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### Form **990-PF**

## **Return of Private Foundation**

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

OMB No 1545-0052

Department of the Treasury Internal Revenue Service		be able to use a copy of this		rting requirements	2010
For calendar year 2010, or t			, and ending		
G Check all that apply	Initial return	Initial return of a fo		Final return	
	Amended return	Address chang	je 🔲	Name change	
Name of foundation  KARYN C	ERSCHEL LAMB F	מסדיים מעווסי		A Employer Identification (	numper
	SCHEL & CO.	CONDATION		31-6671633	
	umber if mail is not delivered to street	t address)	Room/suite	B Telephone number	<del> </del>
600 MAD	ISON AVENUE 16	TH FL.		561-844-219	96
City or town, state, and ZIP of				C If exemption application is per	nding, check here
NEW YOR			<del></del>	D 1. Foreign organizations,	check here
H Check type of organization	· ·			Foreign organizations mee check here and attach corn	nputation
		Other taxable private foundaing method X Cash		E If private foundation statu	us was terminated
	ets at end of year J Account	ing method (A) Cash ther (specify)	Accrual	under section 507(b)(1)(	•
(from Part II, col. (c), line  ▶\$	692,288. (Part I, colu		oasis )	F If the foundation is in a 6 under section 507(b)(1)(	
		(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
(The total of amounts necessarily equal the	nue and Expenses in columns (b), (c), and (d) may not amounts in column (a))	expenses per books	income	income	for chantable purposes (cash basis only)
1 Contributions, gifts	, grants, etc , received			N/A	
	oundation is not required to attach Sch. B				and the control of th
3 Interest on savings and cash investments	•	21.	21.	<del></del>	STATEMENT 1
4 Dividends and inter	rest from securities	19,574.	19,574.		STATEMENT 2
5a Gross rents	1				
63 Net gain or (loss) from	sale of assets not on line 10				
b Gross sales price for a assets on line 6a  7 Capital gain net incom			······································		
7 Capital gain net incom	e (from Part IV, line 2)	1-A/-1/-14H1	0.	1 1/ / 1/ 1/ 1/ 1/ 1/ 1/ 1/ 1/ 1/ 1/ 1/	
8 Net short-term cap	ıtal gaın				
9 Income modificatio	ons .				
and allowances			· · · · · · · · · · · · · · · · · · ·		
b Less Cost of goods so			<del></del>		·····
c Gross profit or (los	S)	7,970.	7,970.		STATEMENT 3
12 Total. Add lines 1 t	through 11	27,565.	27,565.		
	ers, directors, trustees, etc	0.	0.		0.
14 Other employee sal					
ρ 15 Pension plans, emp	oloyee benefits				
16a Legal fees	amvm 4	1 250	675	RECEIV	'ED   675
b Accounting fees	STMT 4	1,350.	675.	8	675
c Other professional	tees	_	· <del>·····</del>	AUG 0 8 2	)11   <del>  </del>
b Accounting fees c Other professional 17 Interest 18 Taxes 19 Depreciation and de 20 Occupancy 21 Travel, conferences 22 Printing and public 23 Other expenses 24 Total operating an expenses. Add line	STMT 5	476.	476.	<del>                                      </del>	<u> </u>
19 Depreciation and de				OGDEN	TIT
E 20 Occupancy	•			CODEIA"	UI
21 Travel, conferences	•	620.	0.		620.
22 Printing and public		205			<del></del>
23 Other expenses	STMT 6	225.	0.		0.
24 Total operating an		2 671	1,151.		1 295
expenses. Add line 25 Contributions, gifts	-	2,671. 34,015.	1,131.		1,295 34,015
26 Total expenses an		31,013.			
Add lines 24 and 2		36,686.	1,151.		35,310.
27 Subtract line 26 fro					
	r expenses and disbursements	<9,121.		, , , , , , , , , , , , , , , , , , , ,	<del>,</del>
	OME (if negative, enter -0-)		26,414.	==/=	
c Adjusted net incon	NB (if negative, enter -0-)		+	N/A	

P

31-6671633

Page 2

Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	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
1 Cash - non-interest-bearing			
2 Savings and temporary cash investments	61,719.	52,598.	52,598.
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			
7 Other notes and loans receivable			
Less allowance for doubtful accounts	<del> </del>	1	
	-		
8 Inventories for sale or use 9 Prepaid expenses and deferred charges			
9 Prepaid expenses and deferred charges			<del></del>
104 investments - 0.3 and state government obligations	605.050	620 600	(20 (00
b Investments - corporate stock STMT 7	605,250.	639,690.	639,690.
c Investments - corporate bonds			<del></del>
11 Investments - land, buildings, and equipment basis			
Less accumulated depreciation			
12 Investments - mortgage loans			
13 Investments - other			_
14 Land, buildings, and equipment basis			
Less accumulated depreciation		ĺ	
15 Other assets (describe ►	\		
Other assets (describe >			
16 Total seasts (to be completed by all filers)	666,969.	692,288.	692,288.
16 Total assets (to be completed by all filers)	000/3031	05272000	
17 Accounts payable and accrued expenses		·	
18 Grants payable			
9 19 Deferred revenue			
20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable			
21 Mortgages and other notes payable			
22 Other liabilities (describe >	_)		
		0	
23 Total liabilities (add lines 17 through 22)	0.	0.	
Foundations that follow SFAS 117, check here	<u> </u>		
and complete lines 24 through 26 and lines 30 and 31.			
8 24 Unrestricted	666,969.	692,288.	
5   25 Temporarily restricted			
26 Permanently restricted			
Foundations that do not follow SFAS 117, check here			
and complete lines 27 through 31.			
Temporarily restricted  Permanently restricted  Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.  Capital stock, trust principal, or current funds Paid-in or capital surplus, or land, bldg, and equipment fund Retained earnings, accumulated income, endowment, or other funds Total net assets or fund balances			
28 Paid-in or capital surplus, or land, bldg, and equipment fund		·	
Retained earnings, accumulated income, endowment, or other funds			
30 Total net assets or fund balances	666,969.	692,288.	
30 Total net assets or fund balances	00073031	052,2000	
31 Total liabilities and net assets/fund balances	666,969.	692,288.	
		03272001	
Part III Analysis of Changes in Net Assets or Fun	d Balances		
1 Total 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)		1	666,969.
2 Enter amount from Part I, line 27a		2_	<9,121.
3 Other increases not included in line 2 (itemize) ► UNREALIZE	D GAIN ON SECURI		34,440.
4 Add lines 1, 2, and 3		4	692,288.
5 Decreases not included in line 2 (itemize)		5	0.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part	t II, column (b), line 30	6	692,288.
		<del></del>	Form <b>990-PF</b> (2010)

Part IV Capital Gains	and Lo	sses for Tax on I		income	1					
				acquired lay, yr )	(d) Date sold (mo , day, yr )					
a										
b NO	NE	<u></u>			<u> </u>					
C				<u> </u>	┼					
<u>d</u>					<del> </del>					
<u>e</u>	(6)	Depreciation allowed	(n) Cos	st or other basis			L.	(h) G	ain or (loss	<u> </u>
(e) Gross sales price	"	(or allowable)		xpense of sale	1				s (f) minus	
a								_		-
b										
C										
<u>d</u>	ļ <u>-</u>									
<u>e</u>	<u>.                                    </u>	<del> </del>	<u> </u>	10.10.1.100						
Complete only for assets showing	T		1-		-				Col (h) gain not less tha	
(i) F M V as of 12/31/69	. '	(j) Adjusted basis as of 12/31/69		cess of col (i) col (j), if any					(from col (	
a	ļ									
b			+					-		<del></del>
<u>C</u>	-		-				<del> </del>			<del></del>
<u>d</u>										<del></del>
<u>e                                      </u>	l	<u> </u>		~	7		_			
Capital gain net income or (net ca	apital loss)	) $ \begin{cases} \text{ If gain, also enter} \\ \text{If (loss), enter} \end{cases} $			<b>)</b>	2				
Net short-term capital gain or (lo			ınd (6)		٦					
If gain, also enter in Part I, line 8, If (loss), enter -0- in Part I, line 8		c)			<b> </b>	_				
11 (1055), einer -0- III Fait 1, inie o					1 1	3	1			
Part V Qualification U	Jnder S	Section 4940(e) fo	r Reduced	Tax on Net	: Inv	<u>3</u> estn	nent Inc	ome		
<del></del>	Jnder S					estn	nent Ind	ome		
For optional use by domestic private	Jnder S e foundati	ons subject to the section				estn	nent Ind	ome		
Part V Qualification U For optional use by domestic private f section 4940(d)(2) applies, leave t	Jnder S e foundati	ons subject to the section				estn	nent Ind	ome		
For optional use by domestic private f section 4940(d)(2) applies, leave t	<b>Inder S</b> te foundati this part bi	ons subject to the section	4940(a) tax on	net investment ii	ncome	estn	nent Ind	come		Yes X No
For optional use by domestic private f section 4940(d)(2) applies, leave to Vas the foundation liable for the sec in Yes," the foundation does not qua	Under S te foundati this part bl ction 4942 alify under	ons subject to the section lank tax on the distributable as section 4940(e) Do not c	4940(a) tax on mount of any year mount of any year mount of any year makes	net investment in ear in the base pe int	riod?	estn	nent Ind	come		Yes X No
For optional use by domestic private f section 4940(d)(2) applies, leave to Vas the foundation liable for the sec f "Yes," the foundation does not qua Enter the appropriate amount in	Under S te foundati this part bl ction 4942 alify under	ons subject to the section lank tax on the distributable a section 4940(e) Do not c mn for each year, see inst	4940(a) tax on mount of any year mount of any year mount of any year makes	net investment in ear in the base pe int	riod?	estn	nent Ind	come		
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For optional use by domestic private frection 4940(d)(2) applies, leave to section 4940(d)(2) applies, leave to see the foundation liable for the section free free free free free free free fre	Jnder S le foundati this part bi ction 4942 alify under each colui ing in)  5-year basence if less ble-use as	ons subject to the section lank  I tax on the distributable as section 4940(e) Do not common for each year, see instead qualifying distributed qualifying distri	mount of any year complete this particultions before stributions 28,242.30,720.26,350.40,031.34,140.	ear in the base peart making any entri	riod? es (c)	57 71 81 75	use assets 7,479 6,630 5,652 8,253	2 3 4 5		(d) putton ratio rided by col (c))  . 04890 . 04286 . 03230 . 05279 . 04636 . 22323 . 04464 637,936
For optional use by domestic private section 4940(d)(2) applies, leave to section 4940(d)(2) applies, leave to see the section 4940(d)(2) applies, leave to see the section 4940(d)(2) applies, leave to section 4940(d) applies, the foundation does not quate the appropriate amount in (a).  Base period years.  Calendar year (or tax year beginning 2009 2008 2007 2006 2005.  Total of line 1, column (d).  Average distribution ratio for the the foundation has been in exister the foundation has been in exister.  Enter the net value of noncharital Multiply line 4 by line 3.  Enter 1% of net investment income.	Jnder S re foundati this part bli ction 4942 alify under each colu- ing in)  5-year basence if less ble-use as	ons subject to the section lank  tax on the distributable as section 4940(e) Do not comm for each year, see inst  (b)  Adjusted qualifying distributed qualifying distributed qualifying distributed as than 5 years  sets for 2010 from Part X	mount of any year complete this particultions before stributions 28,242.30,720.26,350.40,031.34,140.	ear in the base peart making any entri	riod? es (c)	57 71 81 75	use assets 7,479 6,630 5,652 8,253	2 3 4 5		(d) putton ratio putded by col (c))  . 04890 . 04286 . 03230 . 05279 . 04636 . 22323 . 04464 637,936 28,482

31-6671633 C/O GERSCHEL & CO. Form 990-PF (2010) Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions) Part VI 1a Exempt operating foundations described in section 4940(d)(2), check here ightharpoonup and enter "N/A" on line 1 Date of ruling or determination letter (attach copy of letter if necessary-see instructions) 264. 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-) 264. 3 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 264 5 5 Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-6 Credits/Payments 248. a 2010 estimated tax payments and 2009 overpayment credited to 2010 6a 6b b Exempt foreign organizations - tax withheld at source 235. c Tax paid with application for extension of time to file (Form 8868) 6c 6d d Backup withholding erroneously withheld 483. 7 Total credits and payments Add lines 6a through 6d 8 8 Enter any penalty for underpayment of estimated tax. Check here \_\_\_\_\_\_ if Form 2220 is attached 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9 219. 10 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 0. 11 Enter the amount of line 10 to be Credited to 2011 estimated tax 219 . 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 Х 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 10 c Did the foundation file Form 1120-POL for this year? d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year 0. (1) On the foundation ► \$ 0 • (2) On foundation managers > \$ e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation 0. managers > \$ 2 Х 2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities. 3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes 4a 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? N/A 4b b If "Yes," has it filed a tax return on Form 990-T for this year? X 5 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? 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 X 6 remain in the governing instrument? X 7 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) 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) X 8b 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 X year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If "Yes," complete Part XIV 10 10 Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses

Page 5

Pa	rt 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 instructions)	11		<u>X</u> _
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before			
	August 17, 2008?	12		<u>X</u>
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► N/A			
14			<u>833</u>	
	Located at ▶ 264 TRADEWIND DRIVE, PALM BEACH, FL ZIP+4 ▶33	480		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		<b>•</b>	
	and enter the amount of tax-exempt interest received or accrued during the year	<u>N</u>	/ <u>A</u>	
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		<u>X</u>
	See page 20 of the instructions for exceptions and filing requirements for Form TD F 90-22 1. If "Yes," enter the name of			
	the foreign country			
Pa	ert VII-B Statements Regarding Activities for Which Form 4720 May Be Required	<del>,</del>		
	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			
	101 (110 5010)11 01 400 075 410444111104 personny			
	(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.)			
	torrandon or government correct in terminating remaining			
þ	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	16	:	
	Social So 1041(a) So il il a carron, rocker regarding diseases assistants (corp. p.g. = 1 the manufacture)	1b		-
	Organizations relying on a current notice regarding disaster assistance check nere	]		
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	10		Х
•	before the first day of the tax year beginning in 2010?  Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			
2	defined in section 4942(j)(3) or 4942(j)(5))			
	1 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?			
	If "Yes," list the years \(\bigs_{			
ь	a Are there any years listed in 2a for which the foundation is <b>not</b> 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 instructions )  N/A	2b		[
C	: If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here			
	<b>&gt;</b>			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?			
b	o 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.)  N/A	3b		
48	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	Ĺ.,	X
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			
	had not been removed from jeopardy before the first day of the tax year beginning in 2010?	4b	DE	<u> </u>

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

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Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	Managers, Highly	1000
Paid Employees, and Contractors (continued)		
3 Five highest-paid independent contractors for professional services. If none, enter "NO		(-) Component
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensati
NONE		
	····	
		<del>                                     </del>
<del></del>		
		1
Total number of others receiving over \$50,000 for professional services		<b></b>
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical in	formation such as the	Expenses
number of organizations and other beneficiaries served, conferences convened, research papers produced	etc	
N/A		
	<del></del>	
· · · · · · · · · · · · · · · · · · ·		
		<del></del>
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on lines	1 and 2	Amount
N/A		
		<u> </u>
All other program-related investments. See instructions		
3		
Tetal Add lines 1 through 2		(
Total. Add lines 1 through 3		orm <b>990-PF</b> (201

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P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndation	is, 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	594,318. 53,333.
b	Average of monthly cash balances	1b	53,333.
C	Fair market value of all other assets	10	
d	Total (add lines 1a, b, and c)	10	647,651.
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	647,651.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	9,715. 637,936.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	637,936.
6	Minimum investment return. Enter 5% of line 5	6	31,897.
P	<b>Distributable Amount</b> (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations check here  and do not complete this part.)	d certai	n
1	Minimum investment return from Part X, line 6	1	31,897.
2a	Tax on investment income for 2010 from Part VI, line 5		
b	Income tax for 2010 (This does not include the tax from Part VI )		
C	Add lines 2a and 2b	2c_	<u> 264.</u>
3	Distributable amount before adjustments Subtract line 2c from line 1	3	31,633.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	31,633.
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	31,633.
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	35,310.
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	<u></u>
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	35,310.
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	264.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	35,046.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of 4940(e) reduction of tax in those years	qualifies	for the section

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# Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2009	( <b>c)</b> 2009	(d) 2010
1 Distributable amount for 2010 from Part XI,		<u>,, , , , ,                           </u>		
line 7			,	31,633.
2 Undistributed income, if any, as of the end of 2010				
a Enter amount for 2009 only			15,820.	
h Total for prior years		"		71 111 111 111 111 1 1 1 1 1 1 1 1 1 1
		0.		
3 Excess distributions carryover, if any, to 2010				
a From 2005				
b From 2006				
¢ From 2007				
d From 2008				
e From 2009				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2010 from				
Part XII, line 4 $\triangleright$ \$ 35,310.				
a Applied to 2009, but not more than line 2a	**		15,820.	· · · · · · · · · · · · · · · · · · ·
<b>b</b> Applied to undistributed income of prior				
years (Election required - see instructions)	111 2111 13 141/1/41-4141	0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.		<u> </u>	
d Applied to 2010 distributable amount				19,490.
e Remaining amount distributed out of corpus	0.			
Excess distributions carryover applied to 2010 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	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 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				10 140
be distributed in 2011	<u></u>			12,143.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by	0			
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2005	0			
not applied on line 5 or line 7	0.			······································
9 Excess distributions carryover to 2011.	0.			
Subtract lines 7 and 8 from line 6a	<b>U</b> •			
O Analysis of line 9				
a Excess from 2006				
b Excess from 2007				
c Excess from 2008				
d Excess from 2009				
e Excess from 2010		L	t	- 200 PE :::

Form 990-PF (2010) C/O GERSCHEL & CO. 31-6671633 Page 10 Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9) N/A 1 a if the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2010, enter the date of the ruling b Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or 4942(<u>j)(5)</u> Prior 3 years 2 a Enter the lesser of the adjusted net Tax year (a) 2010 (b) 2009 (c) 2008 (d) 2007 (e) Total income from Part I or the minimum investment return from Part X for each year listed **b** 85% of line 2a c Qualifying distributions from Part XII, line 4 for each year listed d Amounts included in line 2c not used directly for active conduct of exempt activities e Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c Complete 3a, b, or c for the alternative test relied upon a "Assets" alternative test - enter (1) Value of all assets (2) Value of assets qualifying under section 4942(j)(3)(B)(i) b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed c "Support" alternative test - enter (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) (2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii) (3) Largest amount of support from an exempt organization (4) Gross investment income Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see the instructions.) Information Regarding Foundation Managers: a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2)) NONE b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs: Check here 🕨 🗶 if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d 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

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Part XV Supplementary Information (continued)

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3 Grants and Contributions Paid During the		Pavment		
Recipient	If recipient is an individual, show any relationship to		Purpose of grant or contribution	
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	contribution	Amount
a Paid during the year				
	:			
SEE STATEMENT 8		<u> </u>		24 015
Total  b Approved for future payment	<del></del>		<b>▶</b> 3a	34,015
- · · · · · · · · · · · · · · · · · · ·				
NONE				
Total		· · · · · · · · · · · · · · · · · · ·	<b>▶</b> 3b	0

•

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

Enter gross amounts unless otherwise indicated	Unrelate	d business income	Excluded by section 512, 513, or 514		(e)		
1 Program service revenue	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income		
	0000			_			
a							
b			<u> </u>				
<u> </u>		<u> </u>					
d					<del></del>		
e							
			ļ				
g Fees and contracts from government agencies			<u> </u>				
2 Membership dues and assessments			<del> </del>				
3 Interest on savings and temporary cash			1 1 4	21			
investments			14				
4 Dividends and interest from securities			14	19,5/4.			
5 Net rental income or (loss) from real estate							
a Debt-financed property	<u> </u>		<u> </u>				
b Not debt-financed property							
6 Net rental income or (loss) from personal			ŀ				
property							
7 Other investment income			14	7,970.			
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	1						
d							
e							
12 Subtotal Add columns (b), (d), and (e)		0.		27,565.	0.		
13 Total. Add line 12, columns (b), (d), and (e)		1		13	27,565.		
(See worksheet in line 13 instructions to verify calculations )							
Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which incomplete the foundation's exempt purposes (other than	ome is reported	ın column (e) of Part XVI-A			plishment of		
the foundation's exempt purposes (other than N/A	by providing it	mus for such purposes/					
N/A							
		<del></del>		<del></del>			
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023621 12-07-10					Form <b>990-PF</b> (2010)		

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Part )	(VII	Information Re Exempt Organ	-	isfers To a	and Trans	actions a	and Relat	ionships With Nonch	aritable	9	
1 Did	the or	ganization directly or indi	·	of the followin	a with any oth	er organizatio	on described	in section 501(c) of		Yes	No
		other than section 501(c)				-		11 30011011 30 1(0) 01			
		from the reporting founda			-	Jonitioal Organ					
	Cash				yuu				1a(1)	•	Х
		assets							1a(2)		Х
		sactions							<del></del> \/-		
		of assets to a noncharital	ble exempt organiza	ation					16(1)	[	Х
(2)	Purch	nases of assets from a no	ncharitable exempt	organization					1b(2)		Х
		of facilities, equipment,	•	ŭ					1b(3)		Х
(4)	Reimi	bursement arrangements							1b(4)		Х
(5)	Loans	s or loan guarantees							1b(5)		X
(6)	Perfo	rmance of services or me	mbership or fundra	ising solicitatio	ns				1b(6)		X
c Sha	ring of	f facilities, equipment, ma	iling lists, other ass	ets, or paid em	ployees				10		X
d If th	e ansv	wer to any of the above is	"Yes," complete the	following sche	dule Column	(b) should al	ways show th	e fair market value of the good	s, other ass	ets,	
ors	ervices	s given by the reporting fo	oundation. If the fou	indation receive	ed less than fa	ır market valı	ie in any trans	saction or sharing arrangemen	t, show in		
colu	ımn (d	) the value of the goods,	other assets, or ser	vices received				<del>-</del>			
(a) Line no	<u> </u>	(b) Amount involved	(c) Name o	of noncharitable	exempt orga	nization	( <b>d</b> ) De	scription of transfers, transactions, a	nd sharing ar	rangeme	ents
				N/A							
								·			
	<u> </u>										
	_		<u>.</u>					<u> </u>			
		· · · · · · · · · · · · · · · · · · ·					-				
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0- 1-11		- d-4 d4b d4									
		ndation directly or indirect	•			xempt organi	zations descr	ibea	Yes	T	No
		501(c) of the Code (other		(3)) or in sect	1011 527				165	L43	
וו ט	es, co	omplete the following sche (a) Name of org			(b) Type of	organization		(c) Description of relatio	nshio		
		N/A	31112411011		(b) Type of	Jiguinzution		(a) boompton or rolling			
		14/11	···								
			·								
					_		-				
	Unde	r penalties of penury, I declare	that I have examined	this return, includ	ing accompanyir	g schedules an	d statements, a	nd to the best of my knowledge and	belief, it is tr	ие, сопте	ct,
Sign	and c	complete Declaration of prepa	rer (other than taxpaye	r or inductary) is ba	ased on all inform	nation of which	preparer has an	y knowledge			
Here		4111/1/1/1/1/	IM			17.30	.11	Irustee			
		Signature of officer or tru	istee	/	•	Date	- <i></i> J	Title			
	•	Print/Type preparer's na	ıme	Preparer's s	gnature		Date 1	, Check if PTI	N		
				h	6 1		コムム	self- employed			
Paid		MARK GIANN	ONE	1 por	12		1/24/	7			
Prepa	rer	Firm's name ► BOS		NE LLC			11	Firm's EIN ►			
Use C											
	-	Firm's address ▶ 10	SHAWNEE	DRIVE		_					
		WA	TCHUNG, N	NJ 0706	9			Phone no 908	<del>-</del> 753-	067	7

FORM 990-PF INTEREST ON SAVI	NGS AND TEN	MPORARY CAS	SH :	INVESTMENTS	STATEMENT	
SOURCE					AMOUNT	
JP MORGAN CHASE				-		21.
TOTAL TO FORM 990-PF, PART I,	LINE 3, CO	OLUMN A		-		21
FORM 990-PF DIVIDEND	S AND INTER	REST FROM 8	SEC	URITIES	STATEMENT	
SOURCE	GROSS	S AMOUNT		PITAL GAINS DIVIDENDS	COLUMN (A AMOUNT	)
JP MORGAN CHASE		19,574.		0.	19,5	74
TOTAL TO FM 990-PF, PART I, L	N 4	19,574.		0.	19,5	74
FORM 990-PF	OTHER :	INCOME			STATEMENT	
DESCRIPTION		(A) REVENUE PER BOOKS		(B) NET INVEST- MENT INCOME	(C) ADJUSTE NET INCO	
CUSTODY FEE REFUND OTHER INVESTMENT INCOME	_	7,82	29.	7,829 141		
TOTAL TO FORM 990-PF, PART I,	LINE 11	7,97	70.	7,970	•	
FORM 990-PF	ACCOUNT	ING FEES			STATEMENT	4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVES MENT INCO				
ACCOUNTING -	1,350		575	•	6	75
TO FORM 990-PF, PG 1, LN 16B	1,350	. (	575	•		75

FORM 990-PF	TAX	ES		STATEMENT 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		
FOREIGN TAXES	476.	476	•	0.
TO FORM 990-PF, PG 1, LN 18	476.	476	•	0.
FORM 990-PF	OTHER E	XPENSES		STATEMENT 6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		
ANNUAL FILING FEES	225.	0	•	0.
TO FORM 990-PF, PG 1, LN 23	225.	0	•	0.
FORM 990-PF	CORPORAT	E STOCK		STATEMENT 7
DESCRIPTION		В	OOK VALUE	FAIR MARKET VALUE
SEE ATTACHED SCHEDULE 9			639,690.	639,690.
TOTAL TO FORM 990-PF, PART I	OTAL TO FORM 990-PF, PART II, LINE 10B		639,690.	639,690.

FORM 990-PF

STATEMENT

8

RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT		AMOUNT	
ANN NORTON SCULPTURE GARDENS 253 BARCELONA ROAD WEST PALM BEACH, FL 33401	N/A 2010 TREE SPONSORSHIP FESTIVAL OF TREES	PUBLIC CHARITY	5,500.	
FLAGLER MUSEUM ONE WHITEHALL WAY PALM BEACH, FL 33480		PUBLIC CHARITY	225.	
JAZZ ASPEN SNOWMASS 110 EAST HALLAM SUITE 104 ASPEN, CO 81611	N/A PRESERVATION & PRESENTATION OF JAZZ THROUGH FESTIVAL	PUBLIC CHARITY	400.	
LES DAMES D'ASPEN, LTD P.O. BOX 609 ASPEN, CO 81612	N/A FUNDING FOR LOCAL CULTRUAL ARTS IN ASPEN AREA	PUBLIC CHARITY	1,200.	
PALM BEACH CIVIC ASSOCIATION 139 NORTH COUNTRY RD SUITE 33 PALM BEACH, FL 33480		PUBLIC CHARITY	2,500.	
PALM BEACH DAY ACADEMY 241 SEAVIEW AVENUE PALM BEACH, FL 33480	N/A ANNUAL GIVING FUND AND AUCTION FUNDRAISER	PUBLIC CHARITY	8,300.	
PRESERVATION FOUNDATION OF PALM BEACH 311 PERUVIAN AVENUE PALM BEACH, FL 33480	N/A PRESERVATION & EDUCATIONAL PROGRAMS	OPERATING FOUNDATION	650.	
THE VINCENT CLUB 71 BRIMMER STREET BOSTON, MA 02108	N/A SUPPORT FOR CLINICAL CARE, RESEARCH AT MEMORIAL HOSP	PUBLIC CHARITY	250.	

GRANTS AND CONTRIBUTIONS

PAID DURING THE YEAR

KARÝN GERSCHEL LAMB FOUNDATION	C/O GERSC		31-6671633
WASHINGTON AND LEE UNIVERSITY UNIVERSITY PLACE LEXINGTON, VA 24450		PUBLIC CHARITY	5,000.
ASPEN CENTER FOR ENVIRONMENTAL STUDIES 100 PUPPY SMITH ST. ASPEN, CO 81611	PRESERVATION	PUBLIC CHARITY	100.
GLADES ACADEMY 105 JUNGLE ROAD PALM BEACH, FL 33480		PUBLIC CHARITY	500.
BOYS AND GIRLS CLUB OF PALM BEACH PALM BEACH LAKES BLVD WEST PALM BEACH, FL 33401	SUPPORT FOR CHILDREN	PUBLIC CHARITY	4,200.
ALBERT SCHWEITZER HOSPITAL IN HAITI P.O. BOX 81046 PITTSBURGH, PA 15217	SUPPORT FOR ASSISTING	PUBLIC CHARITY	1,000.
ST JUDE CHILDREN'S RESEARCH HOSPITAL 501 ST JUDE PLACE MEMPHIS, TN 38105	RESEARCH AND TREATMENT		400.
SOUTH FLORIDA SCIENCE MUSEMUM 4801 DREHER TRAIL NORTH WEST PALM BEACH, FL 33405	N/A SUPPORT FOR EDUCATION IN SCIENCE AND TECHNOLOGY	PUBLIC CHARITY	250.
NEW YORK BOTANTICAL GARDENS 2900 SOUTHERN BOULEVARD BRONX, NY 10458		PUBLIC CHARITY	110.
IRON MAN FOUNDATION 2701 N. ROCKY POINT DR#1250 TAMPA , FL 33607	N/A SUPPORT FOR FOUNDATION'S CHARITABLE ATHLETIC PURPOSE	OPERATING FOUNDATION	
AMERICAN RED CROSS GREATER PALM BEACH AREA CHAPTER 825 FERN ST WEST PALM BEACH, FL 33401	SUPPORT FOR LOCAL	PUBLIC CHARITY	380.

KARŶN GERSCHEL LAMB FOUNDATION	C/O GERSC		31-6671633
PALM BEACH ZOO 1301 SUMMIT BLVD WEST PALM BEACH, FL 33405	N/A SUPPORT FOR MISSION TO FOSTER AWARENESS & RESPECT FOR NATURAL WORLD	PUBLIC CHARITY	850.
JAZZ AT LINCOLN CENTER 70 LINCOLN CENTER NEW YORK, NY 10023	N/A SUPPORT FOR JAZZ AT LINCOLN CENTER 2011 ANNUAL APPEAL	PUBLIC CHARITY	2,000.
TOTAL TO FORM 990-PF, PART XV, LI	NE 3A		34,015.

# PORTFOLIO APPRAISAL

# Karyn Gerschel Lamb Foundation December 31, 2010

31-6671633

Quantity	Security	Unit Cost	Total Cost	Price	Market Value
COMMON STO	СК				
2,000.00	CENOVUS ENERGY	18.08	36,154.51	33.24	66,480.00
1,000.00	CHEVRON TEXACO	41.79	41,790.00	91.25	91.250.00
2,000.00	ENCANA CORP	19.59	39,182.29	29.12	58,240.00
2,000.00	HARTFORD	51.02	102,040.00	26.49	52,980.00
	FIN.SVCS.				
1,500.00	MOSUHOL&MOSUHOL	53.75	80,628.50	61.85	92,775.00
2,000.00	MERCK INC	51.95	103,902.04	36.04	72,080,00
1,000.00	MMM CO	54.35	54,349.70	86.30	86,300.00
1,000.00	MOODY'S CORP	44.79	44,788.65	26.54	26,540.00
1,500.00	PFIZER INC	26.68	40,015.00	17.51	26,265,00
1,000.00	ROYAL DUTCH	51.81	51,810.00	66.78	66,780.00
	SHELL-ADR				·
		_	594,660.69		639,690.00

#### Form **8868**

(Rev. January 2011)

Department of the Treasury Internal Revenue Service

# Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No. 1545-1709

Form 8868 (Rev. 1-2011)

Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filling (e-file). Automatic 3-Month Extension of Form 8870, Information extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Charities & Nonprofits  Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).  A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only  All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.  Type or Name of exempt organization  KARYN GERSCHEL LAMB FOUNDATION  C/O GERSCHEL & CO.  Number, street, and room or suite no. If a P.O. box, see instructions.  600 MADISON AVENUE 16TH FL.  City, town or post office, state, and ZIP code. For a foreign address, see instructions.  NEW YORK, NY 10022-1615  Enter the Return code for the return that this application is for (file a separate application for each return)  Return  Application  Return	• If you	are filing for an Automatic 3-Month Extension, comple	ete only Pa	art I and check this box			ightharpoonup X
Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8888. Electronic filing 6-felt. 9 vice are dectronically if 6-ferm 8804 if you seed a 3-month automate extension of time to the life from 890-T), or an additional (not automatic) 3-month extension of time to the provided in the set of the form 890-T), or an additional (not automatic) 3-month extension of from 890 file form 890-T), or an additional (not automatic) 3-month extension of from 890 file form 890-T), or an additional (not automatic) 3-month extension of from 890 file form 890-T and request an extension of from 890 file form 890-T and requesting of from 890 file form 890-T and requesting an automatic 6-month extension - check this box and complete Part I only All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time for the increme tax retires.  Type or Inch 1997 (G. GERSCHEL LAMB FOUNDATION CORNELL & C.O. Number, street, and room or suite no. If a P.O. box, see instructions.  The first is a sea as a complete file form 990-T (or general application to file form 990-T) (G. GERSCHEL & C.O. Number, street, and room or suite no. If a P.O. box, see instructions.  NEW YORK, NY 10022-1615  Enter the Return code for the return that this application is for (file a separate application for each return)  Application  Is For Code is Form 990-T.  Form 990-T. (or code) 190-T.  Form 990-T. (or c	•	, ,	•		form).		
Electronic filing (e-file). You can electronically file Form 8888 if you need a 3-month automatic extension of time to life file from 9807, or an additional (not automate). 2-month extension of time to file any of the form 9808 to require a extension of time to file any of the form sited in Part I or Part II with the exception of Form 8870, information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRIs in paper format (see instructions). For more details on the electronic filing of this form, will wave in a grouted to file form 9907 and requesting an automatic formonth extension - check this box and complete Part I only  Automatic 3-Month Extension of Time. Only submit original fine copies needed).  A corporation required to file form 9907 and requesting an automatic formonth extension - check this box and complete Part I only  All other corporations (including 1120-C filien), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.  ARYN GERSCHEL LAMB FOUNDATION  CO GERSCHEL & CO.  Number, street, and room or suite no. If a P.O. box, see instructions.  600 MADISON AVENUE 16TH FL.  CO GERSCHEL & CO.  Number, street, and room or suite no. If a P.O. box, see instructions.  NEW YORK, NY 10022-1615  Enter the Return code for the return that this application is for (file a separate application for each return)  Application  Form 990-E  Form 990-F  Code [is For Code   is For Code   is For Code   is For Form 990-F   is Form 9	-	_				m 8868.	
recognized to file Form 990-T), or an additional (not automatic) 3-month extension of time to file any of the forms listed in Part I or Part I with the exception of Form 890-T), information Return for Transferts Amount of Transferts Amount							rporation
of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, wast www.nr.guvitile and click on e-file for Charites & Norprofits    Part I			-				
Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic fling of this form, visits wow, ris, gov/efite and click on e-fite for Charites & Nonprofits  Part I In Automatic 3-Month Extension of Time. Only submit original (no copies needed).  A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only  All other corporations (including 1120-C tilers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.  Type or Name of exempt organization  KARYIN GERSCHEL & CO.  Number, streat, and room or suite no. If a P.O. box, see instructions.  REMINION AVENUE I EIGHT FLINE  City, town or post office, state, and ZIP code. For a foreign address, see instructions.  NEW YORX, NY 10022-1615  Enter the Return code for the return that this application is for (file a separate application for each return)  Application  Enter the Return code for the return that this application is for (file a separate application for each return)  Application  Enter from 9900  Code   Sefor   Code   Is For   Code   Is For		•					
Visit twowurs_govertifies and click on e-file for Chartres & Noprontits		•	•				
Part   Automatic 3-Month Extension of Time, Only submit organial (no copies needed). A corporation required to file Form 990-T and requesting an automatic 5-month extension - check this box and complete Part I only All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file incorne tax returns.    Type or   Name of exempt organization							
Part I analy				bmit original (no copies needed).			
Application   Return code for the return that this application is for   Sorm 990-P   Code   C	A corpo	ration required to file Form 990-T and requesting an auto	matic 6-mo	onth extension - check this box and con	plete		
Type or print	Part I on	ly					<b>▶</b> □
Name of exempt organization   RARYN GERSCHEL AMB FOUNDATION   31-6671633	All other	corporations (including 1120-C filers), partnerships, REM	AICs, and t	rusts must use Form 7004 to request ar	n exten	sion of time	
ARRYN GERSCHEL & CO.    STEED by History Street, and room or suite no. If a P.O. box, see instructions.	to file inc	come tax returns.					
C/O GERSCHEL & CO.  Number, street, and room or suite no. If a P.O. box, see instructions.  600 MADISON AVENUE 16TH FL.  City, town or post office, state, and ZIP code, For a foreign address, see instructions.  NEW YORK, NY 10022–1615  Enter the Return code for the return that this application is for (file a separate application for each return)  Application  Return Application  Return Application  SFOR Code Is For Code  Form 990-BL 02 Form 1041-A 08  Form 990-EZ 03 Form 1720 09  Form 990-EF 04 Form 5227 10  Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 6069 11  Form 990-T (rust other than above)  ***XRRYN GERSCHEL LAMB**  ***The books are in the care of ▶ 264 TRADEWIND DRIVE − PALM BEACH, FL 33480  ***Felephone No. ▶ 561-223-9833**  ***If it is for part of the group, check this box ▶ If it is for part of the group, check this box ▶ If it is for part of the group, check this box ▶ If it is for part of the group, check this box ▶ If it so granuzation's return for:  ***NRCUST 15, 2011 1, to file the exempt organization return for the organization named above. The extension is for.  **If the singulation is for Form 990-PF,	Type or	Name of exempt organization			Emp	loyer identificati	on number
Number, street, and room or suite no. If a P.O. box, see instructions.	print	KARYN GERSCHEL LAMB FOUNDA	TION		1		_
Number, street, and room or sulte no. # a.P.O. box, see instructions.	<b>-</b>	C/O GERSCHEL & CO.			3	<u>1-667163:</u>	3
City, town or post office, state, and ZIP code. For a foreign address, see instructions.  NEW YORK, NY 10022-1615  Enter the Return code for the return that this application is for (file a separate application for each return)    O 4	•	Number, street, and room or suite no. If a P.O. box,	see instruc	tions.			
City, town or post office, state, and ZIP code. For a foreign address, see instructions.   NEW YORK, NY 10022-1615   New York York York York York York York York	filing your	600 MADISON AVENUE 16TH FL	•		_		
Application   Return   Application   Service		City, town or post office, state, and ZIP code. For a f	oreign add	fress, see instructions.			
Application   Return   Code   Is For   Code		NEW YORK, NY 10022-1615			_		
Application   Return   Code   Is For   Code							
Section   Code   Is For   Code	Enter th	e Return code for the return that this application is for (fil	e a separa	te application for each return)			$\begin{bmatrix} 0 & 4 \end{bmatrix}$
Section   Code   Is For   Code			<del></del>				
Form 990 BL	Applica	tion	Return	Application			
Form 990-BL Form 990-EZ	Is For		Code_	*			<del></del>
Form 990-EZ	Form 99	0	01	01 Form 990-T (corporation)			
Form 990-PF	Form 99	0-BL	02	Form 1041-A			
Form 990-T (sec. 401(a) or 408(a) trust)  STORM 990-T (trust other than above)  KARYN GERSCHEL LAMB  The books are in the care of ▶ 264 TRADEWIND DRIVE − PALM BEACH, FL 33480  If the organization does not have an office or place of business in the United States, check this box  If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box  If it is for part of the group, check this box ▶ and attach a list with the names and EINs of all members the extension is for.  I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until  AUGUST 15 , 2011, to file the exempt organization return for the organization named above. The extension is for the organization's return for:  X calendar year 2010 or  X calendar year 2010 or  Change in accounting period  If this application is for Form 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.  If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.  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.  3a \$ \$ 235.	Form 99	0-EZ	03	3 Form 4720			
Form 990-T (trust other than above)    KARYN GERSCHEL LIAMB     The books are in the care of   264 TRADEWIND DRIVE - PALM BEACH, FL 33480     Telephone No.   561-223-983   FAX No.     If the organization does not have an office or place of business in the United States, check this box   If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)   If this is for the whole group, check this box   If this is for part of the group, check this box   If this is for part of the group, check this box   If this is for part of the group, check this box   If this is for part of the group, check this box   If this is for the whole group, check this box   If this is for a different stream of the group that the properties of the properties of the extension is for.	Form 99	0-PF	04	04 Form 5227			
**KARYN GERSCHEL LAMB  The books are in the care of ▶ 264 TRADEWIND DRIVE - PALM BEACH, FL 33480  Telephone No. ▶ 561-223-9833 FAX No. ▶  If the organization does not have an office or place of business in the United States, check this box  If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)	Form 99	0-T (sec. 401(a) or 408(a) trust)	+	5 Form 6069			
The books are in the care of ▶ 264 TRADEWIND DRIVE - PALM BEACH, FL 33480  Telephone No. ▶ 561-223-9833 FAX No. ▶  If the organization does not have an office or place of business in the United States, check this box  If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box  If this is for part of the group, check this box ▶ and attach a list with the names and EINs of all members the extension is for.  Trequest an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until  AUGUST 15, 2011 , to file the exempt organization return for the organization named above. The extension is for the organization's return for:  ▶ X calendar year 2010 or  ▶ tax year beginning , and ending  If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.  If this application is for Form 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any estimated tax payments made. Include any prior year overpayment allowed as a credit.  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 99						
Telephone No. ▶ 561-223-9833  FAX No. ▶  If the organization does not have an office or place of business in the United States, check this box  If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box  If this is for part of the group, check this box ▶ and attach a list with the names and EINs of all members the extension is for.  I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until  AUGUST 15, 2011 , to file the exempt organization return for the organization named above. The extension is for the organization's return for:  ▶ ▼ calendar year 2010 or  ★ tax year beginning , and ending and ending  If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return  Change in accounting period  If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.  If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.  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.  3c \$ 235.				DATH DEAGH DE 22	400		
If the organization does not have an office or place of business in the United States, check this box  If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)			DKIVE		400		<del> </del>
If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)	-						<b>-</b> —
If it is for part of the group, check this box		•				- 41	
1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until  AUGUST 15, 2011 , to file the exempt organization return for the organization named above. The extension is for the organization's return for:  ▶ ※ calendar year 2010 or  ▶ □ tax year beginning , and ending  2 If the tax year entered in line 1 is for less than 12 months, check reason: □ Initial return □ Final return  □ Change in accounting period  3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.  3a \$ 483.  b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.  5 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.  3c \$ 235.	_		_				
AUGUST 15, 2011, to file the exempt organization return for the organization named above. The extension is for the organization's return for:    X   Calendar year 2010   Or						ers the extension	1 IS TOR.
is for the organization's return for:  ▶ X calendar year 2010 or  ▶ tax year beginning, and ending  2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return  Change in accounting period  3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	1 Ir					The extension	
▶ X calendar year 2010 or   ▶ tax year beginning	_		ot organiza	mon return for the organization framed a	above.	The extension	
tax year beginning							
If the tax year entered in line 1 is for less than 12 months, check reason:  Change in accounting period  If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.  If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.  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.  Initial return  Final return  Final return  Final return  Final return  Final return  Final return  Sa \$ 483.				ed anding			
Change in accounting period  3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.  3a \$ 483.  b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.  3b \$ 248.  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.  3c \$ 235.		Lax year beginning	, an	de chally		_ ·	
Change in accounting period  3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.  3a \$ 483.  b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.  3b \$ 248.  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.  3c \$ 235.	9 If	the tax year entered in line 1 is for less than 12 months.	check reas	on: Initial return Fina	al retur	n	
3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.  3a \$ 483.  b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.  3b \$ 248.  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.  3c \$ 235.	- "r		oncon reas	on	2,,010,		
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