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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

OMB No 1545-0052

For	caler	idar year 2010, or tax yea	ır beginning			, and ending		
G (Check	all that apply 🔲	Initial return		Initial return of a fo	ormer public charity	Final return	1
			Amended return	1	Address chan	ge	Name change	
Na	ne o	foundation					A Employer identification	n number
İ		HOLZER FAM	MILY FOU	NDAT	ION, A NEW J	ERSEY		
Ì		NONPROFIT	CORPORA	TION	Ī		20-8901603	3
Nur	nber a	nd street (or P O box number i	if mail is not delivere	d to street	address)	Room/suite	B Telephone number	
		23 NORTH S	SADDLE B	ROOK	DRIVE		201-652-64	159
Cit	or t	own, state, and ZIP code					C If exemption application is a	
		HOHOKUS, N	NJ 0742	3			D 1 Foreign organization	s, check here
H (Check	type of organization:			kempt private foundation	***	2 Foreign organizations mucheck here and attach co	eeting the 85% test,
	Se	ction 4947(a)(1) nonexem			Other taxable private founda	ition		
I Fa		arket value of all assets at e			ng method: X Cash	Accrual	E If private foundation sta under section 507(b)(1	
		Part II, col (c), line 16)	,		ther (specify)		F If the foundation is in a	
	\$	759	9.319. (Pa		mn (d) must be on cash t	pasis)	under section 507(b)(1	
Pa	ırt l	Analysis of Revenue an	nd Expenses		(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
		(The total of amounts in colu- necessarily equal the amoun	ımns (b), (c), and (d) : its :n column (a))	may not	expenses per books	income	income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grant	ts, etc., received		270,361.		N/A	
	2		in is not required to attac	h Sch B				
	3	Interest on savings and tempo	orary					
	4	Dividends and interest fro	om securities		8,809.	8,809.		STATEMENT 1
	5a							
	Ь	Net rental income or (loss)						
_	6a	Net gain or (loss) from sale of	assets not on line 1	n	10,891.	 	 	
Ž	b	Gross sales price for all assets on line 6a	94,4					
Revenue	7	Capital gain net income (from				10,891.		
æ	8	Net short-term capital gai	· · · · · ·			10/031		
	9	Income modifications	•••					
	10a	Gross sales less returns and allowances	1					
		Less Cost of goods sold						
	!	Gross profit or (loss)	· · · · · · · · · · · · · · · · · · ·	•				
	11	Other income						
	12	Total Add lines 1 throug	ıh 11		290,061.	19,700	RECEIVE)
	13	Compensation of officers, dire			0.	0.		78 0.
	14	Other employee salaries a					DEC 1 8 2012	777
	15	Pension plans, employee	-			[8		131
enses	16a	Legal fees						
ĕ	Ь	Accounting fees					OGDEN, U	
Expe	1	Other professional fees				· · · · · · · · · · · · · · · · · · ·		
Ş.	17	Interest			1			· · · · · · · · · · · · · · · · · · ·
ratı	18	Taxes	STMT	2	269.	269.		0.
Operating and Administrative	19	Depreciation and depletio						· · · · · · · · · · · · · · · · · · ·
Ē	20	Occupancy						
Ad	21	Travel, conferences, and	meetings			· · · · · · · · · · · · · · · · · ·	<u> </u>	
ā	22	Printing and publications	_					
g g	23	Other expenses	STMT	3	210.	210.	· · · · · · · · · · · · · · · · · · ·	$\overline{0}$.
aţi	24	Total operating and adm		_				<u> </u>
per		expenses Add lines 13 ti			479.	479.		0.
ō	25	Contributions, gifts, grant	•		25,500.		 	25,500.
		Total expenses and disb	•				 	23,300.
		Add lines 24 and 25	- ,		25,979.	479.		25,500.
	27	Subtract line 26 from line	12:					
		Excess of revenue over expens		ents	264,082.			
		Net investment income (19,221.		
		Adjusted net income (if ne	_			,	N/A	<u> </u>
0235	01	LHA For Paperwork Re		ice, see	the instructions			Form 990-PF (2010)

C/Z

HOLZER FAMILY FOUNDATION, A NEW JERSEY

Form 990-PF (2010) NONPROFIT CORPORATION 20-8901603 Page 2

The Palament Shoots Attached schedules and amounts in the description Beginning of year End of year

D	art	Balance Sheets Attached schedules and amounts in the description column should be for and of ways amounts only	beginning of year	Elia Oi	yeai
	ar t	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	22,977.	7,235.	7,235.
	2	Savings and temporary cash investments	30,350.	172,975.	172,975.
	ı	Accounts receivable ▶			
		Less: allowance for doubtful accounts ▶			
	4	Pledges receivable ►			
	'	Less: allowance for doubtful accounts ▶			
	5	Grants receivable			
	1 -	Receivables due from officers, directors, trustees, and other			·····
	٦	· · · ·			
	,	disqualified persons			
	١′	Other notes and loans receivable			
		Less: allowance for doubtful accounts	*		
Assets	i ·	Inventories for sale or use			
1SS	ı	Prepaid expenses and deferred charges			
•	i	Investments - U.S. and state government obligations			
	1	Investments - corporate stock STMT 4	313,513.	482,561.	579,109.
	C	Investments - corporate bonds			.
	11	Investments - land, buildings, and equipment basis			
		Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other STMT 5	31,849.	0.	0.
	14	Land, buildings, and equipment: basis ▶			
		Less accumulated depreciation			
	15	Other assets (describe ►)			
	ĺ				
	16	Total assets (to be completed by all filers)	398,689.	662,771.	759,319.
	17	Accounts payable and accrued expenses			
	18	Grants payable			
S	19	Deferred revenue			
Liabilities	i	Loans from officers, directors, trustees, and other disqualified persons	· · · · · · · · · · · · · · · · · · ·		
뎙	i	Mortgages and other notes payable			
۳.	l	Other liabilities (describe)			
	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here	<u> </u>	<u>U.</u>	
		and complete lines 24 through 26 and lines 30 and 31.			
ces	24	Unrestricted	398,689.	662,771.	
Ē	}	<u> </u>	330,003.	002,771.	
Net Assets or Fund Balan	i	Temporarily restricted			
B	26	Permanently restricted			
Ę		Foundations that do not follow SFAS 117, check here			
P		and complete lines 27 through 31			
şt		Capital stock, trust principal, or current funds			
SS		Paid-in or capital surplus, or land, bldg., and equipment fund			
¥	١.	Retained earnings, accumulated income, endowment, or other funds	200 500		
ž	30	Total net assets or fund balances	398,689.	662,771.	
	l		200 500	444	
	31	Total liabilities and net assets/fund balances	398,689.	662,771.	
P	art	Analysis of Changes in Net Assets or Fund Ba	alances		
1	Total	net assets or fund balances at beginning of year - Part II, column (a), line 3	30		
		t agree with end-of-year figure reported on prior year's return)		1	398,689.
		amount from Part I, line 27a		2	264,082.
		increases not included in line 2 (itemize)		3	0.
		nes 1, 2, and 3		4	662,771.
		ases not included in line 2 (itemize)		5	0.
		net assets or fund halances at and of year (line 4 minus line 5). Port II, no	ump (b) line 20		662 771

023511 12-07-10

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	cribe the ki	nd(s) of property sold (or common stock, 200			(b) H	Ow ac Purch Dona	quired hase ition	(c) Date (mo., d	acquired lay, yr.)	(d) Date sold (mo., day, yr.)
1a	-				<u> </u>			_		
b SEE ATTACHEI	STA!	<u> PEMENT</u>			<u> </u>					
<u>C</u>					 					
d					<u> </u>					
_e			1	 			L			
(e) Gross sales price	(f) l	Depreciation allowed (or allowable)	1 1 1	st or other basis expense of sale					iain or (loss) s (f) minus (
a										
b	ļ									
<u>C</u>										
<u>d</u>	ļ									
e 94,454.			<u> </u>	83,56	3.					<u> 10,891.</u>
Complete only for assets show	7 		 -1**	·					Col. (h) gain not less thar	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (i) col. (j), if any			COI		(from col. (
_a										
b										
C								_		
d				<u>.</u>					_	
<u>e</u>	1								-	10,891.
2 Capital gain net income or (net o	apital loss)	If gain, also ei	nter in Part I, line r -0- in Part I, line	7	}	2				10,891.
, ,	. ,	•		•	7	_		-		20/0520
3 Net chart-term canital agin or (Id		1160 111 366110113 122213	i allu (O).		\ \	l				
			7 (-7-		L I					
If gain, also enter in Part I, line 8 If (loss), enter -0- in Part I, line 8	, column (d 3	c).			<u>}</u>	3			N/A	
If gain, also enter in Part I, line 8 If (loss), enter -0- in Part I, line 8 Part V Qualification I (For optional use by domestic priva	, column (d 3 Under S te foundation	ection 4940(e) forms subject to the section	for Reduced				ent Inc	ome	N/A	
If gain, also enter in Part I, line 8 If (loss), enter -0- in Part I, line 8 Part V Qualification I (For optional use by domestic priva) If section 4940(d)(2) applies, leave Was the foundation liable for the se If "Yes," the foundation does not qui 1 Enter the appropriate amount in	, column (c) Jnder S te foundation this part blaction 4942 alify under se	ection 4940(e) for subject to the section ank. tax on the distributable section 4940(e). Do not	for Reduced on 4940(a) tax or amount of any yet t complete this pa	n net investment in ear in the base pe art.	riod?		ent Inc	come	N/A	Yes X No
If (loss), enter -0- in Part I, line & Part V Qualification I (For optional use by domestic prival if section 4940(d)(2) applies, leave Was the foundation liable for the self "Yes," the foundation does not qual 1 Enter the appropriate amount in Base period years	Jnder S Jnder S te foundation this part blaction 4942 alify under seach colur	ection 4940(e) from subject to the section ank. tax on the distributable section 4940(e). Do not find for each year; see in (b)	for Reduced on 4940(a) tax or amount of any yet t complete this pa astructions before	ear in the base per eart. making any entri	riod? es.)			Distrib	Yes X No
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If gain, also enter in Part I, line 8 It (loss), enter -0- in Part I, line 8 Part V Qualification I (For optional use by domestic priva If section 4940(d)(2) applies, leave Was the foundation liable for the se If "Yes," the foundation does not quit Enter the appropriate amount in Base period years Calendar year (or tax year beging 2009 2008 2007 2006 2005 2 Total of line 1, column (d) 3 Average distribution ratio for the the foundation has been in existing 4 Enter the net value of noncharitation 5 Multiply line 4 by line 3	Jnder S te foundation this part blaction 4942 alify under seach colur uing in) 5-year basence if less ble-use ass	ection 4940(e) forms subject to the section ank. Itax on the distributable section 4940(e). Do not min for each year; see in (b) Adjusted qualifying the period - divide the tot than 5 years sets for 2010 from Part	for Reduced on 4940(a) tax or amount of any yet complete this particular to the forest distributions 25,970. 29,620. 0.	ear in the base per art. • making any entri • Net value of no	riod? es. (c) onchari	table-u	use assets 2 , 239 3 , 911	2 3 4	Distrib	Yes X No (d) ution ratio ided by col. (c)) . 064564 . 062501 . 0000000 . 127065 . 042355 493,676. 20,910.
If gain, also enter in Part I, line 8 If (loss), enter -0- in Part I, line 8 Part V Qualification I (For optional use by domestic priva If section 4940(d)(2) applies, leave Was the foundation liable for the se If "Yes," the foundation does not qui Enter the appropriate amount in (a) Base period years Calendar year (or tax year beging 2009 2008 2007 2006 2005 2 Total of line 1, column (d) 3 Average distribution ratio for the the foundation has been in existing the foundation has been in existing Enter the net value of noncharitation Multiply line 4 by line 3 Enter 1% of net investment inco	Jnder S te foundation this part blaction 4942 alify under seach colur uing in) 5-year basence if less ble-use ass	ection 4940(e) forms subject to the section ank. Itax on the distributable section 4940(e). Do not min for each year; see in (b) Adjusted qualifying the period - divide the tot than 5 years sets for 2010 from Part	for Reduced on 4940(a) tax or amount of any yet complete this particular to the forest distributions 25,970. 29,620. 0.	ear in the base per art. • making any entri • Net value of no	riod? es. (c) onchari	table-u	use assets 2 , 239 3 , 911	2 3	Distrib	Yes X No (d) ultion ratio ided by col. (c)) . 064564 . 062501 . 0000000 . 127065 . 042355 493,676. 20,910. 192.
If gain, also enter in Part I, line 8 If (loss), enter -0- in Part I, line 8 Part V Qualification I (For optional use by domestic priva If section 4940(d)(2) applies, leave Was the foundation liable for the se If "Yes," the foundation does not quit Enter the appropriate amount in Base period years Calendar year (or tax year beging 2009 2008 2007 2006 2005 2 Total of line 1, column (d) 3 Average distribution ratio for the the foundation has been in existing 4 Enter the net value of noncharitation 5 Multiply line 4 by line 3	Jnder S te foundation this part blaction 4942 alify under seach colur uing in) 5-year basence if less ble-use ass	ection 4940(e) forms subject to the section ank. Itax on the distributable section 4940(e). Do not min for each year; see in (b) Adjusted qualifying the period - divide the tot than 5 years sets for 2010 from Part	for Reduced on 4940(a) tax or amount of any yet complete this particular to the forest distributions 25,970. 29,620. 0.	ear in the base per art. • making any entri • Net value of no	riod? es. (c) onchari	table-u	use assets 2 , 239 3 , 911	2 3 4	Distrib	Yes X No
If gain, also enter in Part I, line 8 If (loss), enter -0- in Part I, line 8 Part V Qualification I (For optional use by domestic priva If section 4940(d)(2) applies, leave Was the foundation liable for the se If "Yes," the foundation does not qui Enter the appropriate amount in (a) Base period years Calendar year (or tax year beging 2009 2008 2007 2006 2005 2 Total of line 1, column (d) 3 Average distribution ratio for the the foundation has been in existing the foundation has been in existing Enter the net value of noncharitation Multiply line 4 by line 3 Enter 1% of net investment inco	Jnder S te foundation this part blaction 4942 alify under seach colur ling in) 5-year basence if less ble-use ass me (1% of	ection 4940(e) forms subject to the section ank. tax on the distributable section 4940(e). Do not min for each year; see in (b) Adjusted qualifying the period - divide the tot than 5 years sets for 2010 from Part Part I, line 27b)	for Reduced on 4940(a) tax or amount of any yet complete this particular to the structions before distributions 25,970. 29,620. 0.	ear in the base per art. Remaking any entri	riod? es. (c) oncharr	table-t 40: 47: 19:	use assets 2,239 3,911 1,460	2 3 4 5 6	Distrib	Yes X No (d) ultion ratio inded by col. (c))

HOLZER FAMILY FOUNDATION, A NEW JERSEY NONPROFIT CORPORATION 20-89016		Page 4
Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see ins	tructio	ns)
1a Exempt operating foundations described in section 4940(d)(2), check here and enter *N/A* on line 1.		
Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)		
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1%	1	92.
of Part I, line 27b		
c 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-)		0.
3 Add lines 1 and 2	1	92.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		0.
5 Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-	1	92,
6 Credits/Payments:		
a 2010 estimated tax payments and 2009 overpayment credited to 2010 6a 1,947.		
b Exempt foreign organizations - tax withheld at source 6b		
c Tax paid with application for extension of time to file (Form 8868)		
d Backup withholding erroneously withheld 6d		
7 Total credits and payments. Add lines 6a through 6d	1,9	47.
8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8		
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		
10 Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	1.7	755.
11 Enter the amount of line 10 to be: Credited to 2011 estimated tax	<u> </u>	0.
Part VII-A Statements Regarding Activities		
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in	Yes	No
	a	X
	b	X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or		†
distributed by the foundation in connection with the activities.		
	lc	X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:	-	
(1) On the foundation. ► \$ 0 • (2) On foundation managers. ► \$ 0 •		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation		
managers. > \$ 0.		
	2	x
If "Yes," attach a detailed description of the activities	-	 ** -
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or		
	3	x
	la l	X
	lb	
- 144 N A A A A A A A A A A A A A A A A A A	5	X
If "Yes," attach the statement required by General Instruction T		 ** -
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:		
By language in the governing instrument, or		
By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law		
	6	х
	7 X	A
If "Yes," complete Part II, col (c), and Part XV	, A	
8a Enter the states to which the foundation reports or with which it is registered (see instructions)		}
NJ		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)	- [
at and at the same of the same	b X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar		
0040 11 1 11 12 12 12 12 12 12 12 12 12 12 1	9	х
40.00	0	X
	90-PF	

Form	1990-PF (2010) NONPROFIT CORPORATION A NEW JERSEY 20-890	1603	Page	. 5
_	n 990-PF (2010) NONPROFIT CORPORATION 20-890 art VII-A Statements Regarding Activities (continued)	<u> 1603</u>	- age	_
			1	
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of	,,	x	
12	section 512(b)(13)? If "Yes," attach schedule (see instructions) Did the foundation acquire a direct or indirect interest in any applicable insurance contract before	11		-
12	August 17, 2008?	12	x	
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	-
	Website address ► NONE	10		_
14	The books are in care of ► TAXPAYER Telephone no. ►201-6	52-64	159	_
	Located at ► 23 NORTH SADDLE BROOK DRIVE, HOHOKUS, NJ ZIP+4 ►0			_
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		▶	ī
	and enter the amount of tax-exempt interest received or accrued during the year	N/	/A	-
16	At any time during calendar year 2010, did the foundation have an interest in or a signature or other authority over a bank,		Yes No	_ o
	securities, or other financial account in a foreign country?	16	x	
	See page 20 of the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of			_
	the foreign country			
Pa	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required			_
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes No	<u>_</u>
18	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?			
	(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 X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(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 X No			
0	o 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 22 of the instructions)? N/A	1b		
	Organizations relying on a current notice regarding disaster assistance check here]	
	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?	1.	v	
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	1c	X	_
-	defined in section 4942(j)(3) or 4942(j)(5)):		-	
a	a 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 X No		ĺ	
	If "Yes," list the years \blacktriangleright			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect		1	
	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 instructions.)	2b		
C	: If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			_
	>			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?	1 1		
b	olf "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)	3b		
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	X	_
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			
	had not been removed from jeopardy before the first day of the tax year beginning in 2010?	4b	<u> </u>	_
	Fo	orm 990-	PF (2010	I)

HOLZER FAMILY FOUNDATION, A NEW JERSEY 20-8901603 Form 990-PF (2010) NONPROFIT CORPORATION Page 6 Part VII-B | Statements Regarding Activities for Which Form 4720 May Be Required (continued) 5a During the year did the foundation pay or incur any amount to Yes X No (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, Yes X No any voter registration drive? Yes X No (3) Provide a grant to an individual for travel, study, or other similar purposes? (4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? Yes X No (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for Yes 🗓 No the prevention of cruelty to children or animals? b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations N/A 5b section 53 4945 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained ___ Yes ___ No expenditure responsibility for the grant? N/AIf "Yes," attach the statement required by Regulations section 53 4945-5(d) 6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on Yes X No a personal benefit contract? X b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 6b If "Yes" to 6b, file Form 8870 Yes X No 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? 7b b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? N/AInformation About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII Paid Employees, and Contractors 1 List all officers, directors, trustees, foundation managers and their compensation. (d) Contributions to employee benefit plans and deferred compensation (c) Compensation (e) Expense account, other allowances (b) Title, and average hours per week devoted to position (If not paid, enter -0-) (a) Name and address WILLIAM HOLZER PRESIDENT 23 NORTH SADDLE BROOK DRIVE HOHOKUS, NJ 07423 0.25 0 0 0. JENNIFER HOLZER VICE-PRESIDENT 23 NORTH SADDLE BROOK DRIVE HOHOKUS, NJ 07423 0.25 0 0 0. 2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (d) Contributions to employee benefit plans and deferred (b) Title, and average (e) Expense account, other (a) Name and address of each employee paid more than \$50,000 'hours per week' devoted to position (c) Compensation allowances compensation NONE

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

Form 990-PF (2010)	HOLZER FAMILY NONPROFIT COR	•	A NEW JERSEY	20-8901603	Page 7
Part VIII Inform	ation About Officers, mployees, and Contr	Directors, Trustee actors (continued)	es, Foundation Manage	rs, Highly	_

3 Five highest-paid independent contractors for professional services. If none, en	ter "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		<u>▶</u>
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant sta	itistical information such as the	Expenses
number of organizations and other beneficiaries served, conferences convened, research papers p	roduced, etc.	LAPENSES
1 N/A		
2		
3		
1		
- Abbrevia		
D. A. DV. D. L.		
Part IX-B Summary of Program-Related Investments		· · · · · · · · · · · · · · · · · · ·
Describe the two largest program-related investments made by the foundation during the tax year	on lines 1 and 2.	Amount
N/A		
494.01		
) ·		
All other program-related investments. See instructions.		
3		
		<u></u>
Total. Add lines 1 through 3		0

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P	art X Minimum Investment Return (All domestic foundations must complete this part Foreign four	ndations, se	e instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	409,914.
ь	Average of monthly cash balances	1b	91,280.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	501,194.
	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	501,194.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	7,518.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4	5	493,676.
6	Minimum investment return Enter 5% of line 5	6	24,684.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations check here and do not complete this part.)	id certain	
1	Minimum investment return from Part X, line 6	1	24,684.
2a	Tax on investment income for 2010 from Part VI, line 5		1
b	Income tax for 2010. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	192.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	24,492.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	24,492.
6	Deduction from distributable amount (see instructions)	6	0.
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	24,492.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а		1a	25,500.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
b	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	25,500.
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	5	192.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	25,308.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	qualifies for th	ne section
	4940(e) reduction of tax in those years.		

Form **990-PF** (2010)

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2009	(c) 2009	(d) 2010
1 Distributable amount for 2010 from Part XI,		<u> </u>		
line 7				24,492.
2 Undistributed income, if any, as of the end of 2010				
a Enter amount for 2009 only			0.	
b Total for prior years:				
		0.		
3 Excess distributions carryover, if any, to 2010:			•	
a From 2005				r
b From 2006				
c From 2007				
d From 2008				
e From 2009 4,640.				
f Total of lines 3a through e	4,640.			
4 Qualifying distributions for 2010 from				
Part XII, line 4 ⁻ ► \$ 25,500.				
a Applied to 2009, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2010 distributable amount				24,492.
e Remaining amount distributed out of corpus	1,008.			ļ
Excess distributions carryover applied to 2010 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	5,648.			
b Prior years' undistributed income. Subtract	,,,,-			
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of				
deficiency has been issued, or on which the section 4942(a) tax has been previously				
assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2009. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2010. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2011				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2005				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2011. Subtract lines 7 and 8 from line 6a	E 640			
10 Analysis of line 9:	5,648.			
a Excess from 2006				
b Excess from 2007				
c Excess from 2008				
d Excess from 2009 4,640.				
e Excess from 2010 1,008.				

HOLZER FAMILY FOUNDATION, A NEW JERSEY NONPROFIT CORPORATION 20-8901603

Form 990-PF (2010) NONPROF	'IT CORPORAT	ION		20-89	01603 Page 10
Part XIV Private Operating F	oundations (see ins	structions and Part VII	-A, question 9)	N/A	
1 a If the foundation has received a ruling o	r determination letter that	it is a private operating			
foundation, and the ruling is effective fo	r 2010, enter the date of t	he ruling	>	·	
b Check box to indicate whether the found	dation is a private operatir	ng foundation described i	n section	4942(j)(3) or 49	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2010	(b) 2009	(c) 2008	(d) 2007	(e) Total
investment return from Part X for					
each year listed		<u> </u>			
b 85% of line 2a					
 Qualifying distributions from Part XII, 					
line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c Complete 3a, b, or c for the alternative test relied upon: 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:				<u> </u>	
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income					
Part XV Supplementary Info	rmation (Comple	te this part only i	f the foundation	had \$5,000 or m	ore in assets
at any time during t	he year-see the i	nstructions.)			
1 Information Regarding Foundation a List any managers of the foundation wh year (but only if they have contributed in WILLIAM HOLZER	o have contributed more	than 2% of the total contr ection 507(d)(2).)	ibutions received by the	e foundation before the clo	se of any tax
b List any managers of the foundation who other entity) of which the foundation has	o own 10% or more of the s a 10% or greater interes	e stock of a corporation (or an equally large porti	on of the ownership of a p	artnership or
NONE	-				
2 Information Regarding Contributi Check here ► X if the foundation o the foundation makes gifts, grants, etc.	nly makes contributions t	o preselected charitable o	organizations and does	not accept unsolicited requ	iests for funds. If
				ompiete items za, o, c, and	1 O.
a The name, address, and telephone num	ber of the person to whoh	n applications snould be a	addressed:		
b The form in which applications should b	e submitted and informat	ion and materials they sh	ould include		
c Any submission deadlines:					
d Any restrictions or limitations on awards	s, such as by geographica	l areas, charitable fields, l	kinds of institutions, or	other factors:	

HOLZER FAMILY FOUNDATION, A NEW JERSEY

NONPROFIT CORPORATION

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Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Purpose of grant or contribution Foundation show any relationship to status of recipient Amount any foundation manager Name and address (home or business) or substantial contributor a Paid during the year SEE STATEMENT 6 25,500. Total **▶** 3a b Approved for future payment NONE 0. Total **▶**_ 3b

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NONPROFIT CORPORATION

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Enter gross amounts unless otherwise indicated.	Unrelated	business income	Excluded b	section 512, 513, or 514	(e)
1 Program service revenue:	(a) Business	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
-	code	·	- 1000		
		<u> </u>	 	-	
			-		
d	·				
e	l i				
f					
g Fees and contracts from government agencies					.
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments					
4 Dividends and interest from securities			14	8,809.	
5 Net rental income or (loss) from real estate.					
a Debt-financed property				_	
b Not debt-financed property		<u></u>			
6 Net rental income or (loss) from personal					
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other			1.0	10 001	
than inventory	-		18	10,891.	
9 Net income or (loss) from special events0 Gross profit or (loss) from sales of inventory					
1 Other revenue:					* *** **
b		·			
C			1		· · · · · · · · · · · · · · · · · · ·
			 	•	
		·	+ +		
d e		0		19,700.	(
e 2 Subtotal. Add columns (b), (d), and (e)		0		19,700.	
d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total Add line 12, columns (b), (d), and (e)		0			
d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculation	ns)			13	19,700
d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculation Part XVI-B Relationship of Activit	ns)	mplishment of I	Exempt P	13	19,700
d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculation Part XVI-B Relationship of Activit Line No Explain below how each activity for whice	ies to the Acco	mplishment of I	Exempt P	13	19,700
d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculation Part XVI-B Relationship of Activit	ies to the Acco	mplishment of I	Exempt P	13	19,700
d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculation Part XVI-B Relationship of Activit Line No Explain below how each activity for whice	ies to the Acco	mplishment of I	Exempt P	13	19,700
d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculation Part XVI-B Relationship of Activit Line No Explain below how each activity for whice	ies to the Acco	mplishment of I	Exempt P	13	19,700
d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculation Part XVI-B Relationship of Activit Line No Explain below how each activity for whice	ies to the Acco	mplishment of I	Exempt P	13	19,700
d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculation Part XVI-B Relationship of Activit Line No Explain below how each activity for whice	ies to the Acco	mplishment of I	Exempt P	13	19,700
d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculation Part XVI-B Relationship of Activit Line No Explain below how each activity for whice	ies to the Acco	mplishment of I	Exempt P	13	19,700
d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculation Part XVI-B Relationship of Activit Line No Explain below how each activity for whice	ies to the Acco	mplishment of I	Exempt P	13	19,700
d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculation Part XVI-B Relationship of Activit Line No Explain below how each activity for whice	ies to the Acco	mplishment of I	Exempt P	13	19,700
d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculation Part XVI-B Relationship of Activit Line No Explain below how each activity for whice	ies to the Acco	mplishment of I	Exempt P	13	19,700
d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculation Part XVI-B Relationship of Activit Line No Explain below how each activity for whice	ies to the Acco	mplishment of I	Exempt P	13	19,700
d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculation Part XVI-B Relationship of Activit Line No Explain below how each activity for whice	ies to the Acco	mplishment of I	Exempt P	13	19,700
d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculation Part XVI-B Relationship of Activit Line No Explain below how each activity for whice	ies to the Acco	mplishment of I	Exempt P	13	19,700
d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculation Part XVI-B Relationship of Activit Line No Explain below how each activity for whice	ies to the Acco	mplishment of I	Exempt P	13	19,700
d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculation Part XVI-B Relationship of Activit Line No Explain below how each activity for whice	ies to the Acco	mplishment of I	Exempt P	13	19,700
d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculation Part XVI-B Relationship of Activit Line No Explain below how each activity for whice	ies to the Acco	mplishment of I	Exempt P	13	19,700
d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total Add line 12, columns (b), (d), and (e) 15 See worksheet in line 13 instructions to verify calculation Part XVI-B Relationship of Activit Line No Explain below how each activity for whice	ies to the Acco	mplishment of I	Exempt P	13	19,700
d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculation Part XVI-B Relationship of Activit Line No Explain below how each activity for whice	ies to the Acco	mplishment of I	Exempt P	13	19,700

NONPROFIT CORPORATION

20-8901603

Page 13

Form 990-PF (2010) Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable **Exempt Organizations** Yes No Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? a Transfers from the reporting foundation to a noncharitable exempt organization of: X (1) Cash 1a(1) X (2) Other assets 1a(2) **b** Other transactions: (1) Sales of assets to a noncharitable exempt organization 1b(1) Х (2) Purchases of assets from a noncharitable exempt organization 1b(2) (3) Rental of facilities, equipment, or other assets 1b(3) (4) Reimbursement arrangements 1b(4) (5) Loans or loan guarantees 1b(5) X X (6) Performance of services or membership or fundraising solicitations 1b(6) c Sharing of facilities, equipment, mailing lists, other assets, or paid employees d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (a) Line no (b) Amount involved (c) Name of noncharitable exempt organization (\mathbf{d}) Description of transfers, transactions, and sharing arrangements N/A 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes X No b If "Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge Sign VΡ Here Signature of officer or trustee Title Print/Type preparer's name Preparer's signature Check PTIN self- employed Paid JOEL ASH Preparer Firm's name ► ASH & PARSONT Firm's EIN ▶ **Use Only** Firm's address ▶ 122 EAST 42ND STREET, SUITE 1507

Form **990-PF** (2010)

212-953-1250

Phone no.

NEW YORK, NY 10168-1599

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

Department of the Treasury Internal Revenue Service

Organization type (check one)

Schedule of Contributors

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

OMB No 1545-0047

2010

Name of the organization
HOLZER FAMILY FOUNDATION, A NEW JERSEY
NONPROFIT CORPORATION

Employer identification number

20-8901603

Filers of:	Section:
Form 990 or 990-EZ	501(c)() (enter number) organization
	4947(a)(1) nonexempt charitable trust not treated as a private foundation
	527 political organization
Form 990-PF	X 501(c)(3) exempt private foundation
	4947(a)(1) nonexempt charitable trust treated as a private foundation
	501(c)(3) taxable private foundation
· •	n is covered by the General Rule or a Special Rule. (c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions
General Rule	
-	tion filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one mplete Parts I and II.
Special Rules	
509(a)(1) and 17	01(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections (70(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1 Complete Parts I and II
aggregate contr	01(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, ributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or of cruelty to children or animals. Complete Parts I, II, and III
contributions fo If this box is che purpose Do no	01(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, or use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000 ecked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., to complete any of the parts unless the General Rule applies to this organization because it received nonexclusively able, etc., contributions of \$5,000 or more during the year
but it must answer "No"	n that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2010)

Name of organization

HOLZER FAMILY FOUNDATION, A NEW JERSEY

Employer identification number 20-8901603

NONPROFIT CORPORATION

Parti	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	WILLIAM HOLZER 23 NORTH SADDLE BROOK DRIVE HOHOKUS, NJ 07423	\$270,361.	Person X Payroll
(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 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 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 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 Payroll Noncash (Complete Part II if there is a noncash contribution)

Page

Name of organization

Employer identification number

of

HOLZER FAMILY FOUNDATION, A NEW JERSEY NONPROFIT CORPORATION

20-8901603

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
3453 12-23-	10	Schedule B (Form (990, 990-EZ, or 990-PF) (

of Part III

Name of organization Employer identification number HOLZER FAMILY FOUNDATION, A NEW JERSEY NONPROFIT CORPORATION 20-8901603 Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations aggregating Part III more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year (Enter this information once See instructions) > \$ (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

Part IV Capital Gair	<u>is and Losses for Tax on Investment Inc</u>	om <u>e</u>		
, (8) List and describe the kind(s) of propert 2-story brick warehouse; or common sto	y sold, e.g., real estate,	(b) How acquire P - Purchase D - Donation	(c) Date acquired (d) Date sold (mo., day, yr.)
	RRICK GOLD		P	10/19/0710/01/1
	RRICK GOLD		P	10/19/0702/24/1
c 600 SHS GA	MMON GOLD		P	12/31/07/03/30/1
	NALY CAPITAL		P	08/22/08/09/23/1
	MER HOLDINGS		P	04/03/0902/24/1
	RKET SECTORS ETF A		P	04/15/0907/22/1
	SHS DWS INT'L FUND	-S REDEEMED	P	VARIOUS 03/29/1
<u>h</u>				
<u> </u>				
 k				-
	· · · · · · · · · · · · · · · · · · ·	1000		
n				
0				
(e) Gross sales pri	ce (f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(e)	h) Gain or (loss) plus (f) minus (g)
	405.	20,780.		2,625
	886.	8,312.	·	<426
	943.	4,772.		171
	402.	4,313.		1,089
	335.	2,798.	· · · · · · · · · · · · · · · · · · ·	1,537
	724. 759.	10,739. 31,849.		2,985 2,910
g 34, h	7 3 3 .	31,849.		2,910
<u></u> 				
i				
k				
1				
m				
<u>n</u>	<u> </u>			
0		11 11 6 11 12 12 12 12		
Complete only for ass	ets showing gain in column (h) and owne		(I) Li	osses (from col (h)) s of col. (h) gaın over col. (k),
(i) F.M.V as of 12/3	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any		not less than "-0-")
<u>a</u>				2,625
<u>b</u>				<426
<u>C</u>				171
<u>d</u>				1,089 1,537
<u>e</u>				2,985
g		1-		2,910
h			 	2/320
1				
k				
1				
<u>m</u>				
n				
0				
2 Capital gain net income			2	10,891
3 Net short-term capital g if gain, also enter in Pa If (loss), enter "-0-" in P		(5) and (6)		N/A

FORM 990-PF DIVIDENT	DS AND	INTER	EST FROI	1 SECUI	RITIES	STATEMENT	1
SOURCE		GROSS	AMOUNT		ITAL GAINS IVIDENDS	COLUMN (A AMOUNT)
LAZARD CAPITAL	•		8,809		0.	8,8	09.
TOTAL TO FM 990-PF, PART I, I	LN 4		8,809		0.	8,8	09.
FORM 990-PF		TAX	ES			STATEMENT	2
DESCRIPTION	EXPE	A) NSES BOOKS			(C) ADJUSTED NET INCOM		
FOREIGN TAXES		269.		269.			0.
POREIGN TAXES							
TO FORM 990-PF, PG 1, LN 18		269.		269.			0.
-	0		XPENSES	269.		STATEMENT	3
TO FORM 990-PF, PG 1, LN 18	EXPE		(B NET IN) /EST-	(C) ADJUSTEI NET INCOM	(D) CHARITA	3 BLE
TO FORM 990-PF, PG 1, LN 18 =	EXPE	THER E	(B NET IN) /EST-	ADJUSTEI	(D) CHARITA	3 BLE
TO FORM 990-PF, PG 1, LN 18 = FORM 990-PF DESCRIPTION	EXPE	THER E. A) NSES BOOKS	(B NET IN) /EST- NCOME	ADJUSTEI	(D) CHARITA	3 BLE ES
TO FORM 990-PF, PG 1, LN 18 FORM 990-PF DESCRIPTION INVESTMENT EXPENSES	EXPE PER	THER E. A) NSES BOOKS 210.	(B NET IN) /EST- ICOME 210.	ADJUSTEI	(D) CHARITA	3 BLE ES
TO FORM 990-PF, PG 1, LN 18 FORM 990-PF DESCRIPTION INVESTMENT EXPENSES TO FORM 990-PF, PG 1, LN 23	EXPE PER	THER E. A) NSES BOOKS 210.	(B NET IN MENT II	7EST- NCOME 210.	ADJUSTEI	(D) CHARITA ME PURPOS	3 BLE ES 0.
TO FORM 990-PF, PG 1, LN 18 FORM 990-PF DESCRIPTION INVESTMENT EXPENSES TO FORM 990-PF, PG 1, LN 23 FORM 990-PF	EXPE PER	THER E. A) NSES BOOKS 210.	(B NET IN MENT II	7EST- NCOME 210.	ADJUSTEI NET INCOM	(D) CHARITA ME PURPOS STATEMENT FAIR MARKE	BLE ES 0. 0.

Holzer Family Foundation, a New Jersey Nonprofit Corporation

Tax Year 2010

EIN: 20-8901603

Security	Shares	Date Bought	Cost	<u>FMV</u>
Annaly Capital Mgmt	600	08/22/2008	8,626 67	10,752 00
Applied Materials Inc	1,000	10/18/2010	12,025 00	14,050 00
ASA Limited	470	10/18/2010	15,374 25	16,313 70
Astrazeneca ORD USD	200	4/9/2010	9,064 23	9,125 41
Barrick Gold	500	10/19/2007	20,780 42	26,590 00
Beckman Coulter	140	07/27/2009	8,333 00	10,532 20
Beckman Coulter	50	7/28/2010	2,367 50	3,761.50
Bunge Ltd	125	06/30/2009	7,567 50	8,190 00
Bunge Ltd	50	10/1/2010	3,058 00	3,276 00
Bunge Ltd	60	10/18/2010	3,739 00	3,931 20
Central Fund of Canada LTD CI-A	1,200	10/4/2010	20,172 88	24,876 00
CME GRoup	25	06/30/2009	7,784 00	8,043 75
Cresud SACIF y A	600	12/10/2010	11,382 94	11,388 00
Crucell NV	450	10/07/2009	9,882 73	14,209 44
EMC Corp - Mass	500	07/22/2009	7,165 00	11,450 00
EMC Corp - Mass	250	03/17/2010	4,715 00	5,725 00
Fresenius AG DM	160	07/30/2009	7,597.95	13,507 27
Gammon Gold	2,650	12/31/2007	21,074 63	21,703 50
Huabao Int'i	5,000	10/06/2008	3,899.16	8,070 00
Shares MSCI Japan Index Fund	850	4/5/2010	8,992 50	9,273 50
Japan Equity Fund Japan Equity Fund	2,000	04/09/2009	8,485.00	12,260 00
Johnson & Johnson	1,900 150	05/14/2009	8,731 37	11,647 00
Market Sectors ETF AgriBusiness	160	08/04/2009	9,124 00	9,277 50
Market Sectors ETF AgriBusiness	50	9/23/2010 10/18/2010	7,603.58 2,504 00	8,566 40 2,677 00
Matsui Securities Co Ltd	1,400	02/01/2010	9,683 81	2,677 00 9,950 72
Matsui Securities Co Ltd	1,000	12/13/2010	6,692 04	7,107 70
MFA Mtg	2,000	08/22/2008	12,240.00	16,320 00
Mizuho Financial Group	5,000	4/9/2010	9,812 27	9,407 21
Mizuho Financial Group	5,000	12/24/2010	9,176 11	9,407 22
Monsanto	100	06/30/2009	7,471.00	6,964 00
Nestle SA	250	07/21/2009	10,020 00	14,684 50
Nestle SA	55	10/19/2010	3,044 30	3,222 14
Novartis AG	200	10/20/2009	10,462.00	11,790 00
Novartis AG	60	10/18/2010	3,589.00	3,537 00
Oracle	350	06/30/2009	7,499 97	10,955 00
Oracle	200	10/18/2010	5,737 98	6,260 00
Qiagen NV Euro	400	4/19/2010	9,601.12	7,820 00
Qiagen NV Euro	150	9/23/2010	2,822.49	2,932 50
Qiagen NV Euro	430	10/18/2010	8,003 66	8,406.50
SPDR Gold Tr Gold Shs	70	06/01/2009	6,748 90	9,710 40
SPDR Gold Tr Gold Shs	80	10/14/2009	8,381 20	11,097 60
Swisscom AG	25	7/23/2010	9,419 94	10,997 27
Swisscom AG	12	10/18/2010	4,972 00	5,278 69
Teva Pharmaceutical Teva Pharmaceutical	210	08/11/2009	10,887 50	10,947 30
	70	10/18/2010	3,794 90	3,649 10
Vanguard Int'l Equity Emerging Markets ETF	250	10/20/2009	10,170 00	12,036 50
Vanguard Int'l Equity Emerging Markets ETF Vanguard Sector Index Energy ETF	275	10/18/2010	13,099 97	13,240 15
Vanguard Sector Index Energy ETF Vanguard Sector Index Energy ETF	425 100	01/07/2009	30,868 46	42,359 33
Wolters Kluwer NV	675	01/20/2009 11/10/2010	6,545 31 15,276 07	9,966 90 14,811 53
Wumart Stores	5,000	09/08/2008	4,926 09	14,811 53 12,291 00
Zimmer Holdings	175	04/03/2009	6,527 50	9,394 00
Zimmer Holdings	100	10/18/2010	5,036 99	5,368 00
			2,200 00	5,500 00
			482,560.89	579,108 62

FORM 990-PF	OTHER	INVESTMENTS			STAT	EMENT	5
DESCRIPTION		VALUATION METHOD	BOOK V	ALUE		MARKE' ALUE	Т
DWS INT'L VALUE FUND		COST	-	0.			0.
TOTAL TO FORM 990-PF, PART II,	LINE	- 13 =		0.			0.
		CONTRIBUTIONS ING THE YEAR	5		STAT	EMENT	6
RECIPIENT NAME AND ADDRESS		ECIPIENT RELAT AND PURPOSE OF			PIENT	AMOU:	NT
CITY HARVEST 575 8TH AVENUE NEW YORK, NY	NO FO	NE R OPERATIONS		PUBLIC CHARIT		5,0	00.
GRAMEEN FOUNDATION 50 F STREET NW WASHINGTON, DC	NO FO	NE R OPERATIONS		PUBLIC CHARIT		5,0	00.
HOMES FOR OUR TROOPS 37 MAIN STREET TAUNTON, MA	NO FO	NE R OPERATIONS		PUBLIC CHARIT		2,5	00.
LEUKEMIA/LYMPHOMA SOCIETY 1311 MAMARONECK AVENUE WHITE PLAINS, NY	N O FO	NE R OPERATIONS		MEDICA	ΔL	4,0	00.
PAUL ARON SCHOLARSHIP FUND THE CITY COLLEGE NEW YORK, NY				EDUCAT	ANOIT	2,0	00.
AMERICAN JEWISH WORLD SERVICE 45 WEST 36TH STREET NEW YORK, NY 10018	NO FO	NE R OPERATIONS		PUBLIC CHARIT		5,0	00.

HOLZER FÁMILY FOUNDATION, A NEW	JERSEY N	^	20-8901603
SHARSHERET 1086 TEANECK ROAD SUITE 3A TEANECK, NJ 07666	NONE FOR OPERATIONS	MEDICAL	1,000.
ISRAEL FOREST FIRE DISASTER RELIEF 3300 OLD COURT ROAD BALTIMORE, MD 21208	NONE FOR OPERATIONS	PUBLIC CHARITY	1,000.
TOTAL TO FORM 990-PF, PART XV, LII	NE 3A		25,500.

Form **8868**

(Rev January 2011)

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.

• If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box

OMB No 1545-1709

 $\triangleright \mathbf{X}$

Form 8868 (Rev 1-2011)

If yo	u are filing for an Additional (Not Automatic) 3-Month Ex	tension, c	complete only Part II (on page 2 of this	form)		
Do no	complete Part II unless you have already been granted a	ın automa	tic 3-month extension on a previously fi	led Fo	rm 8868	
Electro	onic filing (e-file). You can electronically file Form 8868 if y	ou need a	a 3-month automatic extension of time t	o file (6	6 months for a corp	oration
require	d to file Form 990-T), or an additional (not automatic) 3-mol	nth extens	sion of time. You can electronically file F	orm 8	868 to request an e	xtension
of time	to file any of the forms listed in Part I or Part II with the exc	ception of	Form 8870, Information Return for Tran	sfers /	Associated With Ce	rtaın
Persor	al Benefit Contracts, which must be sent to the IRS in pap	er format	(see instructions) For more details on t	he elec	ctronic filing of this f	form,
	wwwwwwwwwwwwwwwwwwwwwwwwwwwwwwwwwwwwww		,		J	
Part			bmit original (no copies needed)			
A corp	oration required to file Form 990-T and requesting an autor			plete	-	
Part I c	•				•	
	er corporations (including 1120-C filers), partnerships, REM ncome tax returns	ICs, and t	rusts must use Form 7004 to request an	exten	ision of time	<u> </u>
Туре	r Name of exempt organization			Emp	loyer identification	number
print	HOLZER FAMILY FOUNDATION, A	A NEW	JERSEY		ioyer identinoditori	i ildilibei
	NONPROFIT CORPORATION		V 221222	2	0-8901603	
File by th due date	6	ee instruc	tions		0 0301003	
filing you	23 NORTH SADDLE BROOK DRIVE					
return Se			ress see instructions			
	HOHOKUS, NJ 07423	,, o.g., aaa	roos, see mendenone			
	1					
Enter t	he Return code for the return that this application is for (file	a separa	te application for each return)			0 4
						<u> </u>
Applic	ation	Return	Application			Return
Is For		Code	Is For			Code
Form 9	90	01	Form 990-T (corporation)			07
Form 9	90-BL	02	Form 1041-A			08
Form 9		01	Form 4720			09
Form 9		04	Form 5227			10
	90-T (sec 401(a) or 408(a) trust)	05	Form 6069			11
	90-T (trust other than above)	06	Form 8870			12
	TAXPAYER					<u>''</u>
• The	books are in the care of ▶ 23 NORTH SADDLE	BRO	OK DRIVE - HOHOKUS.	NJ	07423	
	phone No ► 201-652-6459		FAX No D		<u> </u>	
	e organization does not have an office or place of business	s in the Ur	· · · · · · · · · · · · · · · · · · ·			
	is is for a Group Return, enter the organization's four digit			ıs ıs fo	r the whole aroup. a	check this
box >)					
1 1	request an automatic 3-month (6 months for a corporation					
			tion return for the organization named a		The extension	
13	s for the organization's return for	J	3			
)	X calendar year 2010 or					
•	tax year beginning	, an	d ending			
					_	
2	f the tax year entered in line 1 is for less than 12 months, c	heck reas	on Initial return Fina	al retur	n	
	Change in accounting period					
3a +	f this application is for Form 990-BL, 990-PF, 990-T, 4720, o	or 6069, e	nter the tentative tax, less any			
<u>r</u>	onrefundable credits. See instructions		•	3a	S S	100.
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and						
	stimated tax payments made Include any prior year overp	-		3ь	s 1	,947.
	Balance due, Subtract line 3b from line 3a Include your pa					
	y using EFTPS (Electronic Federal Tax Payment System)	-	•	3с	\$	0.
Cautio	n. If you are going to make an electronic fund withdrawal v	vith this Fo	orm 8868, see Form 8453 EO and Form	8879-	EO for payment inst	

LHA

For Paperwork Reduction Act Notice, see Instructions.