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Form 990-PF

Department of the Treasu

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

Inter	na! Re	evenue Service Not	te The foundation may	be able to use a copy of this	return to satisfy state repo	rting requirements	
For	cale	ndar year 2010, or tax year	beginning		, and ending		
G	Chec	k all that apply	nitial return	Initial return of a fo	ormer public charity	Final return	<u> </u>
		<i></i>	Amended return	Address chan	ge	Name change	
Na	me o	f foundation				A Employer identification	number
				MANN FOUNDAT	ION INC	1	
		c/o MICHAEI	L SELIGMANN	·		22-3565747	
Nui	nber a	and street (or P O box number if n		address)	Room/suite	B Telephone number	
		P.O. BOX 96	5			(609)921-1	780
Cit	y or t	own, state, and ZIP code				C If exemption application is p	
		RIPTON, VT	05766			D 1. Foreign organizations	, check here
H_ (Chec	k type of organization 🔲		empt private foundation		Foreign organizations me check here and attach co	eting the 85% test, mputation
L	_ <u>J S</u> €	ection 4947(a)(1) nonexempt	t charitable trust	Other taxable private founda	tion	E If private foundation stat	us was terminated
I Fa	air m	arket value of all assets at en	d of year J Accounti	ng method X Cash	Accrual	under section 507(b)(1)	(A), check here
-		Part II, col. (c), line 16)		her (specify)		F If the foundation is in a 6	60-month termination
_	<u> </u>	-,'	<u></u>	mn (d) must be on cash t	pasis.)	under section 507(b)(1)	(B), check here
P	art I	Analysis of Revenue and (The total of amounts in column	Expenses ns (b), (c), and (d) may not	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements for chantable purposes
	т—	necessarily equal the amounts	ın column (a))	expenses per books	Income	income	(cash basis only)
	1	Contributions, gifts, grants,		187,500.		N/A	
	2	Check X If the foundation is Interest on savings and tempora		401	4.0.5		m+ - +
	3	cash investments		491.	491.		Statement 1
	4	Dividends and interest from	n securities	4,113.	4,113.		Statement 2
	5a	Gross rents			······································		
	6	Net rental income or (loss)			1		d
ē	6a	Net gain or (loss) from sale of as: Gross sales price for all	sets not on line 10				
en	6	assets on line 6a			<u></u>		h d
Revenue	7	Capital gain net income (from Pa	art IV, line 2)		0.		
_	8	Net short-term capital gain		##. 			·
	9	Income modifications Gross sales less returns			······		
	10a	and allowances					
		Less Cost of goods sold					
	l	Gross profit or (loss)			*		
	11	Other income		102 104	1 601		
	12	Total. Add lines 1 through		192,104.	4,604.		0.
	13	Compensation of officers, direct		U •	<u> </u>		
	14	Other employee salaries and	•				
es	15	Pension plans, employee be	enents				
		Legal fees	Stmt 3	3,250.	1,625.	RECEIV	1,625.
xpe	i	Accounting fees	טנוונט	3,230.	1,023.	HE CAN	10
e E	C 17	Other professional fees Interest				10 5001 17	7114 (C)
ativ	18	Taxes	Stmt 4	59.	0.	151 107 17	0.
and Administrative Expens	19	Depreciation and depletion	D CINC T	5,7.6			
nin.	20	Occupancy				11.	
Adn	21	Travel, conferences, and me	eetinas			the second	principles and remain a second
Ď	22	Printing and publications	oomiga				
g	23	Other expenses	Stmt 5	59.	59.		0.
Operating	24	Total operating and admin		55.		-	
era		expenses. Add lines 13 thre		3,368.	1,684.		1,625.
Ö	25	Contributions, gifts, grants	-	65,000.	-,		1,625. 65,000.
	26	Total expenses and disbur					,
		Add lines 24 and 25		68,368.	1,684.		66,625.
	27		2				20,0200
		Excess of revenue over expenses		123,736.			
		Net investment income (if n			2,920.		11 14.: 14.: 14.:
		Adjusted net income (if nega			-,	N/A	
02350)1 '-10	LHA For Paperwork Red		the instructions.		·	Form 990-PF (2010)

c/o MICHAEL SELIGMANN

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p	ari	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of	year
		column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
		Cash - non-interest-bearing	2,316.	1,995.	1,995.
	2	Savings and temporary cash investments	202,231.	325,841.	325,841.
	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			
	ŀ	disqualified persons			
	7	Other notes and loans receivable			
	ŀ	Less allowance for doubtful accounts			
2	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges	····	*	
Ä	10a	Investments - U.S. and state government obligations			····
	b	Investments - corporate stock		<u></u> .,	
	C	Investments - corporate bonds			
		Investments - land, buildings, and equipment basis	. ,,		- -
		Less accumulated depreciation		İ	
	12	Investments - mortgage loans			
		Investments - other Stmt 6	241,814.	234,971.	234,971.
		Land, buildings, and equipment basis			2017571
		Less. accumulated depreciation		İ	
	15	Other assets (describe EXCISE TAX OVERPAID)	210.	181.	181.
	16	Total assets (to be completed by all filers)	446,571.	562,988.	562,988.
		Accounts payable and accrued expenses		002/2003	302/3001
	18	Grants payable			
S	19	Deferred revenue		7,000	
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons		_	
<u></u>		Mortgages and other notes payable		··· ·	
Ĕ		Other liabilities (describe)			
		Other habilities (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.			
Š	24	Unrestricted			
auc		Temporarily restricted			
ā		Permanently restricted			
2		Foundations that do not follow SFAS 117, check here			
2		and complete lines 27 through 31.			
5	27	Capital stock, trust principal, or current funds	467,845.	460,526.	
		Paid-in or capital surplus, or land, bldg , and equipment fund	0.	0.	
ió I	29	Retained earnings, accumulated income, endowment, or other funds	-21,274.	102,462.	
5		Total net assets or fund balances	446,571.	562,988.	
2	50	Total liet dazers of Idiid Dalalices	440,371.	302,300.	
	31	Total liabilities and net assets/fund balances	446,571.	562,988.	
,	ert.			302,700.	
		net assets or fund balances at beginning of year - Part II, column (a), line 3	0		
		t agree with end-of-year figure reported on prior year's return)		1	446,571.
		amount from Part I, line 27a		2	123,736.
		increases not included in line 2 (itemize)		3	0.
		nes 1, 2, and 3		4	570,307.
		ases not included in line 2 (itemize) UNREALIZED LOSS		S 5	7,319.
<u>.]</u>	otal	net assets or fund balances at end of year (line 4 minus line 5) - Part II, col	umn (b), line 30	6	562,988.

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	Losses for Tax on Investmen	nt Income				5747 Tage o	
	e kind(s) of property sold (e g , real estate, se, or common stock, 200 shs MLC Co)	(b) How P - Pu D - Do	rchase	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)		
1a							
b NONE							
<u>C</u>							
d							
<u>e</u>	<u> </u>		<u> </u>		(h) Com or (loss	<u> </u>	
(e) Gross sales price	(e) Gross sales price (i) Depreciation allowed (g) Cost or other basis plus expense of sale				(h) Gain or (loss (e) plus (f) minus		
<u>a</u>		·					
b c							
d							
е							
	n in column (h) and owned by the foundation	on on 12/31/69		(1)	Gains (Col (h) gain	minus	
(i) F M V as of 12/31/69		Excess of col (I) er col (J), if any		còl	(k), but not less tha Losses (from col (n -0-) o r	
a							
b							
C							
d							
е							
2 Capital gain net income or (net capital)	oss) { If gain, also enter in Part I, line		} 2				
3 Net short-term capital gain or (loss) as			$\begin{bmatrix} \\ \end{bmatrix}$				
If gain, also enter in Part I, line 8, colun			,				
If (loss), enter -0- in Part I, line 8 Part V Qualification Unde	r Section 4940(e) for Reduce		<u>, 1 3</u>				
if "Yes," the foundation does not qualify un	942 tax on the distributable amount of any y der section 4940(e) Do not complete this p	part				Yes X No	
1 Enter the appropriate amount in each o	olumn for each year, see instructions befor	re making any entri			1	(d)	
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	Net value of no			Distribution ratio (col (b) divided by col (c))		
2009	24,260.			10,670		.059074	
2008	21,556.			63,387		.046518	
2007	15,718. 20,380.			94,012 76,138		.04280	
2006 2005	35,336			37 , 239		.080816	
	3373301	·		<u> </u>		.261028	
2 Total of line 1, column (d) 3 Average distribution ratio for the 5-year	base period - divide the total on line 2 by 5	5 or by the number	of vears		2	• 201026	
the foundation has been in existence if		o, or by the number	UI years		3	.05220	
4 Enter the net value of noncharitable-use	e assets for 2010 from Part X, line 5				4	434,852	
5 Multiply line 4 by line 3					5	22,702	
6 Enter 1% of net investment income (19	6 of Part I, line 27b)				6	29	
7 Add lines 5 and 6	•				7	22,731	
8 Enter qualifying distributions from Part	XII line 4				8	66,625	
, , ,	7, check the box in Part VI, line 1b, and com	nplete that part usin	g a 1% ta	x rate	<u></u> .		
023521 12-07-10				-	F	orm 990-PF (2010	

X

X

8b

10

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)

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

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

of each state as required by General Instruction G? If "No," attach explanation

UIII	1990-FF (2010) C/O MICHAEL SELIGNANN 22-3303	9/4/	•	rayes
Pa	art VII-A Statements Regarding Activities (continued)		-	
	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of	T		
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11	1	Х
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before		T	
	August 17, 2008?	12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► N/A			
14	The books are in care of ► FOUNDATION Telephone no ► (212)	269	-86	28
	Located at ►C/O JOEL E SAMMET CO., LLP 60 BROAD ST., NEW YORK, ZIP+4 ►10	0004		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here			
	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
	securities, or other financial account in a foreign country?	16		Х
	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			
Pε	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
1a	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? Yes X No			
	(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)	•		
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see page 22 of the instructions)? . N/A	1b	ļ	
	Organizations relying on a current notice regarding disaster assistance check here			
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			
	before the first day of the tax year beginning in 2010?	1c	ļ	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			
	defined in section 4942(j)(3) or 4942(j)(5))			
а	At the end of tax year 2010, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
	before 2010? Yes X No			
	If "Yes," list the years ▶			
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			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach	1		
	statement - see instructions) N/A	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			
2.	Did the foundation hold more than a 20% divest or individual interest in any hydronic action and any time			
34	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? Yes X No			
	• .			
IJ	If "Yes," did it have excess business holdings in 2010 as a result of (1) any purchase by the foundation or disqualified persons after			
	May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of heldings acquired by gift or beginst or (3) the lapse of the 10- 15- or 20-year first phase helding period? (Los Schody o C			
	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.) N/A	25		
A ~		3b 4a		X
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	+44		
IJ	had not been removed from leonardy before the first day of the tax year beginning in 2010?	4h		х
	THE THE PART TRAILORGE HOLD RECORDED TO THE HEAT CAY OF THE CAX VEAL DECIDENT IN ACCIDA	1 4011		

ESTHER AND OTTO SELIGMANN FOUNDATION INC c/o MICHAEL SELIGMANN 22-3565747 Form 990-PF (2010) 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 Yes X No 509(a)(1), (2), or (3), or section 4940(d)(2)? (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for Yes X 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 N/A expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53 4945-5(d). 6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on Yes X No a personal benefit contract? Х 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? N/A 7b b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? Information About Officers, Directors, Trustees, Foundation Managers, Highly **Part VIII** Paid Employees, and Contractors List all officers, directors, trustees, foundation managers and their compensation. (d) Contributions to employee benefit plans and deferred (b) Title, and average hours per week devoted to position (c) Compensation (e) Expense account, other (If not paid, enter -0-) (a) Name and address allowances compensation MICHAEL SELIGMANN SEC'Y./TRUSTEE P.O. BOX 96 RIPTON, VT 05766 0. 0. 0. 0.00 PETER SELIGMANN V.P. / TRUSTEE 320 39TH AVENUE E SEATTLE, WA 98112 0. 0.00 0 0. TREAS. MONICA SELIGMANN TRUSTEE 119 PIERCE ST. EASTON, PA 18042 0.00 0 0 0. KATHERINE SELIGMANN PRESIDENT/TRUSTEE 1900 MOUNTAIN HIGH ROAD WAKE FOREST, NC 27587 0.00 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 (e) Expense account, other (b) Title, and average (a) Name and address of each employee paid more than \$50,000 hours per week devoted to position (c) Compensation allowances NONE

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0

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

Part VIII Information About Officers, Directors, Trustees, Foundat Paid Employees, and Contractors (continued)	ion Managers, Highly	-
3 Five highest-paid independent contractors for professional services. If none, enter	"NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE	1, , , , , , , , , , , , , , , , , , ,	
	-	
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 statistic number of organizations and other beneficiaries served, conferences convened, research papers produ		Expenses
1 DIRECT GRANTS TO EXEMPT ORGANIZATIONS		
		65,000.
2		03,000.
3		
4		
Port IV. R. C		
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lin	nes 1 and 2	Amount
1 N/A		
2		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
All other program-related investments See instructions		
3		
Total, Add lines 1 through 3	>	0.

P	art X Minimum Investment Return (All domestic foundations mu	st complete this part. Fo	reign four	ndations, see	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	439,255
b	Average of monthly cash balances			1b	2,030
C	Fair market value of all other assets			10	189
d	Total (add lines 1a, b, and c)			1d	441,474
е	Reduction claimed for blockage or other factors reported on lines 1a and				
	1c (attach detailed explanation)	е	0.		
2	Acquisition indebtedness applicable to line 1 assets			2	0
3	Subtract line 2 from line 1d			3	441,474
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, s	ee instructions)		4	6,622
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on F	art V, line 4		5	434,852
6	Minimum investment return. Enter 5% of line 5			6	21,743
P	pistributable Amount (see instructions) (Section 4942(j)(3) and foreign organizations check here and do not complete this part)	(j)(5) private operating foun	dations an	d certain	
1	Minimum investment return from Part X, line 6			1	21,743
2a	Tax on investment income for 2010 from Part VI, line 5	<u>!a</u> │	29.		
b	Income tax for 2010 (This does not include the tax from Part VI)	?b			
C	Add lines 2a and 2b	• • • • • • • • • • • • • • • • • • • •		2c	29
3	Distributable amount before adjustments Subtract line 2c from line 1		İ	3	21,714
4	Recoveries of amounts treated as qualifying distributions			4	0
5	Add lines 3 and 4			5	21,714
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 X	il, line 1		7	21,714
P	art XII Qualifying Distributions (see instructions)				
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purpo	ses			66 625
a	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26		٠	1a	66,625 0
b	Program-related investments - total from Part IX-B			1b	<u>U</u>
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	
þ	Cash distribution test (attach the required schedule)			3b	66 605
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and			4	66,625
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investigation.	ment			
	income Enter 1% of Part I, line 27b			5	29.
6	Adjusted qualifying distributions. Subtract line 5 from line 4			6	66,596
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years who	en calculating whether the fo	undation of	qualifies for th	e section

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,				01 51
line 7				21,714.
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		0.		
a From 2005 13,727.	1			
b From 2006				
c From 2007				
d From 2008				
e From 2009 3,786.				
f Total of lines 3a through e	17,513.			
4 Qualifying distributions for 2010 from			······································	······································
Part XII, line 4 ► \$ 66,625.				
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				21,714.
e Remaining amount distributed out of corpus	44,911.			
5 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:				
	62,424.			
a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income Subtract	02,424.			
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	1			
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2005				
not applied on line 5 or line 7	13,727.			
9 Excess distributions carryover to 2011.				
Subtract lines 7 and 8 from line 6a	48,697.			
O Analysis of line 9				
a Excess from 2006				
b Excess from 2007				
c Excess from 2008	•		*	
d Excess from 2009 3, 786.	4			
e Excess from 2010 44,911.				Form 990-PF (2010)

c Any submission deadlines

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

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

c/o MICHAEL SELIGMANN

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3 Grants and Contributions Paid During the Ye	ear or Approved for Future	Payment		
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
· · · · · · · · · · · · · · · · · · ·	or substantial contributor	recipient		
a Paid duning the year AMERICAN DANCE FESTIVAL			GENERAL FUND	10,000.
LOS COCOS			GENERAL FUND	5,000.
KRCB-MOMENTS IN TIME FILM			GENERAL FUND	50,000.
Total			▶ 3a	65,000.
b Approved for future payment			34	337000
None				:
Total	l	1	▶ 3b	0.

Enter gross amounts unless otherwise indicated	Unrelated	business income		ed by section 512, 513, or 514	(e)
	(a)	(b)	(C) Exclu-	(d)	Related or exempt
1 Program service revenue	Business code	Amount	code	Amount	function income
a					
b		<u>-</u>			
C	1 1				
d					
е					
1					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments					491.
4 Dividends and interest from securities					4,113.
5 Net rental income or (loss) from real estate					
a Debt-financed property			T		
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory					
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue					
a					
b					
C	i i				
d					
e					
12 Subtotal Add columns (b), (d), and (e)		0 .		0.	4,604.
13 Total. Add line 12, columns (b), (d), and (e)				13	4,604.
(See worksheet in line 13 instructions to verify calculations)				

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

Line No. ▼				me is repo by providi				A contribute	ed import	antly to	the accomplishm	ent of
3		 	 				E SOL	E PUR	POSE	OF	RAISING	FUNDS
1	FOR	 		CTION			FOUND					
			 	 								
		 	 	 • •						-		
		 	 	 						-		
23621 2-07-10		 	 			· · · - · ·					Fo	rm 990-PF (2

Pa	rt XVII	Information Re Exempt Organ		and Transactions an	d Relationships With Nonch	naritable	•	<u> </u>
1	Did the o		rectly engage in any of the followi	ng with any other organization	described in section 501(c) of		Yes	No
			(3) organizations) or in section 5					
			ation to a noncharitable exempt o	- · · · ·				
	(1) Cast	· -				1a(1)		Х
	(2) Othe					1a(2)		X
h	• •	rsactions						
		s of assets to a noncharital	ble exempt proaptzation			1b(1)		Х
			ncharitable exempt organization			1b(2)		X
	• •	al of facilities, equipment,				1b(3)		Х
	• •	bursement arrangements				1b(4)		Х
	• •	s or loan guarantees				1b(5)		Х
			mbership or fundraising solicitati	ons		1b(6)		Х
	• •		iling lists, other assets, or paid er			10		X
	-		•	· •	ys show the fair market value of the good	s, other ass	ets.	
	or service	es given by the reporting fo	•	ved less than fair market value	in any transaction or sharing arrangemen		ŕ	
(a) Li		(b) Amount involved	(c) Name of noncharitab		(d) Description of transfers, transactions, a	nd shanno ar	rangeme	nts
(-)		(b) / who birth involved	N/A	io oxiding organization	(a) Description of Haristons, Haristonia, E	ino ona ing ui	rangome	
						 		
	-			 				
				······································				
				······································			•	
		·····		· · · · · · · · · · · · · · · · · · ·				
				 				
			· · · · · · · · · · · · · · · · · · ·					-
				······································				
								
	ın section		ly affiliated with, or related to, on than section 501(c)(3)) or in sec edule	ction 527?	tions described	Yes	X] No
		(a) Name of org	anization	(b) Type of organization	(c) Description of relation	nship		
		N/A						
			***		-			
Sig He	and and	complete declaration of prepar	rer (other than taxpayer or fiduciary) is l	based on all information of which pre	PRESIDENT	belief, it is tri	ue, corre	ct,
	<u> </u>	Signature of officer or tru Print/Type preparer's na		Date In	Title Date Check If PTI	N	.	
	parer	JEROME S. Firm's name ► JOE:	GRUBIN WIN	US Juliu!	self- employed Parity Firm's EIN ▶	n DIFZA	26	
Use	Only		·					
		Firm's address ► 60				0.55		_
		l NE	W YORK, NY 1000)4	Phone no 212	<u> -269 -</u>		
						Form 990	-PF/	20101

		_		Page 2
xtension,	complete only Part II and check this b	ох	>	X
			8868.	,
ete only Pa	rt I (on page 1)			
Extensio	of Time. Only file the original (no	copies n	eeded).	
		Empl	loyer identification	number
OUNDA	rion inc			
		2	<u>2-3565747</u>	
see instruc	tions.			
oreign add	ress, see instructions.			
le a separa	te application for each return)			$0 \mid 4$
Return	Application			Return
Code	Is For			Code
01				
02	Form 1041-A			08
03	Form 4720			09
04	Form 5227			10
05	Form 6069			11
Form 990-T (trust other than above) 06 Form 8870				
	EL E SAMMET CO., LLP	60	BROAD ST.	_
0004				
	FAX No. ►			
	ited States, check this box		>	
		nis is foi	the whole group, o	 check this
Group Exe	ited States, check this box			
Group Exe	ited States, check this box			
Group Exe and atta Novem	ited States, check this box memption Number (GEN) If the challest with the names and EINs of allow 15, 2011.	l memb	ers the extension is	
Group Exe	ited States, check this box memption Number (GEN) If the challest with the names and EINs of allow 15, 2011.		ers the extension is	
Group Exe and atta Novem	ited States, check this box memption Number (GEN) If the challest with the names and EINs of allow 15, 2011.	l memb	ers the extension is	
Group Exe and atta Novem	ited States, check this box	l memb	ers the extension is	s for.
Group Exe and atta Novem check reas	ited States, check this box memption Number (GEN) If the challest with the names and EINs of allow 15, 2011.	l memb	ers the extension is	s for.
Group Exe and atta Novem	ited States, check this box	l memb	ers the extension is	s for.
Group Exe and atta Novem check reas omple ies.	ited States, check this box	l memb	ers the extension is	s for.
Group Exe and atta Novem check reas omple ies.	ited States, check this box	Final r	ers the extension is eturn has not ye	et
Group Exe and atta Novem check reas comple ies.	ited States, check this box	l memb	ers the extension is	s for.
Group Exe and atta Novem check reas comple ies. or 6069, e	ited States, check this box	Final r	ers the extension is eturn has not ye	et
Group Exe and atta Novem check reas comple ies. or 6069, e	ited States, check this box	Final ro	ers the extension is eturn has not ye	et 29.
Group Exe and atta Novem check reas check reas omple ies. or 6069, e	ited States, check this box	Final r	ers the extension is eturn has not ye	et
Group Exe and atta Novem check reas check reas comple ies. or 6069, e , enter any allowed as a	ited States, check this box	Final r	ers the extension is eturn has not ye	29.
Group Exe and atta Novem check reas omple ies. or 6069, e , enter any allowed as a ayment with ructions.	ited States, check this box	Final ro	ers the extension is eturn has not ye	et 29.
check reas omple ies. or 6069, e , enter any allowed as a ayment with ructions. ature ar ding accomp	ited States, check this box	Final rounds are a second are a	eturn has not ye	29. 210.
Group Exe and atta Novem check reas check reas comple ies. or 6069, e , enter any allowed as a ayment with ructions. ature ar	ited States, check this box important Number (GEN) If the challest with the names and EINs of alloer 15, 2011, and ending on: Initial return te and accurate return te and accurate return te and accurate return the tentative tax, less any refundable credits and estimated a credit and any amount paid the this form, if required, by using d Verification can you do to the control of the c	Final rounds are a second are a	ers the extension is eturn has not ye \$ f my knowledge and b	29. 210.
	automatic ete only Pa Extension COUNDAT see instruct foreign add le a separat Return Code 01 02 03 04 05 06 d an autom	automatic 3-month extension on a previously filed ete only Part I (on page 1) Extension of Time. Only file the original (no of COUNDATION INC) See instructions. foreign address, see instructions. foreign address, see instructions. The extension of a previously filed the original (no of count in the	Extension of Time. Only file the original (no copies of COUNDATION INC See instructions. Foreign address, see instructions.	automatic 3-month extension on a previously filed Form 8868. ete only Part I (on page 1) Extension of Time. Only file the original (no copies needed). Employer identification 22-3565747 See instructions. foreign address, see instructions. Ile a separate application for each return) Return Application Code Is For 01 02 Form 1041-A 03 Form 4720 04 Form 5227 05 Form 6069 06 Form 8870 d an automatic 3-month extension on a previously filed Form 8868, 2/O JOEL E SAMMET CO., LLP 60 BROAD ST.

(Rev. Janu		Exempt C	Organ	ization Return		OMB No 1545	5-1709
Department of Internal Revea	temal Reve _q ue Service ► File a separate application for each return.					<u> </u>	
 If you ar Do not con Electronic required to of time to f Personal B 	e filing for an Add mplete Part II unle filing (e-file). Yo o file Form 990-T), file any of the form Benefit Contracts,	ess you have already been granted a u can electronically file Form 8868 if yo or an additional (not automatic) 3-mor as listed in Part I or Part II with the exc	ension, on automation need a automation need a automation of er formation of	ort I and check this box complete only Part II (on page 2 of this tic 3 month extension on a previously file a 3-month automatic extension of time to sion of time. You can electronically file Form 8870, Information Return for Tran (see instructions). For more details on the	ed For o file (6 orm 88 sfers A	m 8868. months for a corpo 68 to request an ex ssociated With Cert	tension ain
Part I		3-Month Extension of Time					
Part I only All other co				onth extension · check this box and com			
Type or print	c/o MICH	ND OTTO SELIGMANN F AEL SELIGMANN			_	oyer identification	number
due date for filing your	Number, street, P.O. BOX	and room or suite no. If a P.O. box, se	e instruct	tions.			
return See Instructions.		st office, state, and ZIP code. For a fo	reign add	ress, see instructions.			
Enter the F	Return code for th	e return that this application is for (file	a separat	te application for each return)			0 4
Application	on		Return	Application			Return
Is For			Code 01	Is For			Code
Form 990-	RI		02	Form 990-T (corporation) Form 1041-A			<u>07</u> 08
Form 990-			03	Form 4720			09
Form 990-			04	Form 5227			10
Form 990-	T (sec. 401(a) or 4	08(a) trust)	05	Form 6069			_ 11
Form 990-	T (trust other than		06	Form 8870			12
Telepho	one No.▶ <u>(21</u> rganization does r s for a Group Retu	e of NEW YORK, NY 10 2) $269-8628$ not have an office or place of business rn, enter the organization's four digit 0	0004 in the Un Group Exe	FAX No. Fax No	s is for	the whole group, ch	
is fo	quest an automatic August 15 or the organization X calendar year tax year begin	, 2011 , to file the exemptes return for: 2010 or	t organiza	to file Form 990-T) extension of time unti tion return for the organization named a d ending		The extension	
2 If the	e tax year entered	in line 1 is for less than 12 months, cl unting period	heck reas	on: Initial return Fina	ıl returr	1	
		r Form 990-BL, 990-PF, 990-T, 4720, o . See instructions.	or 6069, e	nter the tentative tax, less any	3a	\$	0.
	- ·	r Form 990-PF, 990-T, 4720, or 6069, its made. Include any prior year overp			3ь	\$	210.

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

c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required,

by using EFTPS (Electronic Federal Tax Payment System). See instructions.

Form 8868 (Rev. 1-2011)

<u>3c</u>

				
Form 990-PF Interest on Sav	ings and Ter	nporary Cash	Investments	Statement 1
Source				Amount
THRU MORGAN STANLEY				491.
Total to Form 990-PF, Part I	, line 3, Co	olumn A		491.
Form 990-PF Dividence	ds and Inter	rest from Se	curities	Statement 2
Source	Gross	C s Amount	apital Gains Dividends	Column (A) Amount
THRU MORGAN STANLEY		4,113.	4,113.	
Total to Fm 990-PF, Part I,	ln 4	4,113.	0.	4,113.
Form 990-PF	Accounti	ng Fees		Statement 3
Description	(a) Expenses Per Books	(b) Net Invest ment Incom	_	
ACCOUNTING	3,250.	1,62	5.	1,625.
To Form 990-PF, Pg 1, ln 16b	3,250.	1,62	5.	1,625.
Form 990-PF	Tax	ces		Statement 4
Description	(a) Expenses Per Books	(b) Net Invest ment Incom		
NEW JERSEY TAX FEDERAL EXCISE	30 . 29 .		0.	0.
To Form 990-PF, Pg 1, ln 18	59.		0.	0.

Form 990-PF	Other Expenses			Statement 5		
Description	(a) Expenses Per Books	(b) Net Inve		(c) Adjusted Net Incom		
BANK CHARGES AND FEES	59.		59.		0.	
To Form 990-PF, Pg 1, ln 23	59.		59.		0.	
Form 990-PF	Other Inv	estments		*	Statement 6	
Description		luation ethod	Вос	ok Value	Fair Market Value	
2,946.382 FIRST EAGLE FUND OF AMERICA 1,000 ROCHE HOLDINGS LTD 40 CORNING INC 10 GIVAUDAN		FMV FMV FMV FMV		76,790. 146,610. 773. 10,798.	76,790. 146,610. 773. 10,798.	
Total to Form 990-PF, Part II	i, line 13			234,971.	234,971.	
Form 990-PF	Part XV - L of Foundati		ers		Statement	

Name of Manager

MICHAEL SELIGMANN PETER SELIGMANN MONICA SELIGMANN KATHERINE SELIGMANN