUPPORT	300.
CONSERVATIVE SYNAGOGUE 5TH AVE 11 EAST 11TH ST NEW YORK, NY 10003	N/A	PUBLIC	RELIGIOUS	200.
MEMORIES OF LOVE 4932 SUNBEAM RD STE 200 JACKSONVILLE, FL 32257	N/A	PUBLIC	PROVIDE DREAM VACATIONS FOR PARENTS WITH LIFE-THREATENING ILLNESSES	200.
ALS ASSN FL CHAPTER 3242 PARKSIDE CENTER CIR TAMPA, FL 33619	N/A	PUBLIC	ALS RESEARCH, ADVOCACY, SUPPORT	100.

2009

#### **FEDERAL STATEMENTS**

PAGE 4

SHORSTEIN FAMILY FOUNDATION, INC.

59-2473526

#### STATEMENT 6 (CONTINUED) FORM 990-PF, PART XV, LINE 3A RECIPIENT PAID DURING THE YEAR

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	AM	OUNT
CARINGBRIDGE PO BOX 131447 HOUSTON, TX 77219	N/A	PUBLIC	CONNECT PEOPLE EXPERIENCING HEALTH CHALLENGES	\$	50.
GUARDIAN CATHOLIC SCHOOLS 4920 BRENTWOOD AVE JACKSONVILLE, FL 32206	N/A	PUBLIC	EDUCATION		50.
GREATER ST MATTHEW MISSIONARY BAPTIST CH 649 FRANKLIN ST JACKSONVILLE, FL 32202	N/A	PUBLIC	RELIGIOUS		50.
IOWA JEWISH SENIOR LIFE CENTER 900 POLK BLVD DES MOINES, IA 50312	N/A	PUBLIC	CARE FOR THE ELDERLY		50.
RABBIS FOR HUMAN RIGHTS-NORTH AMERICA PO BOX 1539 WEST TISBURY, MA 02575	N/A	PUBLIC	HUMAN RIGHTS ISSUES		50.
WOMEN'S LEAGUE FOR CONSERVATIVE JUDAISM 475 RIVERSIDE DR STE 820 NEW YORK, NY 10115	N/A	PUBLIC	SUPPORT SYNAGOGUE WOMEN'S GROUPS		25.

TOTAL \$ 62,345.

#### Form **8868** (Rev April 2009)

Department of the Treasury Internal Revenue Service

### Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return.

OMB No 1545 1709

If you are	If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box						
• If you are	e filing for an Additional (Not Aut	omatic) 3-Month Extension, complete only Part II (	on page 2 of thi				
Do not comp	<i>plete Part II unless</i> you have alrea	dy been granted an automatic 3-month extension of	n a previously f	iled Form 8868			
Part I	Automatic 3-Month Extens	ion of Time. Only submit original (no copi	es needed).				
A corporation	required to file Form 990-T and	requesting an automatic 6-month extension – check	k this box and o	complete Part I only			
All other corp income tax r	porations (including 1120-C filers) eturns	, partnerships, REMICS, and trusts must use Form	7004 to request	an extension of time to file			
returns noted the additional Form 990-T	d below (6 months for a corporation (not automatic) 3 month extens	lectronically file Form 8868 if you want a 3-month at on required to file Form 990-T). However, you cannot on (2) you file Forms 990-BL, 6069, or 8870, groy completed and signed page 2 (Part II) of Form 8869-file for Charities & Nonprofits.	ot file Form 8868	8 electronically if (1) you want			
<del></del>	Name of Exempt Organization			Employer identification number			
Type or							
SHORSTEIN FAMILY FOUNDATION, INC.				59-2473526			
File by the due date for	Number, street, and room or suite number	If a P O box, see instructions					
filing your return See	8265 BAYBERRY ROAD						
instructions	City, town or post office, state, and ZIP coo	e For a foreign address, see instructions					
	JACKSONVILLE, FL 322	56					
Check type of	of return to be filed (file a separate	e application for each return).	_				
Form 990		Form 990-T (corporation)	Form 472	0			
Form 990	)-BL	Form 990-T (section 401(a) or 408(a) trust)	Form 522	7			
Form 990		Form 990-T (trust other than above) Form 6069					
X Form 990	)-PF	Form 1041-A	Form 887	0			
Telephone If the org If this is f check this the exten I reques until The ext	for a Group Return, enter the organish box    [Sign will cover.]  St an automatic 3-month (6 month organish of the organization of the organization of the organization organi	FAX No. Por place of business in the United States, check the enization's four digit Group Exemption Number (GET he group, check this box Por and attach a list with the exempt organization return for the organization eturn for:	is box N) If ith the names a ension of time named above				
► X	tax year beginning 12/01	, 20 <u>09</u> , and ending <u>11/30</u> , 20	<u>10</u> _				
2 If this to	ax year is for less than 12 month	s, check reason: Initial return Final re	eturn C	hange in accounting period			
	pplication is for Form 990-BL, 99 indable credits See instructions	0-PF, 990-T, 4720, or 6069, enter the tentative tax,	less any	3a \$ 664.			
<b>b</b> If this a made I	pplication is for Form 990-PF or include any prior year overpayme	990-T, enter any refundable credits and estimated to nt allowed as a credit	ax payments	зь\$ 1,335.			
deposit	e Due. Subtract line 3b from line with FTD coupon or, if required, structions	3a Include your payment with this form, or, if required by using EFTPS (Electronic Federal Tax Payment S	red, System) 	3c \$ 0.			
Caution. If yo payment inst		ic fund withdrawal with this Form 8868, see Form 84	453-EO and For	m 8879-EO for			
BAA For Pri	vacy Act and Paperwork Reducti	on Act Notice, see instructions.	<del></del>	Form <b>8868</b> (Rev 4-2009)			