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Form 990-PF

Internal Revenue Service

Return of Private Foundation

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

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements.

2010

OMB No 1545-0052

General Interval apply. Interval interv	Fo	r cale	endar year 2010, or tax year beginning			, and e	nding		
Name of foundation LEONARD A. AND LINDA K. GREENBERG A Employer identification number LEONARD A. AND LINDA K. GREENBERG CHARITABLE POUNDATION, INC.	G	Chec	k all that apply: Initial return		Initial return of a f			Final retur	П
LEONARD A. AND LINDA K. GRERNBERG CHAPTTABLE POUNDATION, INC. Number and cause to P O be marked from or and descriped sized strikingon. A 90 I FARRMONT AVENUE Chy of them, state, and P2 pole of BETHESDIA, MD 20814 Check type of organization. List Section 5916(5)(3) ecempt private foundation. Section 4947(s)(1) nonexempt characher buts!			Amended return		_	-			
LEONARD A. AND LINDA K. GREENBERG CHARTTABLE FOUNDATION, INC. 14901 FAIRMONT AVENUE 200 Clay of frows, state, and ZIP code BETHESDA. MD 20814 Check type of organization. IX Section 5010((3) exempl private foundation.	N	ame o	of foundation					A Employer identificatio	n number
Section 1947(a) Debugging of the production of the production Section 1947(a) Debugging of the production Section 19			LEONARD A. AND LINDA	K.	GREENBERG	•		, ,	
Renormante Po Do so, number of mail and deflowed to sever addressed 4901 PATRIMONT AVENUE 200 (301) 657-2525			CHARITABLE FOUNDATION	N,	INC.			52-1883238	3
A 9.01 PATRMONT AVENUE	N	ımber	and street (or P O box number if mail is not delivered to str	eet addre	ss)		Room/suite	 	
Cit of towns, state, and 2/P code BETHESDA MD 20 81 4 N Check type of organization: X Section 501(c)(3) exempt private foundation 2 1 1 1 2 2 2 2 2 3 3 3 3 3			4901 FAIRMONT AVENUE	:			200	1 '	2525
BETHESDA, MD 20814 Check they for organizations, Check here Continued to minimal to the continued to t	C	ty or	town, state, and ZIP code						
Section 4947(a)(1) nonexempt characterists: Other taxable private foundation Fair matter's value of a large of a lead of year Jacouring method. Xa Cash Accrual Individual of the processor Xa Individual o	L		BETHESDA, MD 20814					D 1 Foreign organization	s, check here
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The market value of all assess at end of year Accounting method: X Cash Accrual Indices section 507(1)(1)(A, check here Indices Accounting the continue of the		<u> </u>				ation			
Part Analysis of Revenue and Expenses Cheese Ch	+	air m	arket value of all assets at end of year J Accou	nting m	ethod: X Cash	Accr	ual		
Part Analysis of Revenue and Expenses Che task of amounts in columns (b), (c), and (c) must be on cash basis) Under section 507(V)(V)(b), check here V V V V V V V V V	(from						F If the foundation is in a	60-month termination
Contributions, giffs, grants, etc., received 11, 500. N/A				lumn (e	d) must be on cash	basis.)			
1 Chick	P	art	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not						(d) Disbursements
2 Cock		1	necessarily equal the amounts in column (a))	- 6		inco	me		
The continue of the continue		1		L	11,500.			N/A	
Care Continued Care Ca	-	2	·	ļ					-
Sa Gross rerits	O f	3	cash investments	-					
10 10 10 10 10 10 10 10	7	1		<u> </u>	1,835.		1,835.		STATEMENT 1
Sample S	-	5a	Gross rents	ļ			· · - · · ·		`
		1 .	· / ———————————————————————————————————						
	90.	6a	Gross sales price for all	-					
## Net Short-term Capting again RECEIVED 10a and allowances AUG 0 2 7/11 Q C Gross profit or (tos) P C C C C C C C C C	۷ و	_[assets on line 6a	-					
10 C Gross profit or (loss)		(_	1		<u> </u>		<u> </u>
10 C Gross profit or (loss)	뿔	1 -	lease madifications) 					
10 C Gross profit or (loss)	2	100	nicome monnications						
10 C Gross profit or (loss)	S	108	and allowances	118					
11 Other income 12 Total. Add lines 1 Incough: 41 13 (335. 1,835. 1) 13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees 1 b Accounting fees STMT 2 2,600. 0. 0. 0. 2 c Other professional fees 17 Interest 18 Taxes STMT 3 53. 0. 0. 0. 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses STMT 4 18. 0. 0. 0. 24 Total operating and administrative expenses. Add lines 24 and 25 11,058. 26 Total expenses and disbursements Add lines 24 and 25 13,729. 0. 11,058. 27 Subtract line 26 from line 12: 28 Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) 2 Adjusted net income (if negative, enter -0-) 3 C Adjusted net income (if negative, enter -0-) 3 C Adjusted net income (if negative, enter -0-) 5 Adjusted net income (if negative, enter -0-) 5 C Adjusted net income (if negative, enter -0-)	$\check{\omega}$			10			<u>.</u>		
12 Total, Add lines 1 Through 1 13,335. 1,835. 13 Compensation of officers, directors, trustees, etc 0. 0. 0. 0. 14 Other employee salaries and wages		1	(Transportation						
13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees b Accounting fees STMT 2 2,600. 0. 0. 17 Interest 18 Taxes STMT 3 53. 0. 0. 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses STMT 4 18. 0. 0. 24 Total operating and administrative expenses. Add lines 13 through 23 2,671. 0. 25 Contributions, gifts, grants paid 11,058. 26 Total expenses and disbursements Add lines 24 and 25 13,729. 0. 11,058. 27 Subtract line 26 from line 12: 28 Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) 10 O. 11 Tavel, conferences, and meetings 22 Printing and publications 3 Other expenses STMT 4 18. 0. 0. 11 O. 12 O. 13 O. 14 O. 15 O. 16 O. 17 O. 18 O. 18 O. 18 O. 18 O. 19 O. 19 O. 19 O. 19 O. 19 O. 19 O. 10 O. 10 O. 10 O. 10 O. 11 O. 10 O. 11 O. 11 O. 12 O. 13 O. 14 O. 15 O. 16 O. 17 O. 18 O. 18 O. 19 O. 19 O. 10 O. 11 O. 10 O. 11 O. 11 O. 12 O. 13 O. 14 O. 15 O. 16 O. 17 O. 18 O. 18 O. 18 O. 18 O. 19 O		1			13.335.		1.835.		
14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees b Accounting fees STMT 2 2,600. 0. 0. 17 Interest 18 Taxes STMT 3 53. 0. 0. 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses STMT 4 18. 0. 0. 24 Total operating and administrative expenses. Add lines 13 through 23 2,671. 0. 0. 25 Contributions, gifts, grants paid 11,058. 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-)						<u> </u>			0.
16a Legal fees b Accounting fees C Other professional fees 17 Interest 18 Taxes STMT 3 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses 24 Total operating and administrative expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid 26 Total expenses and disbursements Add lines 24 and 25 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) c N/A									
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b Accounting fees STMT 2 2,600. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0.	Ses	16a					-		
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Interest Int	Ä	C	Other professional fees		·				
25 Contributions, girts, grains paid 26 Total expenses and disbursements Add lines 24 and 25 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) N/A	e. S.	17	Interest						
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25 Contributions, girts, grains paid 26 Total expenses and disbursements Add lines 24 and 25 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) N/A	Ă	21	•						
25 Contributions, girts, grains paid 26 Total expenses and disbursements Add lines 24 and 25 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) N/A	anc	22							
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25 Contributions, girts, grains paid 26 Total expenses and disbursements Add lines 24 and 25 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) N/A	rat	24					_		_
25 Contributions, girts, grains paid 26 Total expenses and disbursements Add lines 24 and 25 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) N/A	å	-	•	ļ			0/•		
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27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) N/A		26	-		12 720		0		11 050
a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) N/A		07		_	13,149.		U.		11,028.
b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) N/A		1			204				
c Adjusted net income (if negative, enter -0-)		1	·	-	-354.		1 835		
023501 12-77-10 LHA For Paperwork Reduction Act Notice, see the instructions.		1				<u>-</u>	.,000.	NI/A	
140 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	023			e the in	structions		··-	Μ/Α	Form 990-PF (2010)

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'Form	990-PF (2010) CHARITABLE FOUNDATION,	INC.	52-	1883238 Page 2
Pai	Halance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	
	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1 Cash - non-interest-bearing	577.	23.	23.
	2 Savings and temporary cash investments			
	3 Accounts receivable ►			
l	Less: allowance for doubtful accounts			
} '	4 Pledges receivable ►	1		
	Less: allowance for doubtful accounts			
	5 Grants receivable	ļ		
(6 Receivables due from officers, directors, trustees, and other			
	disqualified persons	-		
1	7 Other notes and loans receivable	- 1		
	Less: allowance for doubtful accounts			
ssets	3 Inventories for sale or use			
Ass	Prepaid expenses and deferred charges			
- 10	3a Investments - U.S. and state government obligations			
	b Investments - corporate stock			
	c Investments - corporate bonds			
11.		{		
	Less accumulated depreciation	 		
i	2 Investments - mortgage loans 3 Investments - other STMT 5	75,000.	75,000.	75,000.
13		75,000.	75,000.	13,000.
14	Land, buildings, and equipment basis			•
1,1	5 Other assets (describe			
'`	Other assets (describe >			
16	Total assets (to be completed by all filers)	75,577.	75,023.	75,023.
17				
18			· 	-
			· · · · · · · · · · · · · · · · · · ·	
₹ 20			· · · · · · · · · · · · · · · · · · ·	
Liabilities 51				
ت ₂₂		2,000.	2,000.	
	,			i .
23	Total liabilities (add lines 17 through 22)	_2,000.	2,000.	
	Foundations that follow SFAS 117, check here			
	and complete lines 24 through 26 and lines 30 and 31.			
8 24	Unrestricted			
Net Assets or Fund Balances	Temporarily restricted			
E 26				
핕	Foundations that do not follow SFAS 117, check here			
띹	and complete lines 27 through 31.			
g 27	Capital stock, trust principal, or current funds	0.	0.	
8 28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
Ž 29	Retained earnings, accumulated income, endowment, or other funds	73,577.	73,023.	
\$ 30	Total net assets or fund balances	73,577.	73,023.	
			55 000	
31	Total liabilities and net assets/fund balances	75,577.	75,023.	
Par	Analysis of Changes in Net Assets or Fund B	alances		
1 Tot	tal net assets or fund balances at beginning of year - Part II, column (a), line	30		
(m	ust agree with end-of-year figure reported on prior year's return)	·	1	73,577.
2 En	ter amount from Part I, line 27a		. 2	-394.
3 Oth	ner increases not included in line 2 (itemize)		3	0.
4 Ad	d lines 1, 2, and 3		4	73,183.
5 De	creases not included in line 2 (itemize) NON DEDUCTIBLE	CONTRIBUTIONS	5	160.
6 To	tal net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30	6	73,023.

023511 12-07-10

Page 3

	the kind(s) of property sold (e.g., real estate buse; or common stock, 200 shs. MLC Co.)	')	b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a			D Donation		
b · NONE					
C .					
d					
e					
(e) Gross sales price		cost or other basis s expense of sale		(h) Gain or (loss (e) plus (f) minus	
a					
b					
С					
d					
e					
Complete only for assets showing ga	in in column (h) and owned by the foundation	on on 12/31/69	(1)	Gains (Col. (h) gain	minus
(i) F.M.V. as of 12/31/69		Excess of col. (I) er col. (j), if any	col.	(k), but not less that Losses (from col. (1 -0-) or
a					
b					
С					
d					
e					
2 Capital gain net income or (net capital	lf gain, also enter in Part I, lin loss)	e 7	2	-	
3 Net short-term capital gain or (loss) as	defined in sections 1222(5) and (6):)	,		
If gain, also enter in Part I, line 8, colur If (loss), enter -0- in Part I, line 8			3	· · · · · · · · · · · · · · · · · · ·	
Part V Qualification Unde	er Section 4940(e) for Reduce	d Tax on Net in	vestment Inc	ome	
(For optional use by domestic private four	ndations subject to the section 4940(a) tax o	on net investment inco	me.)		
K 40 40/d)/(0)	a b b a b				
If section 4940(d)(2) applies, leave this pa	ITT DIANK.				
Was the foundation liable for the section 4	942 tax on the distributable amount of any	year in the base period	1 ?		Yes X No
	nder section 4940(e). Do not complete this p			•	
	column for each year; see instructions befor				
(a) Base period years	(b)	1 ((c)	Donton	(d) ution ratio
Base period years Calendar year (or tax year beginning in)	والمراجع وا	Net value of nonci	haritable-use assets	(col. (b) divi	ution ratio ded by col. (c))
2009	27,210		75,991		.358069
2008	16,950		102,163		.165911
2007	55,919		87,210		.641199
2006	82,165		10,175		8.075184
2005	74,374.		72,177		1.030439
2000	12,372		12,11	•	1.000407
2 Total of line 1, column (d)					10.270802
, ,	r baco period - divide the total on line 2 by 5	or by the number of		2	10.270002
	r base period - divide the total on line 2 by 5	, or by the number of	years		2 054160
the foundation has been in existence if	less than 5 years	-		3	2.054160
					74 170
4 Enter the net value of noncharitable-us	e assets for 2010 from Part X, line 5			4	74,170.
5 Multiply line 4 by line 3			•	5	152,357.
6 Enter 1% of net investment income (19	% of Part I, line 27b)	-		6	18.
7 Add lines 5 and 6			-	7	152,375.
8 Enter qualifying distributions from Part	XII, line 4			8	11,058.
If line 8 is equal to or greater than line	7, check the box in Part VI, line 1b, and com	plete that part using a	1% tax rate.		
See the Part VI instructions.					
022524 12.07-10				Ec	rm 990-PF (2010)

LEONARD A. AND LINDA K. GREENBERG			
Form 990-PF (2010) CHARITABLE FOUNDATION, INC. 52-188			Page 4
Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	instru	ıctic	ns)
1a Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.			
Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)			
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🔲 and enter 1%			<u>37</u> .
of Part I, line 27b •			
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			_0.
3 Add lines 1 and 2			37.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-			37.
6 Credits/Payments:			
a 2010 estimated tax payments and 2009 overpayment credited to 2010 6a			
b Exempt foreign organizations - tax withheld at source 6b			
c Tax paid with application for extension of time to file (Form 8868)			
d Backup withholding erroneously withheld			
7 Total credits and payments. Add lines 6a through 6d			0.
8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8			
9 Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed SEE STATEMENT 7 > 9			37.
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			<u> </u>
11 Enter the amount of line 10 to be: Credited to 2011 estimated tax			
Part VII-A Statements Regarding Activities			
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in	\neg	Yes	No
any political campaign?	1a		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?	1b		X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or	- ''		
distributed by the foundation in connection with the activities			
c Did the foundation file Form 1120-POL for this year?	1 40		x
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:	1c		<u> </u>
(1) On the foundation. \triangleright \$ O . (2) On foundation managers. \triangleright \$ O .			
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			
managers. > \$ 0.			ļ
2 Has the foundation engaged in any activities that have not previously been reported to the IRS?	,		x
· · · · · · · · · · · · · · · · · · ·	2		<u> </u>
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			v
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	3		X
	4a		<u> </u>
b If "Yes," has it filed a tax return on Form 990-T for this year? N/A	4b		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
If "Yes," attach the statement required by General Instruction T.	1 1		ĺ
Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			
By language in the governing instrument, or			
By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law	_		
remain in the governing instrument?	6	7.	<u> X</u>
7 Did the foundation have at least \$5,000 in assets at any time during the year?	7	X	
If "Yes," complete Part II, col. (c), and Part XV.	1 1		
8a Enter the states to which the foundation reports or with which it is registered (see instructions)			
MD			ĺ
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	8b	<u>X</u>	<u> </u>
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar			
year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If "Yes," complete Part XIV	9		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		X

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

LEUNARD A. AND LINDA K.	GKEENBEKG			
Form 990-PF (2010) CHARITABLE FOUNDATION,	INC.		52-18832	238 Page <u>6</u>
Part VII-B Statements Regarding Activities for Which	Form 4720 May Be	Required (contil	nued)	····
5a During the year did the foundation pay or incur any amount to:				
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	on 4945(e))?	Y	es X No]]
(2) Influence the outcome of any specific public election (see section 4955);	or to carry on, directly or indi	rectly,		1 1
any voter registration drive?		Y	es X No	
(3) Provide a grant to an individual for travel, study, or other similar purpose	s?		es X No	1 1
(4) Provide a grant to an organization other than a charitable, etc., organization		-	İ	
509(a)(1), (2), or (3), or section 4940(d)(2)?			es X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary	or educational purposes, or			
the prevention of cruelty to children or animals?	, 0, 000000000, 0,		es X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un	der the exceptions described			
section 53.4945 or in a current notice regarding disaster assistance (see instri		in regulations	N/A	5b
Organizations relying on a current notice regarding disaster assistance check				
		wood		
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption			es No	
expenditure responsibility for the grant?		1/A L Y	es L NO	
If "Yes," attach the statement required by Regulations section 53.494				
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on	ر	es X No	
a personal benefit contract?		Y(
b Did the foundation, during the year, pay premiums, directly or indirectly, on a	personal benefit contract?		_	6b X
If "Yes" to 6b, file Form 8870.				
7a At any time during the tax year, was the foundation a party to a prohibited tax		Ye	es X No	
b If "Yes," did the foundation receive any proceeds or have any net income attrib				7b
Part VIII Information About Officers, Directors, Trust	tees, Foundation Ma	anagers, Highly	y	
Palu Employees, and Contractors				
1 List all officers, directors, trustees, foundation managers and their	1	1 (-) Companyation	(d) Contributions to	
(a) Name and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
	to position	enter -0-)	compensation	allowances
LEONARD GREENBERG	DIRECTOR			
4901 FAIRMONT AVENUE, SUITE 200				
BETHESDA, MD 20814	0.00	0.	0.	0.
BARRETT PENAN	DIRECTOR		1	
1451 ROCKVILLE PIKE, SUITE 400]	1		
ROCKVILLE, MD 20852	0.00	0.	0.	0.
MARK PALMER	DIRECTOR			
ONE CHURCH STREET	}			
ROCKVILLE, MD 20852	0.00	0.	0.	0.
STUART SCHOOLER	DIRECTOR			
7801 NORFOLK AVENUE, SUITE 200]			
BETHESDA, MD 20814	0.00	0.	0.	0.
2 Compensation of five highest-paid employees (other than those inc		enter "NONE."	·	•
4 4 450000	(b) Title, and average hours per week		(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	and deferred compensation	account, other allowances
NONE				
NONE	1			
	1			
	 	†		
	†			
	 	 		
	1			
		-		
	1			
Total number of other employees paid over \$50,000	I	J		0
LOTAL HUBBLET OF BRIDGE STREET STREET STREET				U

Total, Add lines 1 through 3

F	Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign for	undations, s	ee instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а		1a	75,000
Ь		1b	300.
С		1c	
d	Total (add lines 1a, b, and c)	1d	75,300.
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	T 2	0.
3	Subtract line 2 from line 1d	3	75,300.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	1,130.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	74,170.
6	Minimum investment return Enter 5% of line 5	6	3,709.
P	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations a foreign organizations check here and do not complete this part.)	nd certain	
1	Minimum investment return from Part X, line 6	1	3,709.
2a	Tax on investment income for 2010 from Part VI, line 5		<u> </u>
ь	Income tax for 2010. (This does not include the tax from Part VI.)		
c	Add lines 2a and 2b	2c	37.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	3,672.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	3,672.
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	3,672.
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	11,058.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	11,058.
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	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	11,058.
	Note The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	qualifies for th	ne section
	4940(e) reduction of tax in those years.		

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2009	(c) 2009	(d) 2010
1 Distributable amount for 2010 from Part XI,				3,672.
2 Undistributed income, if any, as of the end of 2010				3,012.
a Enter amount for 2009 only			0.	
b Total for prior years:				
		0.		
3 Excess distributions carryover, if any, to 2010:			* *	
a From 2005 70,821.				
b From 2006 81,706.				
c From 2007 51,638.				
d From 2008 11,928.				
e From 2009 23,463.				
f Total of lines 3a through e	239,556.			
4 Qualifying distributions for 2010 from				
Part XII, line 4: ►\$ 11,058.				
a Applied to 2009, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			·
d Applied to 2010 distributable amount				3,672.
e Remaining amount distributed out of corpus	7,386.			
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	246,942.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2009. Subtract line				-
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2010. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2011				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2005		-		
not applied on line 5 or line 7	70,821.		-	
9 Excess distributions carryover to 2011.				
Subtract lines 7 and 8 from line 6a	176,121.			
10 Analysis of line 9:				
a Excess from 2006 81,706.	-		}	
b Excess from 2007 51,638.				
c Excess from 2008 11,928.				
d Excess from 2009 23, 463.		ļ		
e Excess from 2010 7,386.				Fr 000 DE (0040)

Form 990-PF (2010) CHARITZ	ABLE FOUNDAT	ION, INC.			383238 Page 1
Part XIV Private Operating F		·		N/A	·····
1 a If the foundation has received a ruling (
foundation, and the ruling is effective fo	•	-	▶ └		
b Check box to indicate whether the foun		ng foundation described		4942(j)(3) or4	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		_
income from Part I or the minimum	(a) 2010	(b) 2009	(c) 2008	(d) 2007	(e) Total
investment return from Part X for					
each year listed					
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	<u> </u>				
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)					
, , , , , , , , , , , , , , , , , , , ,				<u> </u>	
(2) Support from general public and 5 or more exempt					
organizations as provided in					
section 4942(j)(3)(B)(III)					<u> </u>
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income					<u></u>
Part XV Supplementary Info			if the foundation	had \$5,000 or mo	ore in assets
at any time during t	ne year-see the i	nstructions.)			
1 Information Regarding Foundation	n Managers:				
a List any managers of the foundation wh			tributions received by the	foundation before the clos	se of any tax
year (but only if they have contributed in	nore than \$5,000). (See se	ection 507(d)(2).)			
NONE					
b List any managers of the foundation wh	o own 10% or more of the	stock of a corporation	(or an equally large portion	on of the ownership of a pa	artnership or
other entity) of which the foundation has			, , , ,		•
NONE					
2 Information Regarding Contributi	on Grant Gift Loan	Scholarshin etc. P	rograms:		***************************************
			_	not accept unsolicited requ	ests for funds. If
the foundation makes gifts, grants, etc.	(see instructions) to indiv	iduals or organizations i	under other conditions, co	omplete items 2a, b, c, and	l d.
a The name, address, and telephone num	ber of the person to whom	n applications should be	addressed:		
	HE FOUNDATION				
4901 FAIRMONT AVENUE		, BETHESDA			
b The form in which applications should b					
LETTER REQUEST	c submitted and informat	ion and materials they s	nould include.		
c Any submission deadlines:		· · · · · · · · · · · · · · · · · · ·			
NONE					
	e cuch ac hy gangganhina	Largae shardahla fialda	kinds of institutions or	other factors:	
d Any restrictions or limitations on awards NONE	o, acon as by geographica	i ai cas, chai hadie heigs	, หมานอ งา เทรนเนนเบทร, 0f (Juici IdelUIS.	
TACTATA					
023601 12-07-10					Form 990-PF (2010)
020001 12701710					TOTAL 220-E.E. (2010).

LEONARD A. AND LINDA K. GREENBERG

Form 990-PF (2010) CHARITABLE FOUNDATION, INC.

Part XV | Supplementary Information (continued)

52-1883238 Page 11

Recipient	If recipient is an individual,	Foundation	Purpose of grant or	
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amoun
a Paid during the year	or substitution to the libertol			
,				
			•	
SEE STATEMENT 9				
Total			<u>▶</u> 3a	11,0
b Approved for future payment				
NONE				
				
Total 3611 12-07-10			▶ 3b	rm 990-PF

vities

Enter gross amounts unless otherwise indicated.	Unrelated t	ousiness income	Excluded	by section 512, 513, or 514	
enter gross amounts unless otherwise indicated.	(a) Business	(b)	(c)	(d)	(e) Related or exempt
1 Program service revenue:	Business code	Amount	sion	Amount	function income
a,		·			
b					
С					
d	1				
e					
f	_				
g Fees and contracts from government agencies					
2 Membership dues and assessments			1		
3 Interest on savings and temporary cash					
investments .					
4 Dividends and interest from securities			14	1,835.	
5 Net rental income or (loss) from real estate:			 		
a Debt-financed property			<u> </u>		
b Not debt-financed property	-				
6 Net rental income or (loss) from personal				1	
property					
7 Other investment income			 		
8 Gain or (loss) from sales of assets other	į l				
than inventory	<u> </u>				
9 Net income or (loss) from special events	ļ		-		
10 Gross profit or (loss) from sales of inventory		······································	+		
11 Other revenue:					
a			 		
b			+-+-		
cd	1 1		+		
de			 		
12 Subtotal. Add columns (b), (d), and (e)		0.		1,835.	0
3 Total. Add line 12, columns (b), (d), and (e)			<u>'</u>		1,835
See worksheet in line 13 instructions to verify calculations.)			•		1,033
Part XVI-B Relationship of Activities	to the Accom	nlichment of E	vemnt D	urnosos	
rait AVI-B Relationship of Activities	to the Accom	pusitinent of E.	xempt P	urposes	
Line No. Explain below how each activity for which inco	ome is reported in co	olumn (e) of Part XVI-A	A contributed	I importantly to the accomp	lishment of
▼ the foundation's exempt purposes (other than	by providing funds	for such purposes).			
				· · · · · · · · · · · · · · · · · · ·	
					
					<u> </u>
		·		-	
		· · · · · · · · · · · · · · · · · · ·			
					
	·				

023621 12-07-10

ו שום נות ו	organization directly of indi	irecuy engage in an	y of the followi	ng with any other organizati	on described in sectio.	1 50 1(0) 01	1	16	3 140
the Code	e (other than section 501(c	;)(3) organizations)	or in section 5	27, relating to political orgai	nizations?				٠
a Transfer	rs from the reporting found	lation to a nonchard	table exempt o	rganization of:					
(1) Cas	sh •			-	-		. <u>1a</u>	(1)	X
(2) Oth	er assets						<u>1a</u>	(2)	X
b Other tra	ansactions:								
(1) Sale	es of assets to a noncharita	ıble exempt organız	ation .		•		16	(1)	X
(2) Pur	chases of assets from a no	ncharitable exempt	organization				1b	(2)	X
(3) Ren	ital of facilities, equipment,	or other assets					1b	(3)	X
(4) Reir	mbursement arrangements						1b	(4)	X
(5) Loa	ns or loan guarantees					_	1b	(5)	X
(6) Perf	formance of services or me	embership or fundra	using solicitatio	ons			1b	(6)	X
c Sharing	of facilities, equipment, ma	uling lists, other ass	ets, or paid en	ployees				c	X
d If the ans	swer to any of the above is	"Yes," complete the	following sch	edule. Column (b) should ah	ways show the fair ma	ket value of the	goods, other	assets,	
				ed less than fair market valu					
column ((d) the value of the goods,	other assets, or ser	vices received.						
a) Line no	(b) Amount involved	(c) Name (of noncharitabl	e exempt organization	(d) Description of	transfers, transac	tions, and sharin	g arranger	nents
			N/A						
		_					,		
				· · · · · · · · · · · · · · · · · · ·	-				
				· · · · · · · · · · · · · · · · · · ·					
 	·····				1				
						··- ··· · · ····			
									
			····	-					
							•		
									
						······			
De la tha fau	undation disastly or indicast	the officered with or	rolated to ano	or more toy exampt erace:					
	•	•		or more tax-exempt organi	zations described			۰. ٦	X No
	n 501(c) of the Code (other complete the following scho	•	(3)) or iii sec	uon 527 ?			T	3S L2	סאו ריבי
b ii Yes, c	complete the following scrie (a) Name of org			(b) Type of organization	(c)	Description of	relationship		
		Janization		(b) Type of organization	(6)	Description of	Ciauonamp		
··	N/A								
						· · · · · · · · · · · · · · · · · · ·			
Llas	//	a that I have avanced	thus and use an electric						
l and				ing accompanying schedules and ased on all <u>info</u> rmation of which p			ge and bellet, it i	s true, con	rect,
Sign "" Here									
nere					 	SIDENT			
	Signature of officer or tru			Date/	Title		DTIN		
	Print/Type preparer's na		reparer's s	ignature		neck rf	PTIN		
	BARRETT J.	PENAN,	1 <i> KI</i>	MM/#7/	"//z/ Se	tf- employed			
Paid -	CPA			ייעיווןי					
Preparer	•	AN & SCOT	TT, P.C	!•	· [irm's EIN 🟲			
Use Only									
	Firm's address ► 14				0				
	RO	CKVILLE,	MD 208	52-1498		Phone no.	(301) 8	38-0	<u> </u>

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 organizatio		Employer identification number
	EONARD A. AND LINDA K. GREENBERG	52-1883238
Organization type (check		<u> </u>
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt chantable trust not treated as a private foundation	
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt chantable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
	is covered by the General Rule or a Special Rule. c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Ru	de Coe material
Note. Only a section 50 ft	-)(r), (o), or (10) organization can check boxes for both the General Rule and a Special Ru	ile. See instructions.
General Rule		
	on filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in miplete Parts I and II.	oney or property) from any one
Special Rules		
509(a)(1) and 170	(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the reg (b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1 Complete Parts I and II	
aggregate contrib	(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributions of more than \$1,000 for use exclusively for religious, chantable, scientific, literary, cruelty to children or animals. Complete Parts I, II, and III.	
contributions for (If this box is chec purpose Do not o	(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributes exclusively for religious, charitable, etc., purposes, but these contributions did not agreed, enter here the total contributions that were received during the year for an exclusive complete any of the parts unless the General Rule applies to this organization because it lie, etc., contributions of \$5,000 or more during the year	gregate to more than \$1,000. In religious, chantable, etc.,
but it must answer "No" or	that is not covered by the General Rule and/or the Special Rules does not file Schedule En Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 ling requirements of Schedule B (Form 990, 990-EZ, or 990-PF).	· ·

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

Schadula B	Form 990, 990-EZ, or 990-PF) (2010)		Page $oldsymbol{1}$ of $oldsymbol{1}$ of Part !
Name of or		Em	Page I of I of Part I ployer identification number
	RD A. AND LINDA K. GREENBERG		
CHARI	TABLE FOUNDATION, INC.		52-1883238
Part I	Contributors (see instructions)		
(a) No.	. (b)	(c)	(d)
140.	Name, address, and ZIP + 4	Aggregate contribution	S Type of contribution
1	LEONARD GREENBERG		Person X Payroll
	4901 FAIRMONT AVENUE #200	\$11,500	=
	BETHESDA, MD 20814		is a noncash contribution)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
		\$	Person Payroll Noncash (Complete Part II of there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Occupate Part II of there is a noncash contribution.
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
			Person Payroli

023452 12-23-10

Noncash (Complete Part II if there is a noncash contribution)

of Part II

Name of organization
LEONARD A. AND LINDA K. GREENBERG
CHARITABLE FOUNDATION, INC.

Employer identification number

52-1883238

Part II Noncash Property (see instructions)

	- using the point, (and minimum)		
(a) . No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a)			
from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\ \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
			l

Schedule B (Form 990, 990-EZ, or 990-PF) (2010) Page of Part III Name of organization Employer identification number LEONARD A. AND LINDA K. GREENBERG CHARITABLE FOUNDATION, 52-1883238 Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations aggregating more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once See instructions) > \$ (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. (d) Description of how gift is held from (b) Purpose of gift (c) Use of gift (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

FORM 990-PF DIVIDEN	DS AND INT	EREST FROM	SECU	RITIES	STATEMENT	1
SOURCE .	GRO	SS AMOUNT		ITAL GAINS IVIDENDS	COLUMN (A AMOUNT)
BANK OF NEW YORK - STATE OF ISRAEL INTEREST INCOME		1,823.		0.	1,82	23.
TOTAL TO FM 990-PF, PART I, 1	LN 4	1,835.		0.	1,83	35.
FORM 990-PF	ACCOUNT	ING FEES	-		STATEMENT	2
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVE MENT INC	EST-			
ACCOUNTING	2,600	•	0.			0.
TO FORM 990-PF, PG 1, LN 16B	2,600	•	0.			0.
FORM 990-PF	TA	XES			STATEMENT	3
DESCRIPTION	(A) EXPENSES PER BOOKS		ST-	(C) ADJUSTED NET INCOME	(D) CHARITAE PURPOSE	LE
	EXPENSES	NET INVE MENT INC	ST-	ADJUSTED	CHARITAE	LE
FEDERAL INCOME TAX	EXPENSES PER BOOKS	MENT INC	ST- COME	ADJUSTED	CHARITAE	SLE S
FEDERAL INCOME TAX TO FORM 990-PF, PG 1, LN 18 =	EXPENSES PER BOOKS 53	MENT INC	COME 0.	ADJUSTED NET INCOME	CHARITAE	BLE S O.
DESCRIPTION FEDERAL INCOME TAX TO FORM 990-PF, PG 1, LN 18 FORM 990-PF DESCRIPTION	EXPENSES PER BOOKS 53	NET INVE	O. O.	ADJUSTED NET INCOME	CHARITAE PURPOSE STATEMENT (D) CHARITAB	O. 4
FEDERAL INCOME TAX TO FORM 990-PF, PG 1, LN 18 FORM 990-PF	EXPENSES PER BOOKS 53 53 OTHER (A) EXPENSES	NET INVE	O. O.	ADJUSTED NET INCOME (C) ADJUSTED	CHARITAE PURPOSE STATEMENT (D) CHARITAB	O. 4

FORM 990-PF	OTHER INVESTM	ENTS	STATEMENT 5
DESCRIPTION	VALUAT METHO		FAIR MARKET VALUE
ISRAEL BONDS	FMV	75,000.	75,000.
TOTAL TO FORM 990-PF, PART II,	LINE 13	75,000.	75,000.
FORM 990-PF	OTHER LIABILI	TIES	STATEMENT 6
FORM 990-PF DESCRIPTION	OTHER LIABILI	TIES BOY AMOUNT	STATEMENT 6 EOY AMOUNT
	OTHER LIABILI		

FORM 990-PF

STATEMENT

PAID DURING THE YEAR					
RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT		AMOUNT		
AMERICAN JEWISH COMMITTEE 1156 15TH STREET, NW WASHINGTON, DC 20005	NONE UNRESTRICTED, GENERAL PURPOSE		1,500.		
AMERICAN JEWISH WORLD SERVICE 1001 CONNECTICUT NW #1200 WASHINGTON, DC 20036	NONE UNRESTRICTED, GENERAL PURPOSE		- 1,000.		
ANXIETY DISORDERS ASSOCIATION OF AMERICA 8730 GEORGIA AVENUE #600 SILVER SPRING, MD 20910	UNRESTRICTED, GENERAL		50.		
ARTHRITIS FOUNDATION 2011 PENNSYLVANIA, NW WASHINGTON, DC 20006	NONE UNRESTRICTED, GENERAL PURPOSE		50.		
B'NAI B'RITH INTERNATIONAL 2020 K STREET, NW, 7TH FLOOR WASHINGTON, DC 20006	NONE UNRESTRICTED, GENERAL PURPOSE		200.		
BETHESDA CHEVY CHASE HIGH SCHOOL EDUCATIONAL FOUNDATION, INC. P.O. BOX 31209 BETHESDA, MD 20824	UNRESTRICTED, GENERAL		1,500.		
CAPITAL CAMPS 11300 ROCKVILLE PIKE SUITE 407 ROCKVILLE, MD 20852	NONE UNRESTRICTED, GENERAL PURPOSE		1,000.		
COMMUNITY BRIDGES 620 PERSHING DRIVE #A SILVER	NONE UNRESTRICTED, GENERAL		500.		

PURPOSE

GRANTS AND CONTRIBUTIONS

SPRING, MD 20910

ЦЕОNARD A. AND LINDA K. GREENBE	RG CHARIT		52-1883238
DARE TO DREAM 1500 KING STREET #304 ALEXANDRIA, VA 22314	NONE UNRESTRICTED, PURPOSE	GENERAL	1,000.
HOLIDAY ON DUTY 2401 BLUERIDGE AVE, SUITE 101 WHEATON, MD 20902	NONE UNRESTRICTED, PURPOSE	GENERAL	500.
JUVENILE DIABETES RESEARCH FOUNDATION 825 HAMMONDS FERRY ROAD, SUITE H LINTHICUM, MD 21090	NONE UNRESTRICTED, PURPOSE	GENERAL	50.
KOL SHALOM 10301 GROSVENOR PL#6 NORTH BETHESDA, MD 20852	NONE UNRESTRICTED, PURPOSE	GENERAL	3,208.
PARKINSON FOUNDATION OF THE NATIONAL CAPITAL AREA 1501 FARM CREDIT DRIVE MCCLEAN, MD 22102	NONE UNRESTRICTED, PURPOSE	GENERAL	500.
TOTAL TO FORM 990-PF, PART XV, LI	NE 3A		11,058.

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

If yo	u are filing for an Automatic 3-Month Extension, comple u are filing for an Additional (Not Automatic) 3-Month Ex	xtension,	complete only Part II (on page 2 of this	form)		X
	t complete Part II unless you have already been granted onic filing (e-file). You can electronically file Form 8868 if		-			oration
	d to file Form 990-T), or an additional (not automatic) 3-mo	-		•	-	
	to file any of the forms listed in Part I or Part II with the ex					
	al Benefit Contracts, which must be sent to the IRS in page	-				
	vw.irs.gov/efile and click on e-file for Charities & Nonprofits		(See Mediaedene), For Mere detaile en e			O,
Part			ubmit original (no copies needed).			
A corpo	pration required to file Form 990-T and requesting an auto			nplete		
Part I o	· · · · · · · · · · · · · · · · · · ·				>	
	er corporations (including 1120-C filers), partnerships, REM	IICs, and t	rusts must use Form 7004 to request an	exter	nsion of time	
	ncome tax returns.		·			
Type or Name of exempt organization					Employer identification num	
print	LEONARD A. AND LINDA K. GR	EENBE	RG			
	CHARITABLE FOUNDATION, INC	• .		5	2-1883238	
File by the due date t		ee instruc	tions.	-		
filing your return Se		200				
instruction		oreign add	ress, see instructions.			
Enter th	ne Return code for the return that this application is for (file	e a separa	te application for each return)		<i></i>	0 4
Applica	ation	Return	Application			Return
Is For		Code	Is For			Code
Form 99	90	01	Form 990-T (corporation)			07
Form 99	90-BL	02	Form 1041-A			08
Form 99	90-EZ	03	Form 4720			09
Form 99	90-PF	04	Form 5227			10
Form 99	90-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
Form 99	90-T (trust other than above)	06	Form 8870			12
	LEONARD A. GREI					
	books are in the care of \blacktriangleright 4901 FAIRMONT A	AVENU	<u>E, SUITE 200 - BETHE</u>	SDA	, MD 20814	:
	phone No. ► <u>(301)</u> 657-2525		FAX No. ▶			
	e organization does not have an office or place of business				>	
If this	s is for a Group Return, enter the organization's four digit	Group Exe	emption Number (GEN) If thi	s is fo	r the whole group, c	heck this
box 🕨	. If it is for part of the group, check this box		ch a list with the names and EINs of all		ers the extension is	for.
1 la	request an automatic 3-month (6 months for a corporation	required t	to file Form 990-T) extension of time unt	d		
_		t organiza	tion return for the organization named a	bove.	The extension	
	for the organization's return for:					
•	x calendar year 2010 or					
>	tax year beginning	, an	d ending		→ •	
2 If	the tax year entered in line 1 is for less than 12 months, c	heck reas	on Initial return Fina	ıl retur	n	
3a if	this application is for Form 990-BL, 990-PF, 990-T, 4720,	or 6069, e	nter the tentative tax, less any			
D	onrefundable credits. See instructions.			3a	\$	<u> </u>
b If	this application is for Form 990-PF, 990-T, 4720, or 6069,	enter any	refundable credits and			
	stimated tax payments made. Include any prior year overp	•		3b	\$	0.
_	alance due. Subtract line 3b from line 3a Include your pa			[
	y using EFTPS (Electronic Federal Tax Payment System).	-	• • •	3c	\$	0.
	n. If you are going to make an electronic fund withdrawal				EO for payment inst	
LHA	For Paperwork Reduction Act Notice, see Instructions				Form 8868 (Re	