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OMB No 1545-0052

Form 990-PF

Department of the Treasury Internal Revenue Service

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

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

2010

| For | cale | endar year 20 | 010, or tax | year beginning 01- | -01-2010 , ar | d en | ding 12-31- | 2010 | |
|-----------------|-----------|---|--|---|--|----------|--------------------------|---|--|
| G C | heck a | all that apply | Initial retu | _ | n of a former public o | | Final re | turn | |
| | | undation IAM P GOLDMAN ANI | | | | | | entification numb | er |
| " | IL WILL | IAM F GOLDMAN ANI | D BROTTLERS TOOL | VIDATION INC | | | 13-6163100 | | |
| | | d street (or P O box REY KRAINES 69-40 | | not delivered to street addres | Room/suite | | B Telephone nu | ımber (see page 10 | of the instructions) |
| Cıtv | or town | n, state, and ZIP cod | le | | | | C If exemption | application is pendir | ıg, check here 🕨 |
| FOR | EST HIL | LS, NY 11375 | | | | | · ' | rganizations, check h | * <u>'</u> |
| | | | <u> </u> | n 501(c)(3) exempt priv | | | - | | • |
| | | | | able trust Cother tax | | on | check he | rganizations meeting re and attach comput | ation |
| | | ket value of all a | | J Accounting method | Cash P Ace | | E If private fo | undation status was | terminated |
| of | year (| from Part II, col. | | Other (specify) | _ | | | n 507(b)(1)(A), chec | |
| _lın | e 16) | +\$ 6,850,908 | | (Part I , column (d) mus | t be on cash basis.) | | | ation is in a 60-mont n 507(b)(1)(B), chec | |
| Pa | rt I | total of amount | s in columns (b), (al the amounts in c | and Expenses (The (c), and (d) may not column (a) (see page 11 of | (a) Revenue and expenses per books | (b) I | Net investment income | (c) Adjusted net income | (d) Disbursements for charitable purposes (cash basis only) |
| | 1 | Contributions, gifts | s, grants, etc , rece | eived (attach schedule) | | | | | |
| | 2 | Check 🟲 🦵 ıf the | foundation is not | required to attach Sch B | | | | | |
| | 3 | Interest on sav | rings and tempo | orary cash investments | | | | | |
| | 4 | Dividends and | ınterest from se | ecurities | 376,43 | 9 | 376,439 | | |
| | 5a | Gross rents . | | | | | | | |
| Revenue | Ь | Net rental inco | me or (loss) | | | | | | |
| | 6a | Net gain or (los | s) from sale of | assets not on line 10 | 29,99 | 5 | | | |
| | Ь | Gross sales price fo | | | | | | | |
| | 7 | | | Part IV, line 2) | | <u> </u> | 29,995 | | |
| | 8 | | | | | | | | |
| | 9 | Income modific | ations | | | 1 | | | |
| | 10a | Gross sales less re | | | | <u> </u> | | | |
| | b | Less Cost of g | | | | <u> </u> | | | |
| | c | • | | schedule) | | <u> </u> | | | |
| | 11 | Other income (| | • | 2,22 | + | 406 424 | | |
| | 12 | | <u>-</u> | | 408,66 | <u> </u> | 406,434 | | |
| | 13 | | | ctors, trustees, etc | | 1 | | | |
| φ | 14 | | | wages :fits | | 1 | | | |
| S L | 15 16a | | | | | 1 | | | |
| Expenses | h | | | | 3,50 | | | | |
| | " | | | h schedule) | 2,30 | | | | |
| Admını strative | 17 | | | | | | | | |
| stra | 18 | | | 4 of the instructions) | 4,06 | 1 | | | |
| ₫ | 19 | · | | and depletion | | | | | |
| 틭 | 20 | | | | | + | | | |
| 4 | 21 | Travel, confere | nces, and meet | ings | | 1 | | | |
| and | 22 | Printing and pu | blications | | | 1 | | | |
| | 23 | Other expense | s (attach sched | iule) | % 29 | 1 | | | |
| Operating | 24 | Total operating | and administ r | ative expenses. | | | | | |
| Ŧ | | Add lines 13 th | nrough 23 | | 7,85 | 3 | 0 | | o |
| 0 | 25 | Contributions, | gıfts, grants pa | ıd | 322,36 | 5 | | | 322,365 |
| | 26 | Total expenses a | nd disbursemen | ts. Add lines 24 and 25 | 330,22 | 3 | 0 | | 322,365 |
| | 27 | Subtract line 2 | 6 from line 12 | | | | | | |
| | а | Excess of rever | nue over expen | ses and disbursements | 78,43 | 9 | | | |
| | ь | Net investment | t income (ıf neg | atıve, enter - 0 -) | | | 406,434 | | |
| | С | Adjusted net i | ncome (ıf negatı | ıve, enter - 0 -) | | | | | |
| | | | | . A at Notice are many 20 | | | | | 000 55 |

| Pa | rt II | Balance Sheets should be for end-of-year amounts only (See instructions) | (a) Book Value | (b) Boo | | | (c) Fair Mark | et Value |
|------------------|-------|---|----------------------------|----------------|--|---------------|---------------|------------------|
| | 1 | Cash—non-interest-bearing | 165,724 | . , | 208,4 | | . , | 208,478 |
| | 2 | Savings and temporary cash investments | | | 71,8 | 50 | | 71,850 |
| | 3 | Accounts receivable | | | | 十 | | |
| | | Less allowance for doubtful accounts | 356 | | | | | |
| | 4 | Pledges receivable 🕨 | | | | 十 | | |
| | _ | Less allowance for doubtful accounts - | | | | | | |
| | 5 | Grants receivable | | | | + | | |
| | 6 | Receivables due from officers, directors, trustees, and other | | | | + | | |
| | | disqualified persons (attach schedule) (see page 15 of the | | | | | | |
| | | instructions) | | | | | | |
| | 7 | Other notes and loans receivable (attach schedule) | | | | \pm | | |
| | - | | | | | | | |
| 2 | | Less allowance for doubtful accounts 🕨 | | | | 4 | | |
| sets | 8 | Inventories for sale or use | | | | \dashv | | |
| ď | 9 | Prepaid expenses and deferred charges | | | | 4 | | |
| | 10a | Investments—U S and state government obligations (attach schedule) | | _ | 1,209,1 | 00 | | 1,250,906 |
| | _ | Investments—corporate stock (attach schedule) | | _ | 3,452,7 | \rightarrow | | 3,334,231 |
| | _ | Investments—corporate bonds (attach schedule) | 2,950,000 | % ⊍ | 1,950,0 | 00 | 1 | L,915,391 ——— |
| | 11 | Investments—land, buildings, and equipment basis - | | | | | | |
| | | Less accumulated depreciation (attach schedule) | | | | 4 | | |
| | | Investments—mortgage loans | | | | 4 | | |
| | | Investments—other (attach schedule) | | | | 4 | | |
| | 14 | Land, buildings, and equipment basis 🟲 | | | | | | |
| | | Less accumulated depreciation (attach schedule) | | | | 4 | | |
| | 15 | , | 70,588 | % J | 70,0 | 52 | <u>8J</u> | 70,052 |
| | 16 | Total assets (to be completed by all filers—see the | | | | | | |
| | | ınstructions Also, see page 1, item I) | 6,883,768 | | 6,962,2 | \rightarrow | 6 | 5,850,908 |
| | 17 | Accounts payable and accrued expenses | 250 | | 3 | 17 | | |
| | 18 | Grants payable | | | | _ | | |
| Itles | 19 | Deferred revenue | | | | _ | | |
| _ | 20 | Loans from officers, directors, trustees, and other disqualified persons | | | | _ | | |
| E S | 21 | Mortgages and other notes payable (attach schedule) | | | | 4 | | |
| _ | 22 | O ther liabilities (describe) | | | | 4 | | |
| | 23 | Total liabilities (add lines 17 through 22) | 250 | | 3 | 17 | | |
| | 23 | Foundations that follow SFAS 117, check here | 250 | | | - | | |
| | | and complete lines 24 through 26 and lines 30 and 31. | | | | | | |
| S) | 24 | Unrestricted | 6,883,518 | | 6,961,9 | 57 | | |
| 잍 | 25 | Temporarily restricted | , , | | | \dashv | | |
| <u>8</u> | 26 | Permanently restricted | | | | \dashv | | |
| or Fund Balances | | Foundations that do not follow SFAS 117, check here ▶ □ | | | | \dashv | | |
| Ξ | | and complete lines 27 through 31. | | | | | | |
| Ä | 27 | Capital stock, trust principal, or current funds | | | | | | |
| | 28 | Paid-in or capital surplus, or land, bldg , and equipment fund | | | | \dashv | | |
| Assets | 29 | Retained earnings, accumulated income, endowment, or other funds | | | | \dashv | | |
| | 30 | Total net assets or fund balances (see page 17 of the | | | | 1 | | |
| Š | | instructions) | 6,883,518 | | 6,961,9 | 57 | | |
| _ | 31 | Total liabilities and net assets/fund balances (see page 17 of | | | | 1 | | |
| | | the instructions) | 6,883,768 | | 6,962,2 | 74 | | |
| Pa | rt II | | | | | | | |
| | | | . /-> 1 | | | | | |
| 1 | | Total net assets or fund balances at beginning of year—Part II, column | . ,, | - | , | | 6.0 | 02 E10 |
| 2 | | with end-of-year figure reported on prior year's return) | | | 1 | _ | · · · | 83,518 |
| 2 | | Enter amount from Part I, line 27a | | | 3 | — | | 78,439 |
| 3 ∕ı | | Other increases not included in line 2 (itemize) Add lines 1, 2, and 3 | | | 4 | — | | 61 057 |
| 4 5 | | Add lines 1, 2, and 3 | | | 5 | — | 0,9 | 61,957 |
| 5 6 | | Total net assets or fund balances at end of year (line 4 minus line 5)— | | | \vdash | | | 61,957 |
| J | | Total het assets of fund balances at end of year (fille 4 fillings lifte 5)—I | . a.c.ii, colulliii (D), I | | 1 2 1 | | 0,9 | 01,331 |

| • • | kınd(s) of property sold (e g , re. e, or common stock, 200 shs M | | (b) How acquired P—Purchase D—Donation | (c) Date acq (mo , day, | | |
|---|---|--|--|--|--|----------------------------------|
| 1a GE CAPITAL | | | Р | 2008-03- | -17 2010-11 | -01 |
| b | | | | | | |
| с | | | | | | |
| d | | | | | | |
| e | | | | | | |
| (e) Gross sales price | (f) Depreciation allowed (or allowable) | 1 1-7 | or other basis pense of sale | |) Gain or (loss) plus (f) minus (g) | |
| a 1,029, | 995 | | 1,000,00 | 0 | 2 | 9,995 |
| b | | | | | | |
| С | | | | | | |
| d | | | | | | |
| е | | | | | | |
| Complete only for assets sho | wing gain in column (h) and owne (j) Adjusted basis | | | _ | s (Col (h) gain min | |
| (i) F M V as of 12/31/69 | 1 | ess of col (1) ol (j), ıf any | | ut not less than -0 ses (from col (h)) | | |
| a . | | | | | 2 | 9,995 |
| b | | | | 1 | | |
| С | | | | | | |
| d | | | | | | |
| e | | | | | | |
| 2 Capital gain net income | | If gain, also enter If (loss), enter -0- | | 2 | 2 | 9,995 |
| Not short-tarm canital a | ر aın or (loss) as defined ın sectior | ns 1222(5) and (6) | J | - | | 9,99. |
| | • | | | , | | |
| If gain, also enter in Part If (loss), enter -0- in Par | t I, line 8, column (c) (see pages rt I, line 8 | | | } | | |
| Part V Qualification Und | | | | J 3 - | | |
| For optional use by domestic privile free free free free free free free fr | ve this part blank ection 4942 tax on the distributa | able amount of any not complete this | year in the base p part | eriod? | ┌ Yes ┌ | No |
| | In each column for each year, se | ee page 18 oftne ir | istructions before | making any e | | |
| (a) Base period years Calendar year (or tax year beginning in) | (b) Adjusted qualifying distributions | (c) Net value of nonchar | | | (d) stribution ratio divided by col (c)) | |
| 2009 | 294,030 | | 6,023,564 | | 000 048 | 3813 |
| 2008 | 319,179 | | 4,890,978 | | 000 065 | |
| 2007 | 322,750 | | 6,396,592 | | 000 050 | |
| 2006 | 319,350 | | 6,488,861 6,513,504 | | 000 049 | |
| 2005 | 325,125 | | 0,313,304 | | 000 049 | 9910 |
| | | | | | | |
| | d) | | | 2 | 000 26 | |
| | · - | | | | | 3660 |
| the number of years the | io for the 5-year base period—div foundation has been in existence | | | 3 | 000 05 | |
| the number of years the | io for the 5-year base period—div foundation has been in existence | | | 3 | 000 05 | |
| | | e if less than 5 year | rs | 4 | | 52732 |
| | foundation has been in existence | e if less than 5 year | rs | | 5,91 | 3,109 |
| 4 Enter the net value of no 5 Multiply line 4 by line 3. | foundation has been in existence | e if less than 5 year O from Part X, line 5 | rs | 4 | 5,91 31 | 3,109 1,810 |
| 4 Enter the net value of no 5 Multiply line 4 by line 3. | foundation has been in existence | e if less than 5 year O from Part X, line 5 | rs | 5 | 5,91 31 | 3,109 1,810 4,064 5,874 |
| Enter the net value of no Multiply line 4 by line 3. Enter 1% of net investm Add lines 5 and 6 | foundation has been in existence | e if less than 5 year of from Part X, line 5 of the state of the sta | | 5 | 5,91 31 | 3,109 1,810 4,064 |

| 1a | Exempt operating foundations described in section 4940(d)(2), check here Tand enter "N/A" on line 1 | | | |
|-----|---|--------------|-----|--|
| | Date of ruling or determination letter (attach copy of letter if necessary-see | | | |
| ь | instructions) Domestic foundations that meet the section 4940(e) requirements in Part V, check | | | 4,064 |
| | here Fand enter 1% of Part I, line 27b | | | 4,004 |
| С | All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b) | | | |
| 2 | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) | | | |
| 3 | Add lines 1 and 2 | | | 4,064 |
| 4 | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) | | | <u>, </u> |
| 5 | Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0 | | | 4,064 |
| 6 | Credits/Payments | | | · |
| а | 2010 estimated tax payments and 2009 overpayment credited to 2010 6a 4,000 | | | |
| ь | Exempt foreign organizations—tax withheld at source 6b | | | |
| c | Tax paid with application for extension of time to file (Form 8868) 6c 64 | | | |
| d | Backup withholding erroneously withheld 6d | | | |
| 7 | Total credits and payments Add lines 6a through 6d | | | 4,064 |
| 8 | Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached. | | | |
| 9 | Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed | | | |
| LO | Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid • 10 | | | |
| L1 | Enter the amount of line 10 to be Credited to 2011 estimated tax Ref unded 11 | | | |
| Par | t VII-A Statements Regarding Activities | | | |
| La | During the tax year, did the foundation attempt to influence any national, state, or local legislation or did | | Yes | No |
| | It participate or intervene in any political campaign? | . 1a | | No |
| Ь | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 of | | | |
| | the instructions for definition)? | . 1b | | No |
| | 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. | | | N. |
| | Did the foundation file Form 1120-POL for this year? | 1c | | No |
| a | Enter the amount (If any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation \$\text{\$\texi{\$\text{\$\tex{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$ | | | |
| _ | Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed | | | |
| | on foundation managers * \$ | | | |
| 2 | Has the foundation engaged in any activities that have not previously been reported to the IRS? | . 2 | | No |
| _ | If "Yes," attach a detailed description of the activities. | - | | |
| 3 | Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles | | | |
| | of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes | . з | | No |
| 4a | Did the foundation have unrelated business gross income of \$1,000 or more during the year? | 4a | | No |
| b | If "Yes," has it filed a tax return on Form 990-T for this year? | 4b | | |
| 5 | Was there a liquidation, termination, dissolution, or substantial contraction during the year? | . 5 | | No |
| | If "Yes," attach the statement required by General Instruction T. | | | |
| 6 | Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either | | | |
| | By language in the governing instrument, or | | | |
| | By state legislation that effectively amends the governing instrument so that no mandatory directions | | | |
| | that conflict with the state law remain in the governing instrument? | . 6 | Yes | |
| 7 | Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV | 7 | Yes | |
| 8a | Enter the states to which the foundation reports or with which it is registered (see page 19 of the | | | |
| | Instructions) ►NY | | | |
| b | If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney | | | |
| 0 | General (or designate) of each state as required by General Instruction G? If "No," attach explanation. | 8b | Yes | |
| 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 2010 or the taxable year beginning in 2010 (see instructions for Part XIV on | | | |
| | page 27)? If "Yes," complete Part XIV | و ا | | No |
| LO | Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses | 10 | | No |

| 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 page 20 of the instructions) | 11 | | No |
|-----|--|----------|------|------|
| 12 | Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008? | 12 | | No |
| 13 | Did the foundation comply with the public inspection requirements for its annual returns and exemption application? | 13 | Yes | 140 |
| 13 | | | 165 | |
| | Website address ▶ | | | |
| 14 | The books are in care of - Telephone no - Telephone | 240- | 1306 | |
| | Located at ►c/o J KRAINES 69-40 YELLOWSTONE BLV FOREST HILLS NY ZIP+4 ►11375 | | | |
| 15 | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here | | 1 | ▶┌ |
| | and enter the amount of tax-exempt interest received or accrued during the year | | | |
| 16 | At any time during calendar year 2010, did the foundation have an interest in or a signature or other authority over | | | |
| 10 | a bank, securities, or other financial account in a foreign country? | 16 | | No |
| | | 10 | | 140 |
| | See page 20 of the instructions for exceptions and filing requirements for Form TD F 90-22 1 If "Yes", enter the | | | |
| Dai | name of the foreign country F ** VII-B Statements Regarding Activities for Which Form 4720 May Be Required | | | |
| Fa | File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. | | Yes | No |
| 4- | | _ | 163 | 140 |
| 14 | 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? Yes V No | | | |
| | | | | |
| | (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? | | | |
| | (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes V No | | | |
| | (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes V 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)? | | | |
| | (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 V No | | | |
| Ь | If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations | | | |
| | section 53 4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)? | 1b | | |
| | Organizations relying on a current notice regarding disaster assistance check here | <u> </u> | | |
| 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 2010? | 1c | | No |
| 2 | Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private | | | 110 |
| - | operating foundation defined in section 4942(j)(3) or 4942(j)(5)) | | | |
| а | At the end of tax year 2010, did the foundation have any undistributed income (lines 6d | | | |
| _ | and 6e, Part XIII) for tax year(s) beginning before 2010? Yes Vo | | | |
| | If "Yes," list the years > 20, 20, 20 | | | |
| ь | Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) | | | |
| _ | (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) | | | |
| | to all years listed, answer "No" and attach statement—see page 20 of the instructions) | 2b | | |
| С | If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here | | | |
| _ | ► 20 | | | |
| 3a | Did the foundation hold more than a 2% direct or indirect interest in any business | | | |
| | enterprise at any time during the year? | | | |
| b | If "Yes," did it have excess business holdings in 2010 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 2010.). | 3ь | | |
| 4a | Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? | 4a | | No |
| ь | 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 2010? | 4b | | No |

| | 1990-PF (2010) rt VII-B Statements Rega | rdir | ng Activities for | Wh | ich Form 4720 | May | , Be Required <i>(cont</i> | inued | 1) | Р | age 6 |
|---|--|-------|--|--------|-----------------------|-------|--|-------|-------------------------------------|------|--------------|
| 5a | During the year did the foundation | | _ | | | | | | | | |
| | (1) Carry on propaganda, or othe | | | | ıslatıon (section 494 | 45(e |))? | No | | | |
| | (2) Influence the outcome of any | | · | | • | • | | | | | |
| | on, directly or indirectly, any | • | | | • • | | • | - No | | | |
| | (3) Provide a grant to an individu | | | | | - | r Yes r | | | | |
| | (4) Provide a grant to an organiza | | , , , | | | scrib | · | | | | |
| | in section 509(a)(1), (2), or (| | | | · - | | | - No | | | |
| | (5) Provide for any purpose other | | | | | | , | | | | |
| | educational purposes, or for t | | | | | _ | | - No | | | |
| ь | If any answer is "Yes" to 5a(1)-(| | | | | | | | | | |
| | Regulations section 53 4945 or i | | | | | | | ns \? | 5b | | |
| | Organizations relying on a curren | | | | | | | | | | |
| _ | If the answer is "Yes" to question | | | | | | | | | | |
| · | tax because it maintained expend | - | | | · · | | | - No | | | |
| | | | | | | • | Tes • | 140 | | | |
| <i>-</i> - | If "Yes," attach the statement required by Regulations section 53.4945–5(d). Did the foundation, during the year, receive any funds, directly or indirectly, to pay | | | | | | | | | | |
| 6a | | | | | | | ⊏ v □ | | | | |
| | premiums on a personal benefit contract? | | | | | | | | | | |
| Ь | | | | | | | | | | | |
| | 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? | | | | | | | | | | | |
| ь | If yes, did the foundation receive | | | | | | | | 7b | Yes | |
| | and Contractors | | | | | | n Managers, Highly | | Emp | loye | es, |
| _1_ | List all officers, directors, trustee | | | | | | | ıs). | | | |
| | (a) Name and address I holles her week I (it hot hald enter I employee henetit highs I ' ' | | | | | | e acco | | | | |
| JEFFR | REY L KRAINES | Trus | stee | | 0 | | | | | | |
| | O YELLO WSTO NE BLV D EST HILLS, NY 11375 | 002 | 2 00 | | | | | | | | |
| MERR | ILL M KRAINES | Trus | ustee | | 0 | | | | | | |
| | O YELLO WSTO NE BLV D EST HILLS, NY 11375 | 000 | 00 | | | | | | | | |
| SIDNE | EY KRAINES | Trus | stee | | 0 | | | | | | |
| | O YELLO WSTO NE BLV D EST HILLS,NY 11375 | 000 | 00 | | | | | | | | |
| 2 | Compensation of five highest-paid If none, enter "NONE." | l emp | loyees (other than t | t hose | e included on line 1— | see | page 23 of the instructio | ns). | | | |
| (a) | Name and address of each employ paid more than \$50,000 | /ee | (b) Title, and aver hours per week devoted to positi | | (c) Compensatio | n | (d) Contributions to employee benefit plans and deferred compensation | | (e) Expense acco other allowance | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| Tota | I number of other employees paid o | vers | 50,000 | | | | | | | | |

| Part VIII Information About Officers, Directors, True and Contractors (continued) | ustees, Foundation Managers, Highly | Paid Employees, |
|--|---|------------------|
| 3 Five highest-paid independent contractors for professional service | ces (see page 23 of the instructions). If none, e | nter "NONE". |
| (a) Name and address of each person paid more than \$50,000 | (b) Type of service | (c) Compensation |
| | | |
| | | |
| | | |
| Total number of others receiving over \$50,000 for professional service | es | |
| Part IX-A Summary of Direct Charitable Activities | | |
| List the foundation's four largest direct charitable activities during the tax year Includ- organizations and other beneficiaries served, conferences convened, research papers | | Expenses |
| 1NONE | F | 0 |
| 2 | | |
| | | |
| | | |
| 3 | | |
| | | |
| | | |
| 4 | | |
| · · | | |
| - | | |
| Part IX-B Summary of Program-Related Investment | ts (see page 24 of the instructions) | |
| Describe the two largest program-related investments made by the foundation du | | A mount |
| 1 | | |
| | | |
| | | |
| 2 | | |
| | | |
| | | |
| All other program-related investments See page 24 of the instruct | tions | |
| 3 | | |
| | | |
| | | |
| Total Add lines 1 through 3 | | |

| Form | 990-PF (2010) | | Page 8 |
|------|---|------------|---|
| Pa | Minimum Investment Return (All domestic foundations must complete this part. For see page 24 of the instructions.) | reign | |
| 1 | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc , | | |
| | purposes | | |
| а | A verage monthly fair market value of securities | 1a | 5,752,892 |
| b | A verage of monthly cash balances | 1b | 250,264 |
| c | Fair market value of all other assets (see page 24 of the instructions) | 1 c | 0 |
| d | Total (add lines 1a, b, and c) | 1d | 6,003,156 |
| e | Reduction claimed for blockage or other factors reported on lines 1a and | | |
| | 1c (attach detailed explanation) | | |
| 2 | Acquisition indebtedness applicable to line 1 assets | 2 | |
| 3 | Subtract line 2 from line 1d | 3 | 6,003,156 |
| 4 | Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see page 25 | | |
| | of the instructions) 📆 | 4 | 90,047 |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4 | 5 | 5,913,109 |
| 6 | Minimum investment return. Enter 5% of line 5 | 6 | 295,655 |
| Par | Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(| | |
| | foundations and certain foreign organizations check here 🕨 🚺 and do not complete t | his pa | |
| 1 | Minimum investment return from Part X, line 6 | 1 | 295,655 |
| 2a | Tax on investment income for 2010 from Part VI, line 5 2a 4,064 | _ | |
| b | Income tax for 2010 (This does not include the tax from Part VI) 2b | | |
| c | Add lines 2a and 2b | 2c | 4,064 |
| 3 | Distributable amount before adjustments Subtract line 2c from line 1 | 3 | 291,591 |
| 4 | Recoveries of amounts treated as qualifying distributions | 4 | |
| 5 | Add lines 3 and 4 | 5 | 291,591 |
| 6 | Deduction from distributable amount (see page 25 of the instructions) | 6 | |
| 7 | Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, | | |
| | line 1 | 7 | 291,591 |
| Par | t XII Qualifying Distributions (see page 25 of the instructions) | | |
| 1 | A mounts paid (including administrative expenses) to accomplish charitable, etc , purposes | | |
| а | Expenses, contributions, gifts, etc —total from Part I, column (d), line 26 🕏 | 1a | 322,365 |
| b | Program-related investments—total from Part IX-B | 1b | |
| 2 | A mounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc , | | |
| | purposes | 2 | |
| 3 | A mounts set aside for specific charitable projects that satisfy the | | |
| а | Suitability test (prior IRS approval required) | 3a | |
| ь | Cash distribution test (attach the required schedule) | 3b | |
| 4 | Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 | 4 | 322,365 |
| 5 | Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |
| | income Enter 1% of Part I, line 27b (see page 26 of the instructions). | 5 | 4,064 |
| 6 | Adjusted qualifying distributions. Subtract line 5 from line 4 | 6 | 318,301 |
| - | Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the section 4940(e) reduction of tax in those years | | · · · · · · · · · · · · · · · · · · · |

| ľ | and xiiii Undistributed Income (see page | (a) | (b) | (c) | (d) |
|---|--|--------|---------------------|---------|---------|
| | | Corpus | Years prior to 2009 | 2009 | 2010 |
| 1 | Distributable amount for 2010 from Part XI, line 7 | | | | 291,591 |
| 2 | Undistributed income, if any, as of the end of 2010 | | | | |
| а | Enter amount for 2009 only | | | 233,454 | |
| Ь | Total for prior years 2006, 2007, 2008 | | 548,824 | | |
| 3 | Excess distributions carryover, if any, to 2010 | | | | |
| а | From 2005 | | | | |
| b | From 2006 | | | | |
| C | From 2007 | | | | |
| d | From 2008 | | | | |
| | From 2009 | | | | |
| f | Total of lines 3a through e | | | | |
| 4 | Qualifying distributions for 2010 from Part | | | | |
| | XII, line 4 🕨 \$ 322,365 | | | | |
| | Applied to 2009, but not more than line 2a | | | 233,454 | |
| b | Applied to undistributed income of prior years (Election required—see page 26 of the instructions) | | | | |
| c | Treated as distributions out of corpus (Election | | | | |
| | required—see page 26 of the instructions) | | | | |
| d | Applied to 2010 distributable amount | | | | 88,911 |
| е | Remaining amount distributed out of corpus | | | | |
| 5 | Excess distributions carryover applied to 2010 | | | | |
| | (If an amount appears ın column (d), the same amount must be shown ın column (a).) | | | | |
| 6 | Enter the net total of each column as | | | | |
| Ü | indicated below: | | | | |
| а | Corpus Add lines 3f, 4c, and 4e Subtract line 5 | | | | |
| | Prior years' undistributed income Subtract | | | | |
| | line 4b from line 2b | | 548,824 | | |
| 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 page 27 of the instructions | | 548,824 | | |
| е | Undistributed income for 2009 Subtract line | | | | |
| | 4a from line 2a Taxable amount—see page 27 | | | | |
| e | of the instructions | | | | |
| ٠ | lines 4d and 5 from line 1. This amount must | | | | |
| | be distributed in 2011 | | | | 202,680 |
| 7 | A mounts treated as distributions out of | | | | |
| | corpus to satisfy requirements imposed by | | | | |
| | section 170(b)(1)(F) or 4942(g)(3) (see page 27 of the instructions) | | | | |
| Ω | Excess distributions carryover from 2005 not | | | | |
| Ŭ | applied on line 5 or line 7 (see page 27 of the | | | | |
| | ınstructions) | | | | |
| 9 | Excess distributions carryover to 2011. | | | | |
| | Subtract lines 7 and 8 from line 6a | | | | |
| | Analysis of line 9 | | | | |
| | Excess from 2006 | | | | |
| | Excess from 2007 | | | | |
| | Excess from 2008 | | | | |
| | Excess from 2009 | | | | |
| е | Excess from 2010 | | | | |

| P | art XIV Private Operating Four | ndations (see p | page 27 of the in: | structions and Pa | rt VII-A, questior | າ 9) |
|----|---|------------------------|----------------------|------------------------|------------------------|---------------------|
| 1a | If the foundation has received a ruling or d | | | | | |
| | foundation, and the ruling is effective for 2 | • | _ | | | |
| | Check box to indicate whether the organiz | ation is a private o | perating foundation | n described in section | on 4942(j)(3) | or 4942(j)(5) |
| 2a | Enter the lesser of the adjusted net | Tax year | | Prior 3 years | | (e) Total |
| | income from Part I or the minimum investment return from Part X for each | (a) 2010 | (b) 2009 | (c) 2008 | (d) 2007 | , , |
| | yearlisted | | | | | |
| | 85% of line 2a | | | | | |
| С | Qualifying distributions from Part XII, | | | | | |
| d | line 4 for each year listed | | | | | |
| | for active conduct of exempt activities | | | | | |
| е | Qualifying distributions made directly | | | | | |
| | for active conduct of exempt activities Subtract line 2d from line 2c | | | | | |
| 3 | Complete 3a, b, or c for the | | | | | |
| | alternative test relied upon | | | | | |
| а | "A ssets" alternative test—enter | | | | | |
| | (1) Value of all assets | | | | | |
| | (2) Value of assets qualifying | | | | | |
| h | under section 4942(j)(3)(B)(i) "Endowment" alternative test— enter 2/3 | | | | | |
| ٠ | of minimum investment return shown in | | | | | |
| | Part X, line 6 for each year listed | | | | | |
| С | "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 | | | 1 | | |
| Da | (4) Gross investment income rt XV Supplementary Information | n (Complete t | his part only if | the organizati | on had \$5 000 | or more in |
| | assets at any time during | | | | on naa \$5,000 | or more m |
| L | Information Regarding Foundation Manage | ers: | | | | |
| а | List any managers of the foundation who ha | | | | | idation |
| | before the close of any tax year (but only I | rtney nave contrib | outed more than \$5 | ,000) (See section | 50/(d)(2)) | |
| | NONE | | | | | |
| ь | List any managers of the foundation who ov | wn 10% or more of | the stock of a cori | oration (or an equa | lly large portion of t | he |
| _ | ownership of a partnership or other entity) | | | | ,g. p | |
| | | | | | | |
| | NONE | | | | | |
| 2 | Information Regarding Contribution, Grant | | | | | |
| | Check here 🕶 If the foundation only ma | kes contributions t | to preselected chai | ritable organizations | and does not acce | pt |
| | unsolicited requests for funds If the found under other conditions, complete items 2a | - ' | grants, etc (see p | age 28 of the instru | ctions) to individua | ls or organizations |
| | —————————————————————————————————————— | , b, c, and d | | | | |
| | - 1 | 6.1 | | | 1 | |
| а | The name, address, and telephone numbe | r of the person to v | vnom applications : | snould be addressed | l | |
| | JEFFREY KRAINES 69-40 YELLOWSTONE BLVD 418 | | | | | |
| | FOREST HILLS, NY 11375 | | | | | |
| ь | The form in which applications should be s | submitted and infor | rmation and materi | als they should incli | ude | |
| _ | SEE ATTACHED | | ation and mater | men | = = | |
| _ | Any submission deadlines | | | | | |
| ٠ | NO DEADLINES | | | | | |
| و. | | augh as hu | nhight areas at a | toble fields lived | Finatitutiana | or |
| a | Any restrictions or limitations on awards, factors | such as by geogra | pilicai areas, chari | table lielus, Kinds O | mstitutions, or oth | EI |
| | NO RESTRICTIONS | | | | | |

3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to status of A mount any foundation manager contribution recipient Name and address (home or business) or substantial contributor a Paid during the year See Additional Data Table 322,365 **b** Approved for future payment

| Form 990-P | | | | | | Page 12 |
|------------------|--|---------------|----------------|-------------------------|---------------|---|
| | -A Analysis of Income-Produc | | | Foods de de la constant | - F12 F12 F14 | (e) |
| _ | amounts unless otherwise indicated | (a) | (b) | Excluded by section | (d) | Related or exempt function income (See page 28 of |
| 1 Program | service revenue | Business code | A mount | Exclusion code | A mount | the instructions) |
| · | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| g Fees a | ind contracts from government agencies | | | | | |
| | ship dues and assessments | | | | | |
| | on savings and temporary cash investments ds and interest from securities | | | 14 | 376,439 | |
| | tal income or (loss) from real estate | | | | , | |
| | inanced property | | | | | |
| | bt-financed property | | | | | |
| | I income or (loss) from personal property | | | | | |
| | oss) from sales of assets other than inventory | | | 18 | 29,995 | |
| • | one or (loss) from special events | | | 10 | 25,755 | |
| | rofit or (loss) from sales of inventory | | | | | |
| 11 Othorra | RESIDUAL ESTATE OF B | | | | | 778 |
| | IAL DONATIONS S KRAINES | | | | | 1,450 |
| c | | | | | | |
| | | | | | | |
| | | | | | | |
| | I Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) | | | | 406,434 | 2,228 408,662 |
| | orksheet in line 13 instructions on page 2 | | | | .3 | 408,002 |
| | -B Relationship of Activities to | the Accom | plishment of E | | | |
| Line No. ▼ | Explain below how each activity for whi the accomplishment of the organization page 28 of the instructions) | | | | | |
| 4 | Dividend and interest income on investm | nent | | | | |
| 8 | Capital gains on the sale of investments | | | | | |
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| | 90-PF (2 XVII | Information Re | | | d Transa | ctions and Relations | ships With | | Pa | ge 13 |
|------------|-------------------------------|----------------------------|-----------------------------|-------------------------|-----------------------------|---|--|---------------|--------|--------------|
| 1 Did 1 | the organi | Noncharitable | | | v other organ | ızatıon described in section | | | Yes | No |
| _ | _ | Code (other than section | | · | - | | | | res | NO |
| | | om the reporting four | | | = | - | | | | |
| | | | | · | - | | | 1a(1) | | No |
| | | | | | | | | | | |
| | | | | | | | | 1a(2) | | No |
| | er trans | | | | | | | 46/43 | | Na. |
| | | | | | | | | <u> </u> | | No |
| | | | | | | | | | | No |
| | | | | | | | | | | No |
| | | | | | | | | 1b(4) | | No |
| | | _ | | | | | | | | No |
| | | | | | | | | | | No |
| | | | | | | s | | | | No |
| of tl | he goods ny trans | , other assets, or se | rvices giver angement, s | by the reporting fou | ndation Ift e value ofti | Column (b) should always the foundation received less the goods, other assets, or (d) Description of transfers, | ss than fair marke r services receive | et value d | • | nts |
| (u) Line | | (b) / thount involved | (c) name of | Honoriantable exempt on | Junizacion | (a) Description of durisiers, | transactions, and she | ing and | ngemei | 11.5 |
| | | | | | | | | | | |
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| des | crıbed ır | • | ne Code (oth schedule | er than section 501(| , | re tax-exempt organization section 527? | | .FYe | es F | No |
| | the be based | | and belief, it | is true, correct, and | complete D | including accompanying s Peclaration of preparer (ot 2011-06-12 | | | • | |
| | Sıç | nature of officer or t | rustee | | | Date | Title | | | |
| Sign Here | | Preparer's ROCCO RICCIARDI | | | | Date 2011-06-12 | Check if self- employed ▶ ✓ | PTIN | | |
| Siç | _2== | | | DO CCO DICCI: - | | | Fırm's EIN ► | 1 | | |
| - . | Paid Preparer? Use Only | Firm's name 🕨 | | ROCCO RICCIAR | | | - IIIII S EIN F | | | |
| | | | | | | Phone no (516 |) 524- | 3501 | | |

| Schedule B Form 990, 990-EZ, | Schedule of Contributors | | OMB No 1545-0047 |
|---|--|---|-----------------------|
| or 990-PF) Department of the Treasury | ► Attach to Form 990, 990-EZ, or 990-PF. | | 2010 |
| nternal Revenue Service | | | |
| Name of organization FHE WILLIAM P GOLDMAN AND | BROTHERS FOUNDATION INC | 13-616310 | entification number |
| Organization type (chec | k one) | | |
| Filers of: | Section: | | |
| -orm 990 or 990-EZ | 「 501(c)() (enter number) organization | | |
| | 4947(a)(1) nonexempt charitable trust not treated as a priva | ate foundation | |
| | 527 political organization | | |
| Form 990-PF | 501(c)(3) exempt private foundation | | |
| | F 4947(a)(1) nonexempt charitable trust treated as a private f | oundation | |
| | 501(c)(3) taxable private foundation | | |
| 2h lf | is covered by the General Rule or a Special Rule . | | |
| _ | n filing Form 990, 990-EZ, or 990-PF that received, during the year, \$8 y one contributor Complete Parts I and II | 5,000 or more (in money or | |
| under sections 50 | c)(3) organization filing Form 990 or 990-EZ, that met the 33 ¹ /3% supp 9(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, 100 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Fo | during the year, a contribut | |
| during the year, a | c)(7), (8), or (10) organization filing Form 990, or 990-EZ, that receive ggregate contributions of more than \$1,000 for use <i>exclusively</i> for re or educational purposes, or the prevention of cruelty to children or an | ligious, charitable, | |
| during the year, control of aggregate to not aggregate to not the year for an exapplies to this organization. | c)(7), (8), or (10) organization filing Form 990, or 990-EZ, that received intributions for use <i>exclusively</i> for religious, charitable, etc., purpose more than \$1,000. If this box is checked, enter here the total contribution of the clusively religious, charitable, etc., purpose. Do not complete any of the canization because it received nonexclusively religious, charitable, etc. | es, but these contributions dons that were received dur the parts unless the Gener , contributions of \$5,000 or | lid ing al Rule |
| 990-EZ, or 990-PF), but it | that is not covered by the General Rule and/or the Special Rules doe must answer "No" on Part IV, line 2 of its Form 990, or check the bood its Form 990-PF, to certify that it does not meet the filing requirement | x on lin H of its | |

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93491164001501

Name of organization THE WILLIAM P GOLDMAN AND BROTHERS FOUNDATION INC Employer identification number

13-6163100

| Part I | Contributors (see Instructions) | | |
|------------|-----------------------------------|--------------------------------|--|
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Aggregate contributions | (d) Type of contribution |
| _ | | \$ | Person |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Aggregate contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash Complete Part II if there is a noncash contribution) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Aggregate contributions | (d) Type of contribution |
| _ | | \$ | Person |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Aggregate contributions | (d) Type of contribution |
| _ | | \$ | Person |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Aggregate contributions | (d) Type of contribution |
| | | \$ | Person |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Aggregate contributions | (d) Type of contribution |
| _ | | \$ | Person Payroll Noncash Payroll Payroll |

Name of organization
THE WILLIAM P GOLDMAN AND BROTHERS FOUNDATION INC

Employer identification number

13-6163100

| 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 |
| | | \$ | |
| | | - | |
| (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 |
| | | _ | |
| | | - - - - - | |
| (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 |
| | | - | |
| | | - - - - - - - | |

Name of organization
THE WILLIAM P GOLDMAN AND BROTHERS FOUNDATION INC

Employer identification number

| | | | 13-6163100 |
|--------------------------|--|---|---|
| art III | Exclusively religious, charitable, etc., individual aggregating more than \$1,000 for the year. (Comfor organizations completing Part III, enter the total of contributions of \$1,000 or less for the year (Enter the | nplete columns (a) through e <i>xclusively</i> religious, chari | (e) and the following line entry) table, etc, |
| a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
| | Transferee's name, address, and ZIP + 4 | (e) Transfer of gift Relat | tionship of transferor to transferee |
| a) No. rom Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
| | Transferee's name, address, and ZIP + 4 | (e) Transfer of gift Relat | tionship of transferor to transferee |
|) No. rom art I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
| | Transferee's name, address, and ZIP + 4 | (e) Transfer of gift Relat | tionship of transferor to transferee |
| a) No. rom Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
| | Transferee's name, address, and ZIP + 4 | (e) Transfer of gift Relat | tionship of transferor to transferee |
| | Transferee's name, address, and ZIP + 4 | | tionship of transferor to transfere |

Software ID: 10000149 **Software Version:** 2010.2.15

EIN: 13-6163100

Name: THE WILLIAM P GOLDMAN AND BROTHERS

FOUNDATION INC

Part VI Line 7 - Tax Paid Original Return: 4064

| Recipient Name and address (home or business) | If recipient is an individual, show any relationship to any foundation manager | Foundation status of recipient | Purpose of grant or contribution | A mount |
|--|--|--------------------------------------|----------------------------------|---------|
| | or substantial contributor | | | |
| a Paid during the year ADL OF BNAI BRITH 40 Court Street Boston MA 02108 Boston, MA 02108 | | | SUPPORT | 1,000 |
| ALZHEIMER'S ASSOCIATION 360 Lexington Avenue New York, NY 10017 | | | SUPPORT | 5,000 |
| AMER GATHERING JEWISH HOLOCAUST SUR 122 West 30 Street New York, NY 10001 | | | SUPPORT | 5,000 |
| AMER SOCIETY FOR JEWISH HERITAGE PO 1202 Lexington Avenue New York, NY 10028 | | | SUPPORT | 500 |
| A MERICAN-ISRAEL FRIENDSHIP LEA GUE 134 East 39th Street New York, NY 10016 | | | SUPPORT | 10,500 |
| AMERICAN ASSOC-BIKUR CHOLIM HOSPIT 156 5th Avenue New York, NY 10010 | | | SUPPORT | 500 |
| AMERICAN CIVIL LIBERTIES UNION FOUN 211 Congress Street 3rd Fl Boston, MA 02119 | | | SUPPORT | 1,500 |
| AMERICAN FRIENDS MAGEN DAVID ADOM 29 Gray Birch Terrace Newton, MA 02460 | | | SUPPORT | 5,000 |
| AMERICAN FRIENDS OF MEIR PANIM 5316 New Utrecht Avenue Brooklyn, NY 11219 | | | SUPPORT | 5,000 |
| AMERICAN INSTITUTE FOR CANCER RESEA 1759 R Street NW Washington, DC 20077 | | | SUPPORT | 1,500 |
| AMERICAN ISRAELI LIGHTHOUSE INC 20 East 46 Street New York, NY 10017 | | | SUPPORT | 1,000 |
| AMERICAN JEWISH COMMITTEE 126 High Street Boston, MA 02110 | | | SUPPORT | 27,600 |
| AMERICAN JEWISH HISTORICAL SOCIETY 15 West 16th Street New York, NY 10011 | | | SUPPORT | 500 |
| AMERICAN JEWISH WORLD SERVICE 45 West 36th Street New York, NY 10018 | | | SUPPORT | 500 |
| AMERICAN SOCIETY FOR YAD VASHEM PO Box 170305 Milwaukee, WI 53217 | | | SUPPORT | 500 |
| Total | | | | 322,365 |

| Recipient | If recipient is an individual, show any relationship to any foundation manager | Foundation status of recipient | Purpose of grant or contribution | A mount |
|--|--|--------------------------------------|----------------------------------|---------|
| Name and address (home or business) | or substantial contributor | recipient | | |
| a Paid during the year | | | | |
| ARTHRITIS FOUNDATION 29 Crafts Street 450 Newton, MA 02458 | | | SUPPORT | 1,000 |
| BELMONT DAY SCHOOL 55 Day School Lane Belmont,MA 02478 | | | SUPPORT | 500 |
| BELMONT HILL SCH DARREN GALLUP MEMO 350 Prospect Street Belmont, MA 02478 | | | SUPPORT | 500 |
| BELLMONT HILL SCHOOL ANNUAL FUND 350 Prospect Street Belmont, MA 02478 | | | SUPPORT | 500 |
| BETH MIDRASH GOVAHA 617 Sixth Street Lakewood,NJ 08701 | | | SUPPORT | 5,000 |
| BOSTON JEWISH FILM FESTIVAL 1001 Watertown Street West Newton, MA 02465 | | | SUPPORT | 250 |
| BRIDGEWELL 471 Broadway Lynnfield, MA 01940 | | | SUPPORT | 350 |
| BROWN UNIVERSITY Annual Fund Box 1893 Providence, RI 02903 | | | SUPPORT | 1,000 |
| CAMERA PO Box 35040 Boston, MA 02135 | | | SUPPORT | 5,000 |
| CHABAD CHAI CENTER OF BROOKLINE 105 St Paul Street Brookline, MA 02446 | | | SUPPORT | 1,500 |
| CHABAD OF ROSLYN 75 Powerhouse Rd Roslyn Heights, NY 11577 | | | SUPPORT | 10,000 |
| CHAI LIFELINE INC 151 West 30th Street New York, NY 10001 | | | SUPPORT | 5,000 |
| CHAMAH 27 William Street New York, NY 10005 | | | SUPPORT | 5,000 |
| COMBINED JEWISH PHILANTHROPIES 126 High Street Boston, MA 02110 | | | SUPPORT | 10,000 |
| CONGREGATION AHAVAS ACHIM ZEMACH ZE 1546 46 Street Brooklyn, NY 11219 | | | SUPPORT | 2,000 |
| Total | | | | 322,365 |

| Recipient | If recipient is an individual, show any relationship to any foundation manager | Foundation status of recipient | Purpose of grant or contribution | A mount |
|---|--|--------------------------------------|----------------------------------|---------|
| Name and address (home or business) | or substantial contributor | тестрієні | | |
| a Paid during the year | | | | |
| CONGREGATION ANSHEI LIOZNA 1603 41st Street Brooklyn, NY 11218 | | | SUPPORT | 10,000 |
| CONGREGATION KEREM SHALOM PO Box 1646 Concord,MA 01742 | | | SUPPORT | 3,350 |
| DANA FARBER CANCER INSTITUTE 10 Brookline Plase West 6th Fl Brookline, MA 02445 | | | SUPPORT | 100 |
| DOROT INC 171 West 85 Street New York, NY 10024 | | | SUPPORT | 4,500 |
| EDUCATIONAL INSTITUTE OHOLEI TORAH 667 Eastern Parkway Brooklyn, NY 11213 | | | SUPPORT | 2,500 |
| EZRAT ISRAEL INC 806 Eastern Parkway Brooklyn,NY 11213 | | | SUPPORT | 7,500 |
| FACING HISTORY AND OURSELVES 16 Hurd Road Brookline,MA 02445 | | | SUPPORT | 250 |
| FRIENDS NEW ENGLAND HOLOCAUST MEMOR 126 High Street Boston, MA 02110 | | | SUPPORT | 500 |
| FRIENDS OF ISRAEL DISABLED VETERANS 1133 Broadway Suite 232 New York, NY 10010 | | | SUPPORT | 500 |
| FRIENDS OF JEWISH RENEWAL IN POLAND 3700 Wilshire Blvd Sutie 957 Los Angeles, CA 90010 | | | SUPPORT | 1,000 |
| FRIENDS OF THE FORUM 4116 N Kennicott Arlington Heights, IL 60004 | | | SUPPORT | 500 |
| FRIENDS OF THE ISRAEL DEFENSE FORCE 154 Wells Avenue Newton, MA 02459 | | | SUPPORT | 1,000 |
| FRIENDS OF INSTITUTIONALIZED AGED 18 John Street New York, NY 10038 | | | SUPPORT | 2,000 |
| HOME OF THE SAGES IN ISRAEL 25 Bialystoker Place New York, NY 10002 | | | SUPPORT | 500 |
| HOSPITAL SPECIAL SURGERY- SALVATI CH 535 East 70th Street New Yor, NY 10021 | | | SUPPORT | 5,000 |

| Israel Guide Dog Center for the Bit 732 Settlers Circle | | | | | |
|---|--|--------------------------|-----------|---------|---------|
| a | Recipient | show any relationship to | status of | | A mount |
| Israel Guide Doc Center for the Bit | Name and address (home or business) | | recipient | | |
| 732 S SETTION OF THE PROPERTY 2,500 | a Paid during the year | | | | |
| INTERNATIO ID 6ast 30th Street | Israel Guide Dog Center for the Bli 732 S Settlers Circle Circle Warrington,PA 18976 | | | SUPPORT | 5,000 |
| RIGHTEOUS 305 Seventh Avenue New York, NY 10001 | JEWISH BRAILLE INSTITUTE INTERNATIO 110 East 30th Street New York, NY 10016 | | | SUPPORT | 2,500 |
| 77 Franklin Street Boston, MA 02110 JEWISH POLICY CENTER 50 F Street NW Washington, DC 20001 JEWISH WAR VETERANS OF THE USA INC USA | 305 Seventh Avenue | | | SUPPORT | 1,000 |
| SO F STREET NW Washington, DC 20001 SUPPORT 1,000 Washington, DC 20009 SUPPORT 1,000 Washington, DC 20009 SUPPORT 1,000 Washington, DC 20009 SUPPORT SUP | JEWISH NATIONAL FUND 77 Franklın Street Boston, MA 02110 | | | SUPPORT | 5,000 |
| USA INC 1811 R Street Washington, DC 20009 JUNIOR A CHIEVEMENT OF NY INC 205 East 42nd Street New York, NY 10017 LEGAL AID SO CIATY OF SAN DIEGO 110 S Euclid Avenue S San Diego, CA 92114 LITTLE FLO WER CHILDREN FAMILY SER 186 Joralemon Street Brooklyn, NY 11201 MACHNE ISRAEL INC 770 Eastern Parkway Brooklyn, NY 11213 MANCHESTER COMMUNITY THEATRE PLAYER 698 Baech Street Manchister, NN 03104 MARTIN LUTHER KING NATIONAL MARTIN LUTHER KING NATIONAL MEMORIA PO Box 96071 Washington, DC 20077 MAYYIM HAYYIM 1238 Washington Street Newton, MA 02466 MEMORIAL SLOAN KETTERING CANCER CEN 1275 York Avenue New York, NY 10221 MESIVTA YESHIVA RABBI CHAIM BERLIN 1605 Coney Island Avenue Brooklyn, NY 11230 | JEWISH POLICY CENTER 50 F Street NW Washington, DC 20001 | | | SUPPORT | 1,000 |
| 205 East 42nd Street SUPPORT 750 New York, NY 10017 SUPPORT 750 210 S Euclid A venue San Diego, CA 92114 SUPPORT 1,000 LITTLE FLOWER CHILDREN FAMILY SER 186 Joralemon Street Brooklyn, NY 11201 SUPPORT 1,000 MACHNE ISRAEL INC 770 Eastern Parkway Brooklyn, NY 11213 SUPPORT 10,000 MANCHESTER COMMUNITY THEATRE PLAYER 698 Beech Street Manchester, NH 03104 SUPPORT 250 MARTIN LUTHER KING NATIONAL MENDRORL PORTS (NEW YORK) ND C20077 SUPPORT 300 MAYYIM HAYYIM 1838 Washington Street Newton, MA 02466 SUPPORT 5,000 MEMORIAL SLOAN KETTERING CANCER CEN New York, NY 10021 SUPPORT 5,000 MESIVTA YESHIVA RABBI CHAIM BERLIN New York, NY 10021 SUPPORT 5,000 | JEWISH WAR VETERANS OF THE USA INC 1811 R Street Washington, DC 20009 | | | SUPPORT | 1,000 |
| DIEGO | JUNIOR ACHIEVEMENT OF NY INC 205 East 42nd Street New York, NY 10017 | | | SUPPORT | 5,000 |
| SER 186 Joralemon Street Brooklyn, NY 11201 MACHNE ISRAEL INC 770 Eastern Parkway Brooklyn, NY 11213 MANCHESTER COMMUNITY THEATRE PLAYER 698 Beech Street Manchester, NH 03104 MARTIN LUTHER KING NATIONAL MEMORIA PO Box 96071 Washington, DC 20077 MAYYIM HAYYIM 1838 Washington Street Newton, MA 02466 MEMORIAL SLOAN KETTERING CANCER CEN 1275 York Avenue New York, NY 10021 MESIVTA YESHIVA RABBI CHAIM BROOK LISION SUPPORT SUPPORT SUPPORT SUPPORT SUPPORT SUPPORT SOUPORT SOUPORT | 110 S Euclid Avenue S | | | SUPPORT | 750 |
| 770 Eastern Parkway Brooklyn, NY 11213 MANCHESTER COMMUNITY THEATRE PLAYER 698 Beech Street Manchester, NH 03104 MARTIN LUTHER KING NATIONAL MEMORIA PO Box 96071 Washington, DC 20077 MAYYIM HAYYIM 1838 Washington Street Newton, MA 02466 MEMORIAL SLOAN KETTERING CANCER CEN 1275 York Avenue New York, NY 10021 MESIVTA YESHIVA RABBI CHAIM BERLIN 1605 Coney Island Avenue Brooklyn, NY 11230 | 186 Joralemon Street | | | SUPPORT | 1,000 |
| THEATRE PLAYER 698 Beech Street Manchester, NH 03104 MARTIN LUTHER KING NATIONAL MEMORIA PO Box 96071 Washington, DC 20077 MAYYIM HAYYIM 1838 Washington Street Newton, MA 02466 MEMORIAL SLOAN KETTERING CANCER CEN 1275 York Avenue New York, NY 10021 MESIVTA YESHIVA RABBI CHAIM BROOKIN, NY 11230 SUPPORT SUPPORT SUPPORT 5,000 SUPPORT 5,000 | MACHNE ISRAEL INC 770 Eastern Parkway Brooklyn, NY 11213 | | | SUPPORT | 10,000 |
| MEMORIA PO Box 96071 Washington, DC 20077 MAYYIM HAYYIM 1838 Washington Street Newton, MA 02466 MEMORIAL SLOAN KETTERING CANCER CEN 1275 York Avenue New York, NY 10021 MESIVTA YESHIVA RABBI CHAIM BRALIN 1605 Coney Island Avenue Brooklyn, NY 11230 SUPPORT SUPPORT SUPPORT 5,000 | MANCHESTER COMMUNITY THEATRE PLAYER 698 Beech Street Manchester,NH 03104 | | | SUPPORT | 1,500 |
| 1838 Washington Street Newton, MA 02466 MEMORIAL SLOAN KETTERING CANCER CEN 1275 York Avenue New York, NY 10021 MESIVTA YESHIVA RABBI CHAIM BERLIN 1605 Coney Island Avenue Brooklyn, NY 11230 SUPPORT 5,000 | | | | SUPPORT | 250 |
| CANCER CEN 1275 York Avenue New York, NY 10021 MESIVTA YESHIVA RABBI CHAIM BERLIN 1605 Coney Island Avenue Brooklyn, NY 11230 SUPPORT 5,000 | MAYYIM HAYYIM 1838 Washington Street Newton, MA 02466 | | | SUPPORT | 300 |
| BERLIN 1605 Coney Island Avenue Brooklyn, NY 11230 | MEMORIAL SLOAN KETTERING CANCER CEN 1275 York Avenue New York, NY 10021 | | | SUPPORT | 5,000 |
| | BERLIN 1605 Coney Island Avenue | | | SUPPORT | 5,000 |
| | | | | | 322,365 |

| Recipient | If recipient is an individual, show any relationship to any foundation manager | Foundation status of recipient | Purpose of grant or contribution | A mount |
|--|--|--------------------------------------|----------------------------------|---------|
| Name and address (home or business) | or substantial contributor | recipient | | |
| a Paid during the year | | | | |
| MESIVTHA TIFERETH JERUSALEM OF AMER 145 East Broadway New York,NY 10002 | | | SUPPORT | 5,000 |
| MIDDLE EAST FORUM 1500 Walnut Street Philadelphia,PA 19102 | | | SUPPORT | 1,000 |
| NATIONAL JEWISH HEALTH 271 Madison Avenue New York, NY 10016 | | | SUPPORT | 2,500 |
| NATIONAL YIDDISH BOOK CENTER 1021 West Street Amherst, MA 01002 | | | SUPPORT | 500 |
| NEW ISRAEL FUND 35 Highland Circle Needham, MA 02494 | | | SUPPORT | 1,000 |
| NEW SECTOR ALLIANCE 99 Chauncy Street Boston, MA 02111 | | | SUPPORT | 750 |
| NORTH AMERICAN COUNCIL MUSEUM POLIS 401 Broadway New York, NY 10013 | | | SUPPORT | 1,000 |
| NYU HOSPITAL FOR JOINT DISEASES 301 East 17th Street New York, NY 10003 | | | SUPPORT | 20,000 |
| OHR HALIMUD 1681 42nd Street Brooklyn, NY 11204 | | | SUPPORT | 2,500 |
| ORPHAN POOR SICK FUND 824 Eastern Parkway Brooklyn, NY 11213 | | | SUPPORT | 5,000 |
| P'EYLIM LEV'ACHIM 1034 East 12 Street Brooklyn, NY 11230 | | | SUPPORT | 1,000 |
| PEOPLE FOR THE AMERICAN WAY FOUNDAT 2000 M Street Washington, DC 20077 | | | SUPPORT | 100 |
| PMC-JIMMY FUND 77 4th Avenue Needham, MA 02494 | | | SUPPORT | 100 |
| SIMON WIESENTHAL CENTER 1399 S Roxbury Drive Los Angeles, CA 90035 | | | SUPPORT | 1,800 |
| SKIDMORE COLLEGE 815 North Broadway Saratoga Springs,NY 12866 | | | SUPPORT | 5,000 |
| Total | | | | 322,365 |

| Recipient | If recipient is an individual, show any relationship to any foundation manager | Foundation status of | Purpose of grant or contribution | A mount |
|---|--|-------------------------|----------------------------------|---------|
| Name and address (home or business) | or substantial contributor | recipient | | |
| a Paid during the year | | | | |
| SOUTHERN POVERTY LAW CENTER 400 Washington Ave Montgomery, AL 36104 | | | SUPPORT | 7,500 |
| SUSAN G KOMEN FOR THE CURE PO Box 650309 Dallas,TX 75265 | | | SUPPORT | 250 |
| TEMPLE BETH RISHON 585 Russel Avenue Wycoff, NJ 07481 | | | SUPPORT | 500 |
| THE ACADEMY FOR JEWISH RELIGION 6301 Riverdale Avenue Riverdale, NY 10471 | | | SUPPORT | 500 |
| THE BURKE REHABILITATION HOSPITAL 785 Mamaroneck Avenue White Plains, NY 10605 | | | SUPPORT | 1,000 |
| THE HEBREW FREE BURIAL ASSOCIATION 224 West 35th Street New York, NY 10001 | | | SUPPORT | 5,000 |
| THE KENNETH B SCHWARTZ CENTER 205 Portland Street Boston, MA 02114 | | | SUPPORT | 1,000 |
| THE ROGOSIN INSTITUTE 505 East 70 Street New York, NY 10021 | | | SUPPORT | 10,000 |
| UJA FEDERATION OF NEW YORK 130 East 59 Street New York, NY 10022 | | | SUPPORT | 1,000 |
| UJA FEDERATION OF NORTHERN NEW JERS 111 Kınderkamack Rd Rıverdge, NJ 07661 | | | SUPPORT | 1,800 |
| UNITED LUBAVITCHER YESHIVOTH 841-853 Ocean Parway Brooklyn, NY 11230 | | | SUPPORT | 30,000 |
| US HOLOCAUST MEMORIAL MUSEUM PO Box 90998 Washington, DC 20090 | | | SUPPORT | 500 |
| VISITING NURSE SERVICE OF NEW YORK 107 East 70 Street New York, NY 10021 | | | SUPPORT | 1,000 |
| WBUR 890 Commonwealth Avenue Boston, MA 02215 | | | SUPPORT | 365 |
| WEILL CORNELL MEDICAL COLLEGE DIV 1300 York Avenue New York, NY 10021 | | | SUPPORT | 5,000 |
| Total | | | | 322,365 |

| If recipient is an individual, show any relationship to | Foundation status of | Purpose of grant or contribution | A mount |
|---|------------------------|----------------------------------|---|
| any foundation manager or substantial contributor | recipient | | |
| | | | |
| | | SUPPORT | 2,500 |
| | | SUPPORT | 2,000 |
| | | SUPPORT | 7,500 |
| | | SUPPORT | 500 |
| | | SUPPORT | 500 |
| - • · · · · · · · · · · · · · · · · · · | any foundation manager | any foundation manager recipient | any foundation manager or substantial contributor SUPPORT SUPPORT SUPPORT SUPPORT SUPPORT SUPPORT |

TY 2010 Accounting Fees Schedule

Name: THE WILLIAM P GOLDMAN AND BROTHERS FOUNDATION INC

EIN: 13-6163100

Software ID: 10000149

| Category | Amount | Net Investment Income | Adjusted Net Income | Disbursements for Charitable Purposes |
|-------------------|--------|--------------------------|------------------------|---|
| ROCCO J RICCIARDI | 3,500 | | | |

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TY 2010 General Explanation Attachment

Name: THE WILLIAM P GOLDMAN AND BROTHERS FOUNDATION INC

EIN: 13-6163100

Software ID: 10000149

TY 2010 Investments Corporate Bonds Schedule

Name: THE WILLIAM P GOLDMAN AND BROTHERS FOUNDATION INC

EIN: 13-6163100

Software ID: 10000149

| Name of Bond | End of Year Book Value | End of Year Fair Market Value |
|-----------------------------------|---------------------------|----------------------------------|
| GENERAL ELECTRIC 5.25% 03/15/2020 | 1,500,000 | 1,472,235 |
| BANK OF NEW YORK 5.55% 04/17/2023 | 450,000 | 443,156 |

TY 2010 Investments Corporate Stock Schedule

Name: THE WILLIAM P GOLDMAN AND BROTHERS FOUNDATION INC

EIN: 13-6163100

Software ID: 10000149

| Name of Stock | End of Year Book Value | End of Year Fair Market Value |
|--|---------------------------|----------------------------------|
| 6920 shares of CITIGROUP 6 PFD | 173,000 | 154,316 |
| 48000 shares of GENERAL ELECTRIC 6 PFD | 1,200,000 | 1,201,440 |
| 2000 shares of PLC 7.75 PFD | 50,000 | 49,600 |
| 40000 shares of JP MORGAN CHASE 5.88 PFD | 1,000,000 | 974,000 |
| 1400 shares of LINCOLN NATIONAL 6.75 PFD | | |
| 1400 shares of GEORGIA P L 5.75 PFD | | |
| 275000 shares of GEORGIA POWER 6.50 | 29,789 | 28,875 |
| 40000 shares of GOLDMAN SACHS | 1,000,005 | 926,000 |

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As Filed Data -

DLN: 93491164001501

TY 2010 Investments Government Obligations Schedule

Name: THE WILLIAM P GOLDMAN AND BROTHERS FOUNDATION INC

EIN: 13-6163100

Software ID: 10000149

Software Version: 2010.2.15

US Government Securities - End of

Year Book Value: 1,209,100

US Government Securities - End of

Year Fair Market Value: 1,250,906

State & Local Government

Securities - End of Year Book

Value:

State & Local Government Securities - End of Year Fair

Market Value:

TY 2010 Other Assets Schedule

Name: THE WILLIAM P GOLDMAN AND BROTHERS FOUNDATION INC

EIN: 13-6163100

Software ID: 10000149

| Description | Beginning of Year - Book Value | End of Year - Book Value | End of Year - Fair Market Value |
|----------------------------|-----------------------------------|-----------------------------|------------------------------------|
| ACCRUED INTEREST DIVIDENDS | 70,566 | 70,052 | 70,052 |
| PREPAID FEDERAL EXCISE TAX | 22 | | |

TY 2010 Other Expenses Schedule

Name: THE WILLIAM P GOLDMAN AND BROTHERS FOUNDATION INC

EIN: 13-6163100

Software ID: 10000149

| Description | Revenue and Expenses per Books | Net Investment Income | Adjusted Net Income | Disbursements for Charitable Purposes |
|--------------------|-----------------------------------|--------------------------|---------------------|--|
| MISCELLANEOUS FEES | 44 | | | |
| CHAR FEE | 250 | | | |

TY 2010 Other Income Schedule

Name: THE WILLIAM P GOLDMAN AND BROTHERS FOUNDATION INC

EIN: 13-6163100

Software ID: 10000149

| Description | Revenue And Expenses Per Books | Net Investment Income | Adjusted Net Income |
|----------------------------------|-----------------------------------|--------------------------|---------------------|
| RESIDUAL ROYALTIES B GOLDMAN EST | 778 | | |
| DONATIONS IN MEMORY OF S KRAINES | 1,450 | | |

TY 2010 Taxes Schedule

Name: THE WILLIAM P GOLDMAN AND BROTHERS FOUNDATION INC

EIN: 13-6163100

Software ID: 10000149

| Category | Amount | Net Investment Income | Adjusted Net Income | Disbursements for Charitable Purposes |
|------------|--------|--------------------------|------------------------|---|
| EXCISE TAX | 4,064 | 0 | 0 | 0 |