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%orm **990-PF**

Department of the Treasury

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 čalendar year 2010, or tax year beginning , and ending								
G Check all that apply: Initial return			_					
_			Amended return		Address chang	ge 🔲	Name change	
Na	ne of	foundation					A Employer identification	number
ŀ		=	_	KER	CHARITABLE		22 2400027	
Nur	obor o	FOUNDATION nd street (or P O box number of		stroot	addraes)	Room/suite	22-2488837	
INUI	iibei a	500 SOUTH			addressy	1908	B Telephone number (561) 750-	4064
Cut	or to	own, state, and ZIP code	OCEAN BD	<u>v D .</u>		1300	C If exemption application is p	
"	, 01 10	BOCA RATON	N. FL 33	432			D 1 Foreign organizations	
H (heck				empt private foundation		2 Foreign organizations me check here and attach co	eting the 85% test,
] Se	ction 4947(a)(1) nonexem			Other taxable private founda	ition	E If private foundation sta	
I Fa	air ma	rket value of all assets at (end of year J Ac	counti	ng method: X Cash	Accrual	under section 507(b)(1)	
•		Part II, col (c), line 16)		Ot	her (specify)		F If the foundation is in a	
	\$, colu	mn (d) must be on cash t	oasis)	under section 507(b)(1)	
<u>Pa</u>	art I	Analysis of Revenue and (The total of amounts in columecessarily equal the amount	ımns (b), (c), and (d) may	not	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(0) Disbursements for charitable purposes (cash basis only)
	1	Contributions, gifts, gran			3,425.		N/A	
	2	Check X if the foundation		h B	2 - 1 -			
	3	cash investments			8,513.	8,513.		STATEMENT 1
	4	Dividends and interest fro	om securities		37,777.	37,777.		STATEMENT 2
	l	Gross rents Net rental income or (loss)					<u> </u>	-
	١.	· -	assets not on line 10		0.			
Je	6a Net gain or (loss) from sale of assets not on line 10 B Gross sales price for all B assets on line 6a 30,000.							
Revenue	7	Capital gain net income (from				0.	_	
ď	8	Net short-term capital ga	ın				•	
	9	Income modifications Gross sales less returns	1					
	10a	and allowances						
	1	Less Cost of goods sold					· · · · · · · · · · · · · · · · · · ·	
	l .	Gross profit or (loss)						
	11 12	Other income Total Add lines 1 through	nh 11		49,715.	46,290.		
	13	Compensation of officers, dire			0.	0.		0.
	14	Other employee salaries						
	15	Pension plans, employee	benefits					
nses	16a	Legal fees						
Expen	Ь	Accounting fees	STMT	3	3,575.	_150.		3,425.
ŭ		Other professional fees						
īţ.	17	Interest	OMM.	4	925.	025		0.
and Administrative	18	Taxes	STMT	4	945.	925.		
Ē	19 20	Depreciation and depletic Occupancy RE	CEIVED	- 1				
Agn	21	Travel, conferences, and		اي		-	~	
P	22	Printing and publications	16 2011	IRS-OSC				
	23	Other expenses	10 5011	ξ				
aŧi	24	Total operating and adir	inistrative	' =		•		
Operating		expenses. Add lines 191	hrough 23 U I		4,500.	1,075.		3,425.
• •		Contributions, gifts, gran	•		49,023.			49,023.
	26	Total expenses and disb	oursements.		F2 F22	1 085		F0 440
	C=	Add lines 24 and 25	. 10.		53,523.	1,075.		52,448.
		Subtract line 26 from line			-3,808.			
		Net investment income (3	3,000.	45,215.		
	1	Adjusted net income (if n				20,220	N/A	
0235 12-0		LHA For Paperwork R		e, see	the instructions			Form 990-PF (2010)

4

FOUNDATION TRUST

22-2488837

Page 2

	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of	year
<u> </u>	art	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			
	ን	Savings and temporary cash investments	40,007.	27,700.	27,700.
	3	Accounts receivable ►			
		Less: allowance for doubtful accounts ▶			
	4	Pledges receivable ►		-	
	•	Less: allowance for doubtful accounts ▶			
	5	Grants receivable	- -		
	6	Receivables due from officers, directors, trustees, and other		-	
	١,	1			
	,	disqualified persons			
	′	Other notes and loans receivable			
		Less: allowance for doubtful accounts			
ets	8	Inventories for sale or use	· -		
Assets	9	Prepaid expenses and deferred charges	45.010	45.040	<u> </u>
Q	10a	Investments - U.S. and state government obligations STMT 5	47,918.	47,918.	54,883.
	Ь	Investments - corporate stock STMT 6	563,494.	571,993.	1,075,246.
	C	Investments - corporate bonds			
	11	Investments - land, buildings, and equipment basis			
		Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other STMT 7	155,000.	155,000.	160,475.
	14	Land, buildings, and equipment; basis ▶			
		Less accumulated depreciation			
	15	Other assets (describe ▶			
			***	-	
	16	Total assets (to be completed by all filers)	806,419.	802,611.	1,318,304.
_	17	Accounts payable and accrued expenses	000,413.	00270111	1/310/3011
	l		-		
	18	Grants payable			
Liabilities	19	Deferred revenue			
Ē	20	Loans from officers, directors, trustees, and other disqualified persons			
ia	21	Mortgages and other notes payable			
_	22	Other liabilities (describe)		-	
				_	
_	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here			
		and complete lines 24 through 26 and lines 30 and 31.			
ces	24	Unrestricted	806,419.	802,611.	
Fund Balanc	25	Temporarily restricted			
Ва	26	Permanently restricted			
Б		Foundations that do not follow SFAS 117, check here			
		and complete lines 27 through 31			
ō	27	Capital stock, trust principal, or current funds			
Net Assets	28	Paid-in or capital surplus, or land, bldg., and equipment fund			
Ass	29	Retained earnings, accumulated income, endowment, or other funds			
et/	l	Total net assets or fund balances	806,419.	802,611.	
Z	30	Total net assets of fullo parances	000,413.	002,011.	
		Total Political and and analysis of the decision of the second se	006 410	002 611	
_	31		806,419.	802,611.	
P	art	Analysis of Changes in Net Assets or Fund Ba	alances		
1	Tota	net assets or fund balances at beginning of year - Part II, column (a), line	30		
		st agree with end-of-year figure reported on prior year's return)		1	806,419.
2	•	r amount from Part I, line 27a		2	-3,808.
		r increases not included in line 2 (itemize)		3	0.
		lines 1, 2, and 3		4	802,611.
		eases not included in line 2 (itemize)		5	0.
		**************************************	Jump (h) Jugo 20	6	802,611.
Ď	i ota	I net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	numm (D), ime 30	6	004,011.

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1,195,762. Enter the net value of noncharitable-use assets for 2010 from Part X, line 5 5 Multiply line 4 by line 3 5 49,124. 6 Enter 1% of net investment income (1% of Part I, line 27b)

Enter qualifying distributions from Part XII, line 4 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions

Form **990-PF** (2010)

452.

49,576.

52,448.

Add lines 5 and 6

7

8

MICHAEL & HELEN CYKER CHARITABLE Form 990-PF (2010) FOUNDATION TRUST 22-2488837 Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions) 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) 452. b Domestic foundations that meet the section 4940(e) requirements in Part V, check here **X** and enter 1% 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-) 3 3 Add lines 1 and 2 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 5 5 Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-6 Credits/Payments: a 2010 estimated tax payments and 2009 overpayment credited to 2010 227. 6a 6Ь b Exempt foreign organizations - tax withheld at source c Tax paid with application for extension of time to file (Form 8868) 6c d Backup withholding erroneously withheld 6d 227. 7 Total credits and payments. Add lines 6a through 6d 8 Enter any penalty for underpayment of estimated tax. Check here _____ if Form 2220 is attached 8 225. 9 Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed 9 10 Overpayment, If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 11 Enter the amount of line 10 to be: Credited to 2011 estimated tax Refunded Part VII-A | Statements Regarding Activities Yes No 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in X 1a any political campaign? X b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)? 1b 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 Х c Did the foundation file Form 1120-POL for this year? 1c d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: 0 . (2) On foundation managers. ► \$ (1) On the foundation. > \$ e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. > \$ 2 Has the foundation engaged in any activities that have not previously been reported to the IRS? Х 2 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 X bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes 3 X 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? 4a N/A b If "Yes," has it filed a tax return on Form 990-T for this year? 4b X 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? 5 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? Х X 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 8a Enter the states to which the foundation reports or with which it is registered (see instructions) FLb If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation Х 8b

Form **990-PF** (2010)

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)? If "Yes," complete Part XIV

10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses

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Form **990-PF** (2010)

had not been removed from jeopardy before the first day of the tax year beginning in 2010?

 MICHAEL & HELEN CYKER CH 	ARITABLE			
Form 990-PF (2010) FOUNDATION TRUST			<u> 22-24888:</u>	37 Page 6
Part VII-B Statements Regarding Activities for Which F	orm 4720 May Be F	Required (contin	ued)	
5a During the year did the foundation pay or incur any amount to:				
(1) Carry on propaganda, or otherwise attempt to influence legislation (section			s X No	
(2) Influence the outcome of any specific public election (see section 4955); o	r to carry on, directly or indire		(
any voter registration drive?	_		s X No	1 1
(3) Provide a grant to an individual for travel, study, or other similar purposes		Ye	s X No	
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section			
509(a)(1), (2), or (3), or section 4940(d)(2)?		-	s X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f		(T.)	
the prevention of cruelty to children or animals?			s X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und		n Regulations	37/3	.
section 53.4945 or in a current notice regarding disaster assistance (see instru	•		N/A	ib
Organizations relying on a current notice regarding disaster assistance check h				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr				1 1
expenditure responsibility for the grant?		I∕A ∟ Ye	es L No	
If "Yes," attach the statement required by Regulations section 53 4945				1
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on		[]	
a personal benefit contract?		Ye	es 🗶 No	., ,,,
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?		 '	Sb X
If "Yes" to 6b, file Form 8870			(TET)	
7a At any time during the tax year, was the foundation a party to a prohibited tax s		Ye	es X No	-
b If "Yes," did the foundation receive any proceeds or have any net income attributions. About Officers Directors Truck		nagara Highli		7b
Part VIII Information About Officers, Directors, Trusto Paid Employees, and Contractors	ees, roundation wa	magers, nigni	y	
1 List all officers, directors, trustees, foundation managers and their	compensation.			
	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	and deterred compensation	account, other allowances
HELEN CYKER	TRUSTEE	United 6 7	compandation	
500 SOUTH OCEAN BLVD. APT 1908				
BOCA RATON, FL 33432	0.00	0.	0.	0.
2001 1411011 12 00 10 2	3.00			
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none,	enter "NONE."		
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
(a) Name and address of each employee paid more than \$50,000	devoted to position	(c) Compensation	and deferred compensation	allowances
NONE				
	•			
		1		
Total number of other employees paid over \$50,000				0

MICHAEL & HELEN CYKER CHARITABLE FORM 990-PF (2010) FOUNDATION TRUST		188837 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundatio Paid Employees, and Contractors (continued)	n Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "N	ONE."	
(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		▶ 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical number of organizations and other beneficiaries served, conferences convened, research papers produce		Expenses
1 <u>N/A</u>		
2		
3		
4		
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	s 1 and 2.	Amount
1 N/A		
2		
	1	

▶

All other program-related investments. See instructions.

Total. Add lines 1 through 3

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations,	see 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	1,172,460.
b	Average of monthly cash balances	1b	1,172,460. 41,512.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	1,213,972.
е	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	1,213,972.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	18,210.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,195,762.
6	Minimum investment return Enter 5% of line 5	6	59,788.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part.)	nd certain	
1	Minimum investment return from Part X, line 6	1	59,788.
2a	Tax on investment income for 2010 from Part VI, line 5		
Ь	Income tax for 2010. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	452.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	59,336.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	59,336.
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	59,336.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	52,448.
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:		
a	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	52,448.
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	452.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	51,996.
	Note: The amount on line 6 will be used in Part V, column (h), in subsequent years when calculating whether the foundation	auglifica fo	- the costion

4940(e) reduction of tax in those years.

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, line 7				59,336.
2 Undistributed income, if any, as of the end of 2010				37,330.
a Enter amount for 2009 only			0.	
b Total for prior years:			<u> </u>	
y rotal for prior years.		0.		
3 Excess distributions carryover, if any, to 2010:				······································
a From 2005				
b From 2006				
c From 2007				
d From 2008 9,606.				
e From 2009				
f Total of lines 3a through e	9,606.			
4 Qualifying distributions for 2010 from				
Part XII, line 4: ► \$ 52,448.				
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				52,448.
e Remaining amount distributed out of corpus	0.			_
5 Excess distributions carryover applied to 2010 (If an amount appears in column (d), the same amount must be shown in column (a))	6,888.			6,888.
6 Enter the net total of each column as indicated below:				
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	2,718.			
b Prior years' undistributed income. Subtract	2,710.			
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	i			
be distributed in 2011				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by			ı	
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	2,718.			
O Analysis of line 9:	•			
a Excess from 2006				
b Excess from 2007				
c Excess from 2008 2,718.				
d Excess from 2009				
e Excess from 2010				
•				Farm 000 DE (0010)

a The name, address, and telephone number of the person to whom applications should be addressed:

b The form in which applications should be submitted and information and materials they should include:

c Any submission deadlines:

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

22-2488837 Page 11

3 Grants and Contributions Paid During th		Payment		-
Recipient	If recipient is an individual,			
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year	Or Substantial Contributor	rediplom		
•				
SEE STATEMENT 8				
Total		ļ	▶ 3a	49,023
b Approved for future payment			l Julian	197023
- pp]		
		j		
NONE		İ		
Total			▶ 3b	0
23611 12-07-10			Fo	orm 990-PF (2010

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

Enter gross amounts unless otherwise indicated.	Unitelat	ed business income		ed by section 512, 513, or 514	(e)
,	(a) Business	(b)	(C) Exclu-	(d)	Related or exempt
1 Program service revenue:	Business code	Amount	sion code	Amount	function income
•	Code	-	+		
å		-	1		······
b	-	<u> </u>			
C	-				
d	_		1 1		
e	_			_	
f			1		
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash		··· -·	1		
investments			14	Ω 513	
			14	8,513. 37,777.	
4 Dividends and interest from securities			14	31,111.	
5 Net rental income or (loss) from real estate:			+ +	<u></u>	
a Debt-financed property			1		
b Not debt-financed property			\perp	<u>-</u> .	
6 Net rental income or (loss) from personal					
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory			18		
9 Net income or (loss) from special events			+ - 4		
10 Gross profit or (loss) from sales of inventory			+ +		
			+ +		
11 Other revenue:					
a	-	 	+ +		
b	-				
C					
d			1		
e	_				
		1	.	46,290.	<u> </u>
12 Subtotal. Add columns (b), (d), and (e)		0			
		<u> </u>		13	46,290.
12 Subtotal. Add columns (b), (d), and (e) 13 Total Add line 12, columns (b), (d), and (e)		<u> </u>		13	46,290.
12 Subtotal. Add columns (b), (d), and (e) 13 Total Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.)	to the Ace				46,290.
12 Subtotal. Add columns (b), (d), and (e) 13 Total Add line 12, columns (b), (d), and (e)	to the Acc				46,290.
12 Subtotal. Add columns (b), (d), and (e) 13 Total Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities		omplishment of E	xemp	Purposes	
12 Subtotal. Add columns (b), (d), and (e) 13 Total Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities Line No. Explain below how each activity for which line	come is reported	omplishment of E	xemp	Purposes	
12 Subtotal. Add columns (b), (d), and (e) 13 Total Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities	come is reported	omplishment of E	xemp	Purposes	
12 Subtotal. Add columns (b), (d), and (e) 13 Total Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities Line No. Explain below how each activity for which line	come is reported	omplishment of E	xemp	Purposes	
12 Subtotal. Add columns (b), (d), and (e) 13 Total Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities Line No. Explain below how each activity for which line	come is reported	omplishment of E	xemp	Purposes	
12 Subtotal. Add columns (b), (d), and (e) 13 Total Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities Line No. Explain below how each activity for which line	come is reported	omplishment of E	xemp	Purposes	
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Part	XVII	Information Re Exempt Organi	egarding Transfers To a	and Transactions a	ind Relationsl	nips with Noncha	ritable	е	
1 Die	d the ore		ectly engage in any of the followin	a with any other organization	on described in secti	on 501(c) of	\top	Yes	No
			(3) organizations) or in section 52			011 30 1(0) 01			
			ation to a noncharitable exempt or		izations.				
) Cash	non me reporting rounds	ation to a nononantable exempt of	gumzation of.			1a(1)		x
•) Other	assets					1a(2)		X
	-	sactions:							
		of assets to a noncharitat	ble exempt organization				1b(1)		Х
•	•		ncharitable exempt organization				1b(2)		Х
•	•	l of facilities, equipment, (1b(3)		Х
•	•	oursement arrangements					1b(4)		X
•	•	or loan guarantees					1b(5)		Х
•	•	=	mbership or fundraising solicitation	ons			1b(6)		X_
c St	naring of	facilities, equipment, mai	iling lists, other assets, or paid em	ployees			1c		X
d If	the ansv	ver to any of the above is	"Yes," complete the following sche	edule. Column (b) should alv	ways show the fair n	narket value of the goods,	other as	sets,	
or	services	s given by the reporting fo	oundation. If the foundation receiv	ed less than fair market valu	ie in any transaction	or sharing arrangement, s	how in		
CO	lumn (d) the value of the goods,	other assets, or services received.					_	
(a) Line	no	(b) Amount involved	(c) Name of noncharitable	e exempt organization	(d) Description	of transfers, transactions, and	sharing a	rrangeme	ents
			N/A						
					-				
	-				-				
	-								
					_				
		,				·			
									
	-			<u> </u>	-				
0 - 1-	45 - 6		All officers of with an experience of the same		vantions described				
		•	tly affiliated with, or related to, one		izations described	Г	Yes	. 🔽	No
		emplete the following sch	r than section 501(c)(3)) or in sec	11011 327 *		_	1 163	· LA	_ NO
יו ט	165, 6	(a) Name of org		(b) Type of organization	T	(c) Description of relations	hip		
		N/A		(a) type of a gamean		(-)			
						. <u>.</u>			
			· ·						
		- -	- 						
			e that I have examined this return, include				lief, it is t	rue, com	ect,
Sigr	and o	omplete Declaration of prepar	arer (other than taxpayer or fiduciary) is b	ased on all information of which	preparer has any knowl	edge			
Here		phi	-1 e-	15/1	0/11	TRUSTE	~ے~		
		Signature of officer or tru	ustee	Date	<u> </u>	Title			
	,	Print/Type preparer's na	ame Preparer's s	ignature	Date	Check if PTIN	·		
		RICHARD J.	ECKSTEIN,			self- employed			
Paid		CPA	RICHAR	D J. ECKSTE	05/09/11				
-	arer	Firm's name ► WAL				Firm's EIN ▶			
Use	Only		1 HUNTINGTON AV	ENUE, 8TH F	LOOR				
								17-2	:700

Schedule B (Form 990, 990-EZ,

or 990-PF)
Department of the Treasury

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

MICHAEL & HELEN CYKER CHARITABLE

OMB No 1545-0047

2010

Employer identification number

22-2488837 FOUNDATION TRUST Organization type (check one) Filers of: Section: Form 990 or 990-EZ ____ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor Complete Parts I and II **Special Rules** For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1 Complete Parts I and II. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals Complete Parts I, II, and III contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2 of 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 that it does not meet the 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)

Page 1 of 1 of Part I

Name of organization
MICHAEL & HELEN CYKER CHARITABLE
FOUNDATION TRUST

Employer identification number

22-2488837

Part I	Contributors	(see instructions)
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(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	HELEN CYKER REVOCABLE TRUST	Ayyı eyate contributions	Person X
	500 S. OCEAN BLVD	\$3,425.	Payroll Noncash
	BOCA RATON, FL 33432		(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 Payroli 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)

of

Name of organization

MICHAEL & HELEN CYKER CHARITABLE

22-2488837

Employer identification number

FOUNDATION TRUST

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

Employer identification number

of

Name of organization

MICHAEL & HELEN CYKER CHARITABLE

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	T A	T MDITON	n		

FOUND.	ATION	TRUST
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<u>FOUNDA'</u>	TION TRUST		<u>22-2488837</u>
Part III	Exclusively religious, charitable, etc., in	e columns (a) through (e) and the foots, charitable, etc., contributions of	501(c)(7), (8), or (10) organizations aggregating ollowing line entry. For organizations completing of
(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, a	nd 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
	Transferee's name, address, a	(e) Transfer of gift	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	I
-	Transferee's name, address, a	nd 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, a	nd ZIP + 4	Relationship of transferor to transferee

FORM 990-PF INTEREST ON SAVI	NGS AND TEM	PORARY CASH	INVESTMENTS	STATEMENT 1
SOURCE				AMOUNT
UBS FINANCIAL SERVICES				8,513.
TOTAL TO FORM 990-PF, PART I,	LINE 3, CO	LUMN A		8,513.
FORM 990-PF DIVIDEND	S AND INTER	EST FROM SE	CURITIES	STATEMENT 2
SOURCE	GROSS	C. AMOUNT	APITAL GAINS DIVIDENDS	COLUMN (A) AMOUNT
UBS FINANCIAL SERVICES		37,777.	0.	37,777.
TOTAL TO FM 990-PF, PART I, I	N 4	37,777.	0.	37,777.
FORM 990-PF	ACCOUNTI	NG FEES		STATEMENT 3
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST MENT INCOM		
ACCOUNTING FEES UBS FINANCIAL FEES	3,425. 150.	15	0.	3,425.
TO FORM 990-PF, PG 1, LN 16B	3,575.	15	0.	3,425.
FORM 990-PF	TAX	ES		STATEMENT 4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST MENT INCOM		
FOREIGN TAXES	925.	92	5.	0.
TO FORM 990-PF, PG 1, LN 18	925.	92	5.	0.
=======================================				

FORM 990-PF U.S. AND STATE	/CITY GOVE	ERNMENT	OBLIGATIONS	STATEMENT	5
DESCRIPTION	U.S. GOV'T	OTHER GOV'T	BOOK VALUE	FAIR MARKET	ŗ
50000 FNMA RATE 4.625%	X		47,918.	54,88	33.
TOTAL U.S. GOVERNMENT OBLIGATIONS		-	47,918.	54,88	33.
TOTAL STATE AND MUNICIPAL GOVERNM	ENT OBLIGA	ATIONS			
TOTAL TO FORM 990-PF, PART II, LI	NE 10A	=	47,918.	54,88	33.
FORM 990-PF C	ORPORATE S	STOCK		STATEMENT	6
DESCRIPTION			BOOK VALUE	FAIR MARKET	r
1000 GREAT PLAINS ENERGY 1000 NEW YORK COMMUNITY BANKCORP 1000 SHS. ROYAL DUTCH PETROLEUM C 1047 CLOROX CO 1160 SHS. SANOFI SA SPON ADR 1500 GREAT PLAINS ENERGY 1500 SHRS. HONEYWELL INTL	0.		27,623. 17,825. 49,241. 60,475. 15,562. 38,408. 47,265. 82,731.	19,39 18,89 66,79 66,29 37,39 29,00 79,79	50. 80. 54. 87.

FORM 990-PF O	THER	INVESTMENTS			STATEME	NT	7
DESCRIPTION		VALUATION METHOD	BOOK V	ALUE	FAIR MA VALU		1
30000 GOLDMAN SACHS FIXED RATE C	!D	COST		 .			
4.25% 50000 DISCOVER FIXED RATE CD 3.8	5 9 -	COST	5.0	0.000.	5	1,24	0.
50000 DISCOVER FIXED RATE CD 3.0		COST	٠, ٢	,,,,,,,,,	3	1,24	
CD 4.25%				0,000.		1,93	
25000 MORGAN STANLEY 3.45%		COST		5,000.		6,30	
30000 GE MONEY MARKET 2% ACCRUED INTEREST ON FIXED INCOME	}	COST COST	31	0,000.		9,72	
TOTAL TO FORM 990-PF, PART II, L	.TNF 1	3	15	5,000.	16	0,47	
TOTAL TO TOTAL 330 II, TAKE II, L	111111	.5					_
		CONTRIBUTION	ıs	. <u> </u>	STATEME	NT	8
	RF	CIPIENT RELA	TIONSHIP	RECIP	ТЕМТ		
		CCIPIENT RELA IND PURPOSE C			TUS A	MOUN 10)O.
ALZHEIMERS ASSOCIATION	CHA	IND PURPOSE C		STA	TUS A		00.
RECIPIENT NAME AND ADDRESS ALZHEIMERS ASSOCIATION AVON WALK FOR BREAST CANCER B'NAI TORAH CONGREGATION	CHA	ND PURPOSE C		PUBLIC	TUS A	10	00.
ALZHEIMERS ASSOCIATION AVON WALK FOR BREAST CANCER	CHA	ARITABLE		PUBLIC PUBLIC	TUS A	1,00	00

MICHAEL & HELEN CYKER CHARITABLE	E FOUNDAT		22-2488837
FRIENDS OF DANA FARBER	CHARITABLE	PUBLIC	180.
JEWISH FEDERATION OF PALM BEACH	CHARITABLE	PUBLIC	900.
JEWISH FEDERATION OF SOUTH FLORIDA	CHARITABLE	PUBLIC	5,000.
NEW ENGLAND CHASSIDIC CENTER	CHARITABLE	PUBLIC	100.
RECORDING FOR THE BLIND	CHARITABLE	PUBLIC	100.
TEMPLE BETH ELOHIM	CHARITABLE	PUBLIC	3,167.
TEMPLE EMANUEL	CHARITABLE	PUBLIC	100.
THE CARROLL SCHOOL	CHARITABLE	PUBLIC	1,000.
TORAH ACADEMY	CHARITABLE	PUBLIC	750.
UNITED SYNAGOGUE OF CONSERVATIVE JUDAISM	CHARITABLE	PUBLIC	54.

MICHAEL & HELEN CYKER CHARITAB	LE FOUNDAT		22-2488837
AÍSH PHILADELPHIA	CHARITABLE	PUBLIC	1,000.
AMERICAN LIVER FOUNDATION	CHARITABLE	PUBLIC	1,000.
ASSOC. OF JEWISH CHAPLAINS	CHARITABLE	PUBLIC	500.
BCDS	CHARITABLE	PUBLIC	10,000.
CROHN'S & COLITIS FOUNDATION	CHARITABLE	PUBLIC	5,000.
DANA FARBER CANCER INSTITUTE	CHARITABLE	PUBLIC	5,000.
FLORIDA EMT AND PARAMEDIC	CHARITABLE	PUBLIC	20.
JCC KALEIDOSCOPE ARTS AND SCIENCE	CHARITABLE	PUBLIC	1,500.
NER ISRAEL RABBINICAL COLLEGE	CHARITABLE	PUBLIC	54.
PALM BEACH COUNTY POLICE	CHARITABLE	PUBLIC	25.

MICHAEL & HELEN CYKER CHARITA	ABLE FOUNDAT		22-2488837
PLAY FOR PINK	CHARITABLE	PUBLIC	100.
SOLOMON SCHECHTER DAY SCHOOL	CHARITABLE	PUBLIC	5,000.
TEMPLE BETH AVODAH	CHARITABLE	PUBLIC	36.
THE GLAUCOMA FOUNDATION	CHARITABLE	PUBLIC	500.
UNITED CEREBRAL PALSY	CHARITABLE	PUBLIC	100.
TOTAL TO FORM 990-PF, PART XV,	LINE 3A		49,023.