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Form 990-PF

Department of the Treasury

For calendar year 2010, or tax year beginning

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

, and ending

20**10**

G Check all that apply Initial return Initial return of a former public charity ☐ Final return Amended return Address change □ Name change Name of foundation A Employer identification number The La Vida Feliz Foundation 26-1622021 Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number (see page 10 of the instructions) c/o Foundation Source, 501 Silverside Road 123 (800) 839-1754 City or town, state, and ZIP code C If exemption application is pending, check here Wilmington 19809-1377 D 1 Foreign organizations, check here X Section 501(c)(3) exempt private foundation H Check type of organization 2. Foreign organizations meeting the 85% test Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation check here and attach computation If private foundation status was terminated Fair market value of all assets at end J Accounting method X Cash Accrual under section 507(b)(1)(A), check here of year (from Part II, col (c), Other (specify) If the foundation is in a 60-month termination line 16) ▶ \$ (Part I, column (d) must be on cash basis under section 507(b)(1)(B), check here 350,382,153 Part I Analysis of Revenue and Expenses (The total of (d) Disbursements (a) Revenue and (b) Net investment (c) Adjusted net for charitable amounts in columns (b), (c), and (d) may not necessarily equal expenses per income ıncome purposes the amounts in column (a) (see page 11 of the instructions)) books (cash basis only) Contributions, gifts, grants, etc., received (attach schedule) 22,000,000 Check If the foundation is not required to attach Sch B 3 Interest on savings and temporary cash investments Dividends and interest from securities 1,023,392 1,023,392 5 a Gross rents b Net rental income or (loss) 6 a Net gain or (loss) from sale of assets not on line 10 2.712.695 **b** Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2) 2,712,695 Net short-term capital gain Income modifications 10 a Gross sales less returns and allowances b Less Cost of goods sold c Gross profit or (loss) (attach schedule) 11 Other income (attach schedule) 12 Total. Add lines 1 through 11 25,736,087 3,736,087 13 Compensation of officers, directors, trustees, etc Expenses 14 Other employee salaries and wages 15 Pension plans, employee benefits 544 16 a Legal fees (attach schedule) 544 b(Accounting-fees (attach schedule) Administrative c Other professional rees (attach-schedule) 17 Interest Taxes (attach schedule) (see page 14 of the instructions) 18 39,000 Depreciation (attach schedule) and depletion 19 20 Occupancy-Trave conferences and meetings 21 Operating and 22 Printing and publications 23 Other expenses (attach schedule) 146,750 146,750 24 Total operating and administrative expenses. Add lines 13 through 23 186,294 544 146,750 14,077,250 25 Contributions, gifts, grants paid 14,077,250 26 Total expenses and disbursements Add lines 24 and 25 14,263,544 544 14,224,000 27 Subtract line 26 from line 12 11,472,543 a Excess of revenue over expenses and disbursements **b** Net investment income (if negative, enter -0-) 3,735,543 c Adjusted net income (if negative, enter -0-)

For Paperwork Reduction Act Notice, see page 30 of the instructions.

Form **990-PF** (2010)

Da	4 11	Balance Sheets Attached schedules and amounts in the description column	Beginning of year		End o	f year
	rt II	should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value		(c) Fair Market Value
	1	Cash—non-interest-bearing				-
	2	Savings and temporary cash investments	304,733,024	187,393,	324	187,393,324
	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				
		disqualified persons (attach schedule) (see page 15 of the				
	_	instructions)				
	7	Other notes and loans receivable (attach schedule)				
Assets		Less allowance for doubtful accounts				
SS	8	Inventories for sale or use				
Ā	9	Prepaid expenses and deferred charges			-	
	_	a Investments—U S and state government obligations (attach schedule)		60.240	E 40	61 846 600
		b Investments—corporate stock (attach schedule)		60,349,	540	61,846,690
		c Investments—corporate bonds (attach schedule) .			-	
	11	Investments—land, buildings, and equipment basis				
	42	Less accumulated depreciation (attach schedule)				
	12 13	Investments—mortgage loans	16,095,194	93,807	000	101,142,139
	14	Investments—other (attach schedule)				
	14	_				
	45	Less accumulated depreciation (attach schedule)				
	15 16	Other assets (describe			-	
	10	Total assets (to be completed by all filers—see the instructions. Also, see page 1, item I)	320,828,218	341,550	761	350,382,153
	17	Accounts payable and accrued expenses	320,020,210	341,330	701	330,362,133
	18	Grants payable				
es	19	Deferred revenue				
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons				
ā	21	Mortgages and other notes payable (attach schedule)				
Ξ	22	Other liabilities (describe Bank Accounting Error)		9,250	000	
	23	Total liabilities (add lines 17 through 22)	0	9,250		
			Ŭ	0,200	,000	
S		Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.				
9	24	Unrestricted				
alances	25					
Ba	26	Temporarily restricted Permanently restricted				
9	-0	Foundations that do not follow SFAS 117, check here	i ·			
ä	l	and complete lines 27 through 31.				
ř	27	Capital stock, trust principal, or current funds .				
Net Assets or Fund	28	Paid-in or capital surplus, or land, bldg, and equipment fund				
set	29	Retained earnings, accumulated income, endowment, or other funds	320,828,218	332,300	761	
ZS.	30	Total net assets or fund balances (see page 17 of the	,,			
et/		instructions)	320,828,218	332,300	<u>,76</u> 1	
ž	31	Total liabilities and net assets/fund balances (see page 17				
	<u></u>	of the instructions)	320,828,218	341,550	,761	
Pa	rt III	Analysis of Changes in Net Assets or Fund Balances				
1		net assets or fund balances at beginning of year—Part II, column (a), line	30 (must agree with			
	end-	of-year figure reported on prior year's return)		L	1	320,828,218
2		r amount from Part I, line 27a		Į.	2	11,472,543
3		***************************************		 	3	
4		lines 1, 2, and 3		Ļ	4	332,300,761
5		eases not included in line 2 (itemize) ▶			5	
6	Total	I net assets or fund balances at end of year (line 4 minus line 5)—Part II, c	olumn (b), line 30		6	332,300,761

(a) List and describe the k	Ind(s) of property sold (e.g., real esta or common stock, 200 shs MLC Co	te,	it incor	(b) How acquired P—Purchase D—Donation		Date acquired o , day, yr)	(d) Date sold (mo , day, yr)			
1a 16,095 shs Acuity Fund Ltd				P		4/1/2009	7/1/2010			
b										
С										
<u>d</u>										
_e										
(e) Gross sales pnce	(f) Depreciation allowed (or allowable)			r other basis inse of sale		(h) Gain or (loss) (e) plus (f) minus (g)				
a 18,807,889				16,095,194			2,712,695			
<u>b</u>										
<u>c</u>										
e	· · · · · · · · · · · · · · · · · · ·									
Complete only for assets shown	g gain in column (h) and owned	by the	foundation	on on 12/31/69		(I) Gains (Col	(h) gain minus			
(i) F M ∨ as of 12/31/69	(i) F M V as of 12/31/69 (j) Adjusted basis (k) Excess of col (i) as of 12/31/69 over col (j), if any				col (k), but not le Losses (fro	ess than -0-) or				
a						2,712				
b										
С										
d										
2 Capital gain net income or (n 3 Net short-term capital gain or If gain, also enter in Part I, lir	(loss) as defined in sections ne 8, column (c) (see pages 1	enter - 1222	0- in Pa (5) and	rt I, line 7	2		2,712,695			
instructions) If (loss), enter-				,	3					
Part V Qualification Unde (For optional use by domestic pri										
	section 4942 tax on the distr) Do	not com	olete this part			Yes X No			
(a) Base period years	(b) Adjusted qualifying distribution	.	Net value	(c) of nonchantable-use a	seets		bution ratio			
Calendar year (or tax year beginning in)			THE VALUE			(col (b) di	vided by col (c))			
2009	2,360			284,451			0 008299			
2008 2007	100	000		49,800 19,653	_		0 000000 0 005088			
2006	100	,000		19,000	,,,,,,,		0 000000			
2005	-						0 000000			
2003							0 000000			
2 Total of line 1, column (d)3 Average distribution ratio for	the 5-year base period—divi	de the	e total on	line 2 by 5, or by	,	2	0 013387			
the number of years the foun	idation has been in existence	ıf les	s than 5	years	-	3	0 004462			
4 Enter the net value of noncha	arıtable-use assets for 2010 t	rom F	Part X, lir	ne 5	-	4	325,905,276			
5 Multiply line 4 by line 3						5	1,454,189			
6 Enter 1% of net investment in	ncome (1% of Part I, line 27b)			ŀ	6	37,355			
7 Add lines 5 and 6					}	7	1,491,544			
8 Enter qualifying distributions If line 8 is equal to or greater the Part VI instructions on pa	than line 7, check the box in	Part	VI, line 1	b, and complete	that p	8 art using a 1%	14,224,000 tax rate See			

Pai	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see pa	ige 1	8 of the	inst	uctio	ons)		
1 a	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	1		37	,355			
	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-)	2			. 0			
3	Add lines 1 and 2	3_		37,355				
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	5						
5		37	,355					
6	Credits/Payments							
	2010 estimated tax payments and 2009 overpayment credited to 2010 6a 68,525							
	Exempt foreign organizations—tax withheld at source 6b							
	Tax paid with application for extension of time to file (Form 8868) 6c 0							
_	Backup withholding erroneously withheld 6d 6d							
7	Total credits and payments Add lines 6a through 6d	7		- 68	5,525			
8	Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached	<u>8</u> 9			0			
9 10	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10		21	,170			
11	Enter the amount of line 10 to be Credited to 2011 estimated tax Solid of the tile amount overpaid	11			,170			
	t VII-A Statements Regarding Activities	•••			- 0			
					Yes	No		
та	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?			1a	163	X		
h	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 of the			Ia		-^-		
	Instructions for definition)?			1b		х		
	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							
С	Did the foundation file Form 1120-POL for this year?			1c		X		
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year							
	(1) On the foundation \blacktriangleright \$ (2) On foundation managers \blacktriangleright \$					į		
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed					İ		
	on foundation managers \$					ئــــا		
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		X		
	If "Yes," attach a detailed description of the activities					i		
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles							
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3	Х	<u> </u>		
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a	NI/A	_X_		
_	If "Yes," has it filed a tax return on Form 990-T for this year? Most bore a liquidation termination, discolution, as substantial contraction during the year?			4b 5	N/A	\vdash		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T			3		X		
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either		1					
•	By language in the governing instrument, or							
	By state legislation that effectively amends the governing instrument so that no mandatory directions							
	that conflict with the state law remain in the governing instrument?			6	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), a	nd Pa	art XV	7	X			
8 a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the							
	instructions) ► NY							
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney		-					
General (or designate) of each state as required by General Instruction G? If "No," attach explanation								
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3)								
or 4942(j)(5) for calendar year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV on page 27)?								
If "Yes," complete Part XIV								
10								
	their names and addresses 10 10 2							

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Par	VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see page 20 of the instructions)	11		
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?	12		
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
14	Website address The books are in care of ► c/o Foundation Source Telephone no ►	(800) 839-	1754
15	Located at ► 501 Silverside Road, Suite 123 Wilmington DE ZIP+4 ► 19809-1377 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here			
10	and enter the amount of tax-exempt interest received or accrued during the year 15			<u>・</u> ロ
16	At any time during calendar year 2010, did the foundation have an interest in or a signature or other authority	ا ۵۰	Yes	No
	over a bank, securities, or other financial account in a foreign country? 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.	16		X
Pai	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required	L		
	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?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(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)? Yes X No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days) Yes X No			
b	If any answer is "Yes" to 1a(1)–(6), did 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)?	1b	N/A	
	Organizations relying on a current notice regarding disaster assistance check here		14//	
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2010?	1c		
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			
L	If "Yes," list the years 20 , 20 , 20 , 20		_	
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 statement—see page 22 of the instructions)	2b	N/A	
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?			
b	If "Yes," did it have excess business holdings in 2010 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved			
	by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3)			
	the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine			
	if the foundation had excess business holdings in 2010)	3b	N/A	
4a b	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	4a		X
	purpose that had not been removed from repairely before the first day of the tay year beginning in 20102	46		v

For	990-PF (2010) The La Vida Feliz Foundation	n						26	3-162	2021	F	age 6
Pa	rt VII-B Statements Regarding Activi	ties f	or Which Form	n 47	720 May Be R	equired (continue	d)				
5a	During the year did the foundation pay or incur a	ny amo	ount to									
	(1) Carry on propaganda, or otherwise attemp	to infl	uence legislation ((sect	ion 4945(e))?		Yes	; [X]	No			
	(2) Influence the outcome of any specific publi		•	955)	, or to carry		_	_				
	on, directly or indirectly, any voter registrat	on driv	ve?				Yes	; X	No			
	(3) Provide a grant to an individual for travel, s	tudy, c	or other similar pur	pose	es?		Yes	, X	No			
	(4) Provide a grant to an organization other that	ın a ch	naritable, etc., orga	anıza	ation described		_	_	, ,			
	in section 509(a)(1), (2), or (3), or section 4	940(d)(2)? (see page 22	of t	he instructions)		Yes	X	No			
	(5) Provide for any purpose other than religiou	s, chai	ritable, scientific, li	iterai	ry, or		_		,			
	educational purposes, or for the prevention	of cru	elty to children or	anın	nals?		Yes	; X	No			
b	If any answer is "Yes" to 5a(1)-(5), did any of the	trans	actions fail to qual	lify u	nder the exceptio	ns describe	ed in		ı			
	Regulations section 53 4945 or in a current notice	e rega	rding disaster assi	ıstan	ice (see page 22	of the instr	uctions)?			5b	N/A	
	Organizations relying on a current notice regardi	aster assistance cl	heck	here			▶□					
С	If the answer is "Yes" to question 5a(4), does the	found	lation claim exemp	otion	from the							
	tax because it maintained expenditure responsib	lity for	the grant?				Yes	; 🔲	No			
	If "Yes," attach the statement required by Regula	tions s	section 53 4945–5	(d)								
6a	Did the foundation, during the year, receive any	unds,	directly or indirect	ly, to	pay							
premiums on a personal benefit contract?					Yes	: X	No			}		
b	Did the foundation, during the year, pay premiun	s, dire	ectly or indirectly, o	on a	personal benefit o	contract?				6b		_X_
	If "Yes" to 6b, file Form 8870							_	i			1
7a	At any time during the tax year, was the foundation	on a p	arty to a prohibited	d tax	shelter transaction	n?	Yes	: [X]	No			
_	If "Yes," did the foundation receive any proceeds									7b	N/A	
Р	art VIII Information About Officer	s, Dir	ectors, Truste	ees,	, Foundation	Manage	rs, Highl	y Paid	d Em	ploy	ees,	
_	and Contractors											
_1	List all officers, directors, trustees, foun			_					nstru	ction	s).	
	(a) Name and address	` `	Title, and average hours per week evoted to position		c) Compensation f not paid, enter -0-)	employ	ontributions t ee benefit pla red compens	ans			se acco	
SE	ATTACHMENT											
_		+-										
	•••••	1										
_		+										
		i i										
2	Compensation of five highest-paid empl	yees	(other than the	ose	included on li	ne 1—see	page 23	of the	instr	uctio	ns).	
						(d)	Contribution	s to			.	
(a	Name and address of each employee paid more than \$5	0,000	(b) Title, and aven hours per week devoted to position	ς .	(c) Compensation	on ei	mployee ben ans and defe compensatio	efit rred			se acco	
NC	NE.						oomponou.c					
		· ·										
		· • • • ·										
<u></u>	al number of other employees paid over \$50	000	L.,		<u> </u>	L		•				
	ar mamper of orner emblokees hair over \$50	,000							I			

Total. Add lines 1 through 3

Part VIII Information About Officers, Directors, Trustee	es Foundation Managers Highly Pai	d Employees
and Contractors (continued)	es, roundation managers, riging rai	a Employees,
3 Five highest-paid independent contractors for professional services	(see page 23 of the instructions). If none, ent	er "NONE."
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
Foundation Source		
55 Walls Drive, 3rd Floor, Fairfield, CT 06824	Administrative Services	145,250
Total number of others receiving over \$50,000 for professional service	s >	0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct chantable activities during the tax year. Include relethe number of organizations and other beneficianes served, conferences convened, research		Expenses
1		
2		
3		
*		
4		
Dest IV B	24 - 541	
Part IX-B Summary of Program-Related Investments (s Describe the two largest program-related investments made by the foundation during the t		I Amount
1	ax year on lines 1 and 2	Amount
1	••••••	
2		

All other program-related investments. See page 24 of the instructions		
3		
) 0

0

² art	XIII Undistributed Incom	e (see page 26 of t	ne instructions)		 -	
			(a)	(b)	(c)	(d)
1	Distributable amount for 2010 fro	m Part XI,	Corpus	Years prior to 2009	2009	2010
	line 7					16,257,909
2	Undistributed income, if any, as o	of the end of 2010			44,000,450	
a	Enter amount for 2009 only				14,200,458	
b	,			0		
3	Excess distributions carryover, if	_1				
a	From 2005	0				
b	From 2006	0				
C	From 2007	0				
ď	From 2008	0				
e	From 2009	0	0			
1 4	Total of lines 3a through e Qualifying distributions for 2010 f	from Dart				
•	• • .	24,000				
а					14,200,458	
	Applied to undistributed income of				14,200,400	
,	(Election required—see page 26	' '		o		
С	<u>`</u>	•				
J	required—see page 26 of the ins	• •				
d	Applied to 2010 distributable ame	· ·				23,542
e			0			
5	Excess distributions carryover ap		0			0
	(If an amount appears in column	•				
	same amount must be shown in					
6	Enter the net total of each colu	ımn as				
	indicated below:					
а	Corpus Add lines 3f, 4c, and 4e	Subtract line 5	0			
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 defi-	ciency has				
	been issued, or on which the sec	ction 4942(a)				
	tax has been previously assesse	ed				
d	Subtract line 6c from line 6b Tax	xable				
	amount—see page 27 of the inst	tructions		0		
е	Undistributed income for 2009 S	Subtract line				
	4a from line 2a Taxable amount	see page 27 of the			_	
	instructions				0	
f	Undistributed income for 2010 S					
	lines 4d and 5 from line 1 This a	amount must				10.004.007
_	be distributed in 2011					16,234,367
7	Amounts treated as distributions					
	corpus to satisfy requirements in	*				
	section 170(b)(1)(F) or 4942(g)(3	3) (see page 27 of				
0	the instructions)	am 200E				
8	Excess distributions carryover fro					
	not applied on line 5 or line 7 (se	e page 21 of the	o			
9	instructions) Excess distributions carryove	r to 2011	<u> </u>	<u> </u>		
,	Subtract lines 7 and 8 from line 6		l			
10	Analysis of line 9	ou.				
	Excess from 2006	0		[
ŀ	Excess from 2007	0	1			
,	Excess from 2008	0	1			
,	Excess from 2009	0	i	1		
-	Excess from 2010	0				

	990-PF (2010) The La Vida Feliz Foundatio		=		26-162	
	t XIV Private Operating Foundations (s			nd Part VII-A, զւ	iestion 9)	N/A
1 a	If the foundation has received a ruling or determination, and the ruling is effective for 2010, ent			>		
	Check box to indicate whether the foundation is a	private operating fou	indation described i	n section	4942(j)(3) or	4942(j)(5)
2 a	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years	·	4-3 7-4-1
	investment return from Part X for each	(a) 2010	(b) 2009	(c) 2008	(d) 2007	(e) Total
	year listed	0				0
b	85% of line 2a	0	0	0	0	0
С	Qualifying distributions from Part XII, line 4 for each year listed	0				0
d	Amounts included in line 2c not used directly for active conduct of exempt activities					0
	Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c	0	0	0	0	0
3 a	Complete 3a, b, or c for the alternative test relied upon "Assets" alternative test—enter					
	(1) Value of all assets					0
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					0
b	"Endowment" alternative test—enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed	0				0
С		<u> </u>				
J	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					0
	(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					0
	from an exempt organization					0
Do	(4) Gross investment income				000	0
	rt XV Supplementary Information (Con assets at any time during the ye	ar—see page 2	•		,uuu or more in 	
1	Information Regarding Foundation Manag List any managers of the foundation who have cor		20% of the total centr	butions received by	the foundation	
а	before the close of any tax year (but only if they ha				the loundation	
Aar	on Sosnick			(-,(-,/,		
	List any managers of the foundation who own 10%	6 or more of the stoc	k of a corporation (d	or an equally large p	ortion of the	
NO	ownership of a partnership or other entity) of which NE	h the foundation has	a 10% or greater in	terest		
2	Information Regarding Contribution, Gran Check here ► X if the foundation only makes unsolicited requests for funds. If the foundation ma under other conditions, complete items 2a, b, c, and	contributions to presakes gifts, grants, etc	selected charitable	organizations and de		tions
а	The name, address, and telephone number of the	person to whom app	olications should be	addressed		
b	The form in which applications should be submitted	ed and information ar	nd materials they sh	ould include		
	Any submission deadlines					
			 -	-		
d	Any restrictions or limitations on awards, such as l factors	by geographical area	as, charitable fields,	kinds of institutions,	or other	

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the	3 Grants and Contributions Paid During the Year or Approved for Future Payment									
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount						
Name and address (home or business)	or substantial contributor	recipient								
a Paid during the year										
3-LEGGED DOG INC	N/A	509(a)(1)	General & Unrestricted	3,000						
80 GREENWICH ST										
NEW YORK NY 10006	A1/A	500()(0)								
ACTION ARTS LEAGUE INC	N/A	509(a)(2)	Figment 2010 on	15,000						
10 SPRING ST, STE #1			Governor's Island							
NEW YORK NY 10012 ALL STARS PROJECT INC	N/A	509(a)(1)	General & Unrestricted	10.000						
543 W 42ND ST	IN/A	509(a)(1)	General & Officeuricleu	10,000						
NEW YORK NY 10036										
BLACK ROCK ARTS FOUNDATION	N/A	509(a)(1)	General & Unrestricted	5,000						
3450 3RD ST STE 2A	1,,,,,			0,000						
SAN FRANCISCO CA 94124										
BOWERY ARTS & SCIENCE LTD	N/A	509(a)(1)	General & Unrestricted	5,000						
310 BOWERY		. , , , ,		,						
NEW YORK NY 10012			•							
CATHOLIC BIG SISTERS & BIG BROTHERS	N/A	509(a)(1)	General & Unrestricted	5,000						
137 E 2ND ST 2ND FLR										
NEW YORK NY 10009										
CATHLC CHARITIES COMM SVCS ARCHD OF NY	N/A	509(a)(1)	General & Unrestricted	25,000						
1011 1ST AVE 16TH FL										
NEW YORK NY 10022	N/A	500(-)(4)	0	40.000						
CITY LORE INC	N/A	509(a)(1)	General & Unrestricted	10,000						
72 E 1ST ST NEW YORK NY 10003										
CONEY ISLAND U.S.A	N/A	509(a)(1)	General & Unrestricted	110,000						
1208 SURF AVE	1970	003(4)(1)	General & Officetificted	110,000						
BROOKLYN NY 11224										
CORPUS CHRISTI SCHOOL	N/A	509(a)(1)	General & Unrestricted	2,000						
535 W 121ST ST		111(11)(11)		_,,,,,						
NEW YORK NY 10027										
CREATIVE TIME INC	N/A	509(a)(1)	General & Unrestricted	10,000						
59 E 4TH ST # 6										
NEW YORK NY 10003	<u> </u>									
Total See Attached Statement		·	<u>▶ 3a</u>	14,077,250						
b Approved for future payment										
		<u> </u>								
		ļ								
		ł								
		1								
•										
Total		<u> </u>	▶ 3b	0						
				000.05						

Part XVI-A Analysis of Income-Producing Activ	1		<u> </u>		· · · · · · · · · · · · · · · · · · ·
Enter gross amounts unless otherwise indicated	Unrelated bus	siness income	Excluded by section	on 512, 513, or 514	(e)
1 Program service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See page 28 of the instructions)
a					
b					
C					
d					
е			<u> </u>		
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	1,023,392	
5 Net rental income or (loss) from real estate					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income			40	0.740.005	
8 Gain or (loss) from sales of assets other than inventory			18	2,712,695	·
9 Net income or (loss) from special events			<u> </u>		
10 Gross profit or (loss) from sales of inventory					
11 Other revenue a					
b					
c				<u> </u>	
de			<u> </u>		
12 Subtotal Add columns (b), (d), and (e)		0	<u>-</u>	3,736,087	C
13 Total. Add line 12, columns (b), (d), and (e)			1	13	3,736,087
(See worksheet in line 13 instructions on page 29 to verify calculations)	ulations)				21. 3 21 2 2 .
Part XVI-B Relationship of Activities to the Acc	complishment	of Exempt P	urposes		
Line No. Explain below how each activity for which income the accomplishment of the foundation's exempt page 29 of the instructions.)	e is reported in col	umn (e) of Part X	VI-A contributed in		
page 20 of the methodolory			, ,, ,		
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Pa	rt XV		nformation Rega Exempt Organiza	-	sters to	and Iransac	tions a	nd Rei	ationsr	nps W	ith Nonchai	ritable		
1		he or	ganization directly	or indirectly e								<u></u>	Yes	No
		ction nizati	501(c) of the Code ons?	(other than s	section 501	(c)(3) organiza	ations) or	ın secti	ion 527,	relating	to political			
а	Tran	sfers	from the reporting	foundation to	a nonchari	itable exempt	organiza	tion of:					, de	
_			, , , , , , ,				_					. 1a(1)	<u> </u>	X
			assets									1a(2)		X
b	` '		sactions:											
	(1) 5	Sales	of assets to a none	charitable exe	empt organi	izatıon						1b(1)		Х
	(2) F	urch	ases of assets fron	n a noncharita	able exemp	t organization						1b(2)		Х
			I of facilities, equip											Х
	(4) F	Reimb	oursement arrange	ments										Х
	(5) l	oans	s or loan guarantee	S						•		1b(5)		X
			rmance of services											X
		•	f facilities, equipme	•		•							L	Х
	value value	e of the	wer to any of the ab ne goods, other ass ny transaction or sh (b) Amount involved	sets, or service naring arrange	es given by ement, sho	the reporting win column (foundati d) the va	on. If th lue of th	e founda ne goods	ation red s, other	ceived less th assets, or se transactions, and	an fair m rvices re	arket ceived	
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	desc	ribed	ndation directly or i in section 501(c) o omplete the followi	of the Code (o	ated with, o other than s	or related to, or ection 501(c)(ne or mo 3)) or in :	re tax-e section	xempt o 527?	rganiza · ·	tions . [Yes X] No	
			(a) Name of organization			(b) Type of organ	nization			(c)	Description of rel	ationship		_
			 		<u> </u>				<u> </u>	-				
					_		 				 			
									ļ			 		
Si	gn	ا Jnder الموااعل	penalties of perjury, I dec t is true, correct, and cor	clare that I have e nplete Declaratio	examined this i on of preparer	return, including ad (other than taxpay	er or fiducia	ig schedul ary) is bas	les and sta sed on all in	tements, nformation	and to the best of of which prepare	f my knowle er has any l	edge an knowled	d Ige
	ere	(\/\		1 1	0/21	1/11		Truste	ے م		
-	-	Sigi	nature of officer or truste	e	-~-		Da	te	` 	- ▶ 	le			
			Print/Type preparer's n		Preparer's s	ignature			Date			PTIN		
	aid		Jeffrey D Haskell		'	D. Haskell			10/12	/2011	Check [] if self-employed			
	epar			DUNDATION		2111001011			1 10/12	, 2011	Firm's EIN			
U	se O	nly				IELD, CT 0682	24				Phone no	(800	839-	1754
			1	TO DIVI	, - / 11111						<u> </u>	, ,,,,,,,	, 555	

Schedule B

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

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

2010

Name of the organization			Employer identification number
The La Vida Feliz Founda	tion		26-1622021
Organization type (check			
Filers of:	Section:		
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) r	nonexempt charitable trust not treated as	a private foundation
	527 political	l organization	
Form 990-PF	X 501(c)(3) ex	xempt private foundation	
	4947(a)(1) r	nonexempt charitable trust treated as a pr	vate foundation
	501(c)(3) ta	axable private foundation	
, ,	•	eneral Rule or a Special Rule. anization can check boxes for both the Ge	neral Rule and a Special Rule See
General Rule			
	on filing Form 990, 99 y one contributor Cor	90-EZ, or 990-PF that received, during the mplete Parts I and II	year, \$5,000 or more (in money or
Special Rules			
sections 509(a)(1) and 170(b)(1)(A)(vi)	ing Form 990 or 990-EZ that met the 33 1/ , and received from any one contributor, d on (i) Form 990, Part VIII, line 1h or (ii) For	during the year, a contribution of the greater
the year, aggrega	te contributions of mo	panization filing Form 990 or 990-EZ that re ore than \$1,000 for use exclusively for rel or of cruelty to children or animals Comple	ligious, charitable, scientific, literary, or
the year, contribution aggregate to more year for an exclusion.	tions for use <i>exclusiv</i> e than \$1,000 If this b sively religious, charit	panization filing Form 990 or 990-EZ that revely for religious, charitable, etc., purposes box is checked, enter here the total contributable, etc., purpose. Do not complete any received nonexclusively religious, charitable.	s, but these contributions did not butions that were received during the of the parts unless the General Rule
		y the General Rule and/or the Special Rul on Part IV, line 2 of its Form 990, or check	

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)

Schedule B	C 000	990 E7	05 000 DEV	(2010)
ocnequie B (Form 990.	99U-EZ,	01990-PF)	(2010)

butors (see instructions) (b) Name, address, and ZIP + 4 nick, Aaron Avenue B PHA York NY 10009 gn State or Province gn Country (b) Name, address, and ZIP + 4 gn State or Province gn Country (b) Name, address, and ZIP + 4	(c) Aggregate contributions \$ 22,000,000 (c) Aggregate contributions \$ 0 (c) Aggregate contributions	(d) Type of contribution Person X Payroll Noncash (Complete Part II if there is a noncash contribution) (d) Type of contribution Person Payroll Noncash (Complete Part II if there is a noncash contribution)
Name, address, and ZIP + 4 nick, Aaron Avenue B PHA York NY 10009 gn State or Province gn Country (b) Name, address, and ZIP + 4 gn State or Province gn Country (b)	\$ 22,000,000 (c) Aggregate contributions (c) Aggregate contributions	Person X Payroll
Avenue B PHA York NY 10009 gn State or Province gn Country (b) Name, address, and ZIP + 4 gn State or Province gn Country (b)	(c) Aggregate contributions \$0 (c)	Payroll Noncash (Complete Part II if there is a noncash contribution) (d) Type of contribution Person Payroll Noncash (Complete Part II if there is a noncash contribution)
Name, address, and ZIP + 4 gn State or Province gn Country (b)	\$0	Person Payroll Complete Part II if there is a noncash contribution (d)
gn State or Province gn Country (b)	(c)	Payroll Noncash (Complete Part II if there is a noncash contribution)
		1
gn State or Province gn Country	\$0	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
ign State or Province ign Country	\$0	Person Payroll Oncash (Complete Part II if there is a noncash contribution)
(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
ign State or Province	\$0	Person Payroll Occupate Part II if there is a noncash contribution)
(b)	(c) Aggregate contributions	(d) Type of contribution
	gn State or Province gn Country (b) Name, address, and ZIP + 4	\$ 0 gn State or Province gn Country (b) Name, address, and ZIP + 4 Aggregate contributions \$ 0 gn State or Province: gn Country (b) (c)

Foreign State or Province

Foreign Country

(Complete Part II if there is

a noncash contribution)

Payroll Noncash

Page	1	of	1	of Part II
raye		OI.		Urraitii

26-1622021

Schedule	R	(Form 990)	990-F7	or 990-PF)	(2010

Name of organization Employer Identification number The La Vida Feliz Foundation

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
		\$ <u>o</u>	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$0	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$ <u>o</u>	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$0	
(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
		\$0	

Schedule B (Fo	orm 990, 990-EZ, or 990-PF) (2010)			Page 1 of	1 of Part III
Name of org	ganization a Feliz Foundation			Employer identification 26-1622021	
Part III	Exclusively religious, charitable, etc., i aggregating more than \$1,000 for the y For organizations completing Part III, enter contributions of \$1,000 or less for the year	ear. Complete or the total of e	columns (a) through (e)	O1(c)(7), (8), or (10) organizate and the following line entry ritable, etc.	
(a) No. from Part I	(b) Purpose of gift	(c)	Use of gift	(d) Description of how git	ft is held
		(e) T	ransfer of gift		
	Transferee's name, address, and	ZIP + 4	Relationsh	ip of transferor to transferee	
	For Prov Country				
(a) No. from Part I	(b) Purpose of gift	(c)	Use of gift	(d) Description of how gif	ft is held
			ransfer of gift		
	Transferee's name, address, and		Relationsh	ip of transferor to transferee	
	For Prov Country				
(a) No. from Part I	(b) Purpose of gift	(c)) Use of gift	(d) Description of how git	ft is held
			ransfer of gift		
	Transferee's name, address, and		-	ip of transferor to transferee	
(a) Na	For Prov Country				
(a) No. from Part I	(b) Purpose of gift	(c)	Use of gift	(d) Description of how git	ft is held
		(-) T			
	Transferee's name, address, and		ransfer of gift	ip of transferor to transferee	
	mandred o mano, addreso, and			p or manoretor to transletee	
	For Prov Country				

Schedule B (Form 990, 990-EZ, or 990-PF) (2010)

Form 990-PF, Part I, Line 16a - Legal Fees

TOTAL: 544 544 0 1 (a) (b) (c) (d) 2 Net Investment Books Income Income Income Income Income Purpose 4 544 544 S44 Purpose 5 5 544 S44 S44 S44 S44 5 5 5 S44 <	0		0									
COTAL: 544 544 544												
COTAL: 544 544 544	0	(c) Adjusted Net	псоте									
Legal Services Legal Services (a) Expenses per Books 5	544	(b) let Investment	Income 544									
Legal Services	544	(a) Expenses per	Books 544									
	TOTAL:											
				7	3	4	2	9	7	8	6	10

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Form 990-PF, Part I, Line 18 - Taxes

<u>~</u> г											
	(d) Charitable Purpose)									
0	(c) Adjusted Net Income										
0	(b) Net Investment Income	0									
39,000	(a) Expenses per Books	39,000									
TOTAL:			i								
		Estimated Tax for 2010									
		Estim									
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0 146,750	(c) (d) Adjusted Net Charitable	lncome 0	0 1,500					
	(b) r Net Investment A	lucome						
146,	(a) Expenses per Net Ir	Books 145,250	1,500					
TOTAL:								
							-	
		Administrative Fees	2 State or local filing fees					

Form 990-PF, Part II, Line 10b - Investments: Corporate Stock

		TOTAL:	60,349,548	61,846,690
	Description/Symphol/CHSIP Number	Shares	(b) Book Value	(c) Fair Market Value
-	SPARTAN US EQTY INDX FID ADVANTAGE CLASS (FUSVX)	138	60,349,548	61,846,690
7				
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4				
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7				
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თ				
9				

Form 990-PF, Part II, Line 13 - Investments - Other

		TOTAL:	93,807,889	101,142,139
			(q)	(0)
	Asset Description		Book Value	Fair Market Value
-	ACUITY CORPORATE OPPORTUNITY FUND LTD		18,807,889	22,175,369
2	MAGNITUDE INTERNATIONAL CLASS D 0410		75,000,000	78,966,770
က				
4				
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EIN: 26-1622021

Taxable Year Ending December 31, 2010

Form 990-PF, Part VII-A, Line 3 - Change in Governing Instrument

LA VIDA FELIZ FOUNDATION

APPOINTMENT OF SUCCESSOR TRUSTEES

WHEREAS:

- A. Under a trust instrument dated December 26, 2007 (the "Trust Indenture"), AARON SOSNICK, as Settlor and as Trustee ("AARON"), established La Vida Feliz Foundation (the "Foundation").
- B. Paragraph (A) of Article 7 of the Trust Indenture names BENJAMIN APPEN, PAUL WOLF and ANDREW RUBINSON as successor trustees to AARON, subject to any appointments of successor trustee.
- C. Paragraph (B) of Article 7 of the Trust Indenture provides, in part, as follows:
 - "(B) AARON may appoint one or more persons to serve, together or successively, as Trustees to serve together with him or in the event he shall cease to act in such office for any reason, and such Trustees shall succeed to all of the powers of the initially named Trustee hereunder."
- D. AARON now wishes to name MICHAEL ROSEN as an additional successor trustee, to act in the event that he ceases to act as a trustee of the Foundation, together with BENJAMIN APPEN, PAUL WOLF and ANDREW RUBINSON.

NOW THEREFORE:

In accordance with Paragraph (B) of Article 7 of the Trust Indenture, AARON hereby appoints whoever qualifies of MICHAEL ROSEN, BENJAMIN APPEN, PAUL WOLF and ANDREW RUBINSON to act as trustees of the Foundation, to serve at such time as AARON may cease to act as trustee.

IN WITNESS WHEREOF, the undersigned has executed this instrument as of the Z day of June, 2010.

AARON SOSNICK

STATE OF NEW YORK) : ss.: COUNTY OF NEW YORK)

Notary Public

RICHARD S ROTHBERG
Notary Public - State of New York
NO. 02R06028661
Qualified in Westchester Gounty
My Commission Expires 8/2/2013

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Foundation Managers	
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Trustees a	
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Compensation	
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0	Expense Account									
0	Benefits	0								
0	Comp.	0								·
	Avg Hrs	-								
	Title	Trustee								
	Zıp Code	19809								
	State	DE								
	City	Wilmington								
	Street	source								
	Name	1 Aaron Sosnick								
			2	က	4	5	9	 8	6	10