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Amended

Form **990-PF**

Department of the Treasury

Return of Private Foundation

or Section 4947(a)(1) Nonexempt Charitable Trust
Treated as a Private Foundation
Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements.

1012

OMB No 1545-0052

2010

	mai m	evenue Service Note: The logitudation may	oc abic to ase a copy of this	rotain to battery state repor	and redementer.	CHICK LINICE
Fo	cale	ndar year 2010, or tax year beginning		, and ending	RF	CINED
G	Chec	k all that apply: Initial return	Initial return of a fo	rmer public charity	Final return	
		X Amended return	Address chang	ge <u> </u>	Name change	1 00 300
9 N	ame o	of foundation			A Employer identification	number
. 2					141	BRANCH
Partitle iss		BARBARA AND SANFORD H	. ORKIN FOUN	DATION,	58-1451650	DODEN
N B	ımber	and street (or P O box number if mail is not delivered to street	address)	Room/suite	B Telephone number	
ğ		3050 PEACHTREE ROAD		530	4042312333	
Cı	ty or i	town, state, and ZIP code			C If exemption application is p	pending, check here
<u> </u>		ATLANTA, GA 30305			D 1. Foreign organization	s, check here 🕨 🗀
2 H	Chec	k type of organization: X Section 501(c)(3) ex	empt private foundation		Foreign organizations me check here and attach or	eeting the 85% test, pmputation
% <u>_</u>	_] s₁		Other taxable private founda	tion	E If private foundation sta	tus was terminated
22년	air m	arket value of all assets at end of year J Accounti	ng method: X Cash	Accrual	under section 507(b)(1	
8, 9	from		her (specify)		F If the foundation is in a	60-month termination
9	▶\$	8,246,372. (Part I, colu	mn (d) must be on cash b	pasis.)	under section 507(b)(1)(B), check here 🕨 📖
W P	art	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessanly equal the amounts in column (a))	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements for charitable purposes
کہ	,	necessanly equal the amounts in column (a)	expenses per books	income	Income	(cash basis only)
2014A	1	Contributions, gifts, grants, etc., received	3,059,816.		N/A	
	2	Check I if the foundation is not required to attach Sch B		~ ~ ~ ~ ~		Land Milliant Communication
9	3	Interest on savings and temporary cash investments	2,775.	2,775.	-	STATEMENT 1
	4	Dividends and interest from securities	148,437.	148,437.		STATEMENT 2
APR	58	Gross rents				
4		Net rental income or (loss)	222 471		santimalla an mula	P. P. Herton
a e	62	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all スラスタスラン	222,471.			
().c	L	assets on line 6a		222,471.		
ANEGEN	7	Capital gain net Income (from Part IV, line 2)		222,411.		
Z	8	Net short-term capital gain				
C	٠. الإ	Income modifications				
\mathcal{G}	10a					
	1) Less Cost of goods sold				
	11	Gross profit or (loss)	-9,657.	-9,657.		STATEMENT 3
	12	Total. Add lines 1 through 11	3,423,842.	364,026.		
	13	Compensation of officers, directors, trustees, etc	0.	0.		. 0.
	14	Other employee salaries and wages			· · · · · · · · · · · · · · · · · · ·	
	15	Pension plans, employee benefits				
Ses		Legal fees			· , MAD 9 1	2018
en en	t	Accounting fees			WALL C	4014 1.73
X		Other professional fees STMT 4	29,344.	29,344.	,	0.
9	17					=·
rati	18	Taxes STMT .5	1,304.	1,304.	+	0.
ist	19	Depreciation and depletion			•	
E	20	Occupancy			_	
¥	21	Travel, conferences, and meetings				
and	22	Printing and publications				
ğ	23	Other expenses STMT_ 6	27,741.	26,463.		0.
Tat:	24	Total operating and administrative				
Operating and Administrative Expen		expenses. Add lines 13 through 23	58,389.	57,111.		0.
J	25	Contributions, gifts, grants paid	313,195.			313,195
	26	Total expenses and disbursements.	271 504	F		212 105
	\vdash	Add lines 24 and 25	371,584.	57,111.		313,195
	1	Subtract line 26 from line 12:	2 052 250			
		Excess of revenue over expenses and disbursements	3,052,258.	206 015	***************************************	<u> </u>
	1	Net investment income (if negative, enter -0-)		306,915.	λτ / λ	
0235		Adjusted net income (if negative, enter -0-)	the least wetters		N/A	Form 000 PF (2010)

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200	Attached schedules and amounts in the description	beginning or year	Ena o	year
Parl	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only.	(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash - non-interest-bearing	9,054.	2,332. 472,476.	2,332.
'	Savings and temporary cash investments	169,880.	472.476.	472,476.
- I -	· · ·	200,000.	1,2,1,00	
3		•		
	Less allowance for doubtful accounts ▶			
4	Pledges receivable ►			
	Less: allowance for doubtful accounts ▶			<u> </u>
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	1		
				
8 9	Inventories for sale or use			
2 Y	Prepaid expenses and deferred charges			····
104	Investments - U.S and state government obligations	40 405	0.000.000	4 016 605
1	nvestments - corporate stock	49,485.	2,888,223.	4,016,625.
(Investments - corporate bonds			
11	Investments - land, buildings, and equipment basis			
1	Less accumulated depreciation			
12	Investments - mortgage loans			
13	Investments - other STMT 9	4,885,269.	3,575,194.	3,754,939.
14	Land, buildings, and equipment basis			
'"			1	
١	Less: accumulated depreciation			
15	Other assets (describe)			
ĺ		F 110 600	6 000 005	0 046 070
$\overline{}$	Total assets (to be completed by all filers)	5,113,688.	6,938,225.	8,246,372.
17	Accounts payable and accrued expenses			
18	Grants payable			
3 19	Deferred revenue			
20 21				
21	Mortgages and other notes payable			
22	Other liabilities (describe			
23	Total liabilities (add lines 17 through 22)	0.	0.	
20				
	Foundations that follow SFAS 117, check here			
	and complete lines 24 through 26 and lines 30 and 31.			
24	Unrestricted			
25	Temporarily restricted			
26	Permanently restricted			
	Foundations that do not follow SFAS 117, check here			
	and complete lines 27 through 31.	İ		
25 26 27 28 29 30	Capital stock, trust principal, or current funds	0.	0.	
28	Paid-in or capital surplus, or land, bldg, and equipment fund	0.	0.	
20	· · · · · · · · · · · · · · · · · · ·	5,113,688.	6,938,225.	
29	Retained earnings, accumulated income, endowment, or other funds	5,113,688.	6,938,225.	
30	Total net assets or fund balances	3,113,088.	0,330,223.	
1		- 110 600		
31	Total liabilities and net assets/fund balances	5,113,688.	6,938,225.	
art	Analysis of Changes in Net Assets or Fund Ba	lances		
dri	RE Analysis of Changes in Net Assets of Fund De			
Total	net assets or fund balances at beginning of year - Part II, column (a), line 3	0		
	t agree with end-of-year figure reported on prior year's return)		1	5,113,688.
			2	3,052,258.
	ramount from Part I, line 27a		· —	0.
	4.0		3	8,165,946.
	ines 1, 2, and 3			
	eases not included in line 2 (itemize)	SEE STA		1,227,721.
Total	net assets or fund balances at end of year (line 4 minus line 5) - Part II, col	umn (b), line 30	<u> 6 </u>	6,938,225.
				Form 990-PF (2010)

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313,195.

See the Part VI instructions.

8 Enter qualifying distributions from Part XII, line 4.

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate.

		<u>51650</u>		Page 4
Pa	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - se	<u>e instru</u>	ıctio	ns)
1a	a Exempt operating foundations described in section 4940(d)(2), check here 🕨 🔲 and enter "N/A" on line 1.			
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🔲 and enter 1%		6,1	38.
	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		6,1	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 4			0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		6,1	38.
6	Credits/Payments:			
а	2010 estimated tax payments and 2009 overpayment credited to 2010			
b	Exempt foreign organizations - tax withheld at source			
C	: Tax paid with application for extension of time to file (Form 8868) 6c			
d	I Backup withholding erroneously withheld			
7	Total credits and payments Add lines 6a through 6d		5,6	70.
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 10 ▶ 9		4	68.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
11	Enter the amount of line 10 to be: Credited to 2011 estimated tax ▶ Refunded ▶ 11			
Pa	art 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		Yes	No
	any political campaign?	1a		Х
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?	10		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			
	(1) On the foundation. > \$ 0. (2) On foundation managers > \$ 0.			
8	Enter the reimbursement (If any) paid by the foundation during the year for political expenditure tax imposed on foundation			
	managers. ▶ \$0 •			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
	If "Yes," attach a detailed description of the activities.			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or			
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		Х
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	. 4a		Х
þ	If "Yes," has it filed a tax return on Form 990-T for this year?	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.			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law			
	remain in the governing instrument?	. 6	X	
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.			
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)	_		·
	<u>GA</u>	_ '	[
	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)		1	
	of each state as required by General Instruction G? If "No," attach explanation	8b	X	
	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		Х
0	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses	. 10	لـــــا	X
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om	m 990-PF (2010) BARBARA AND SANFORD H. ORKIN FOUNDATION, 58-145	1650	1	Page 5
P	art 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		Х
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before			
	August 17, 2008?	12		<u> </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	The books are in care of ► SANFORD ORKIN Telephone no ► 404-2		<u> 333</u>	
	Located at ► 3050 PEACHTREE RD, STE 530, ATLANTA, GA ZIP+4 ►3	0305		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		. •	
	and enter the amount of tax-exempt interest received or accrued during the year		/A	
16	At any time during calendar year 2010, did the foundation have an interest in or a signature or other authority over a bank,	.	Yes	No
	securities, or other financial account in a foreign country?	. 16		<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	ŀ		
	the foreign country ►	<u> </u>	1	
Pŧ	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	<u>No</u>
18	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person? Yes X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? Yes X No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"		1	
	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)			
h	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
U	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 22 of the instructions)?	1b	- 1	
	Organizations relying on a current notice regarding disaster assistance check here			
r	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			
•	had any the first day of the tarrown had being an 00400	10	1	Х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	''		
_	defined in section 4942(J)(3) or 4942(J)(5)).			
а	At the end of tax year 2010, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
Ī	before 2010? Yes X No			
	If "Yes," list the years ▶			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
	statement - see instructions.)	2b	- 1	
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	▶ ,,			
За	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time		- 1	
	during the year?			
b	If "Yes," did it have excess business holdings in 2010 as a result of (1) any purchase by the foundation or disqualified persons after		1	
	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		1	
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,			
	Form 4720, to determine if the foundation had excess business holdings in 2010.)	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
b	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		Х

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Part VII-B Statements Regarding Activities for Which	Form 4720 May Be	Required (contin	nued)	
5a During the year did the foundation pay or incur any amount to			, , , , , , , , , , , , , , , , , , ,	
(1) Carry on propaganda, or otherwise attempt to influence legislation (secti	on 4945(e))?	🗀 Y	es 🗓 No	
(2) Influence the outcome of any specific public election (see section 4955),	or to carry on, directly or indi-			
any voter registration drive?		. 🔲 Y	es X No	
(3) Provide a grant to an individual for travel, study, or other similar purpose	s ^و	🗀 Y	es X No	
(4) Provide a grant to an organization other than a charitable, etc., organization	on described in section			
509(a)(1), (2), or (3), or section 4940(d)(2)?		🗀 Y	es 🗶 No 📗	
(5) Provide for any purpose other than religious, charitable, scientific, literary	y, or educational purposes, or			
the prevention of cruelty to children or animals?			es 🗓 No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify u				
section 53 4945 or in a current notice regarding disaster assistance (see insti	ructions)?		N/A	5b
Organizations relying on a current notice regarding disaster assistance check	here			
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption				
expenditure responsibility for the grant?		1/A γ _ι	es No	
If "Yes," attach the statement required by Regulations section 53.49-	45-5(d).		}	
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on			
a personal benefit contract?		\ Y (es X No	
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	shelter transaction?	<u>L</u> _ Yo	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, Trus Paid Employees, and Contractors		anagers, Highly	y	
1 List all officers, directors, trustees, foundation managers and their				
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (if not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
SANFORD ORKIN	PRES.	,	·	
3050 PEACHTREE RD, STE 530	1			
ATLANTA, GA 30305	0.50	0.	0.	0.
BARBARA ORKIN	VP			
3050 PEACHTREE RD, STE 530				
ATLANTA, GA 30305	0.50	0.	0.	0.
HAROLD ABRAMS	SEC.			
1100 PEACHTREE ST. #2800				
ATLANTA, GA 30309	0.50	0.	0.	0.
2 Compensation of five highest-paid employees (other than those in		enter "NONE."	(d) Contributions to	() F
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				
	4			
	-			
	L	<u> </u>		
Total number of other employees paid over \$50,000 .			•	0

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Part VIII Information About Officers, Directors, Trustees, Foun Paid Employees, and Contractors (continued)		
3 Five highest-paid independent contractors for professional services. If none, er		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		▶ 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant standards of organizations and other beneficiaries served, conferences convened, research papers p	itistical information such as the roduced, etc.	Expenses
1 N/A		
2		-
3		<u>]</u>
4		-
Part IX-B Summary of Program-Related Investments		<u> </u>
Describe the two largest program-related investments made by the foundation during the tax year	on lines 1 and 2	Amount
1 N/A		1
2	······································	-
All other program-related investments. See instructions. 3		
		-
Total. Add lines 1 through 3		0.

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations,	see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
·	Average monthly fair market value of securities	1a	5,433,965.
	Average of monthly cash balances	1b	798,697.
	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	6,232,662.
e	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	6,232,662.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	93,490.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	6,139,172.
6	Minimum Investment return. Enter 5% of line 5	6	306,959.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations check here and do not complete this part.)	d certain	-
1	Minimum investment return from Part X, line 6	1	306,959.
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)		
	Add lines 2a and 2b	2c	6,138.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	6,138. 300,821.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	300,821.
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	300,821.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		212 105
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	313,195.
þ	Program-related investments - total from Part IX-B	1b	U .
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
þ	Cash distribution test (attach the required schedule)	3b	212 105
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	313,195.
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	313,195.
	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	ualifies fo	r the section

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2009	(c) 2009	(d) 2010
Distributable amount for 2010 from Part XI,				
line 7				300,821.
Undistributed income, if any, as of the end of 2010				
a Enter amount for 2009 only			0.	····
b Total for prior years:		0.		
Excess distributions carryover, if any, to 2010:				-1.: 11,141.1
a From 2005 146,456.				
b From 2006 151,929.				
c From 2007 71,886.				
d From 2008 118,763.				
e From 2009 201,671.				
f Total of lines 3a through e	690,705.			
Qualifying distributions for 2010 from				
Part XII, line 4 ► \$ 313, 195.				
a Applied to 2009, but not more than line 2a		<u> </u>	0.	4.1-11111111111111111111111111111111111
b Applied to undistributed income of prior		0		
years (Election required - see instructions)		0.		··
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			300,821.
d Applied to 2010 distributable amount	12 274			300,021.
e Remaining amount distributed out of corpus	12,374.	1/4/47-11-1		0.
Excess distributions carryover applied to 2010 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			<u> </u>
Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e Subtract line 5	703,079.			·····
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		о.		
amount - see instructions		U •		·····
e Undistributed income for 2009. Subtract line			0.	
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.
Amounts treated as distributions out of		[13][[[]]][[]][[]][[]][[]][[]][[]][[]][[***************************************	
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
Excess distributions carryover from 2005				
not applied on line 5 or line 7	146,456.			
Excess distributions carryover to 2011.				
Subtract lines 7 and 8 from line 6a	556,623.			
Analysis of line 9:				
a Excess from 2006 151,929.				
b Excess from 2007. 71,886.				
c Excess from 2008 118,763.				
d Excess from 2009 201,671.				
B Excess from 2010. 12,374.		- www.		Form 990-PF (2010)

			D H. ORKIN		58-14	51650 Page 10
	Part XIV Private Operating Fo			A, question 9)	N/A	
1	a If the foundation has received a ruling or					
	foundation, and the ruling is effective for		-	▶ └		
	b Check box to indicate whether the founda		ng foundation described in		4942(J)(3) or 494	42(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				i	
	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					
3						
	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					
1	c "Support" alternative test - enter				i	
	(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					
Pi	art XV Supplementary Infor	mation (Comple	te this part only i	f the foundation	had \$5,000 or mo	re in assets
	at any time during th	e year-see the i	nstructions.)			
1	Information Regarding Foundation	Managers:				
á	a List any managers of the foundation who	_	than 2% of the total contr	ibutions received by the	foundation before the clos-	e of any tax
	year (but only if they have contributed mo	ore than \$5,000). (See se	ection 507(d)(2).)	•		•
SA	ANFORD ORKIN					
t	b List any managers of the foundation who	own 10% or more of the	e stock of a corporation (or an equally large portio	n of the ownership of a pa	rtnership or
	other entity) of which the foundation has			. , , , , , , , , , , , , , , , , , , ,		•
NO	DNE					
2	Information Regarding Contributio	n. Grant. Gift. Loan.	Scholarship, etc., Pro	ograms:		
_	Check here ► X if the foundation on	•		_	of accept unsolicited reque	ests for funds. If
	the foundation makes gifts, grants, etc. (s	ee instructions) to indiv	iduals or organizations ur	nder other conditions, co	mplete items 2a, b, c, and	d.
	a The name, address, and telephone number					
•	a The hattle, address, and telephone humbe	or the person to when	ir applications should be t	200103000.		
	The form in which applications should be	submitted and informat	ion and materials they sh	oniq rucinde.		
	· · · · · · · · · · · · · · · · · · ·					
C	Any submission deadlines.					
d	Any restrictions or limitations on awards,	such as by geographica	l areas, charitable fields, l	kinds of institutions, or o	ther factors.	
	·					

3 Grants and Contributions Paid During th	e year or Approved for Future F	ayment	T	
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
a Paid during the year				
SEE STATEMENT 13				
Total	· · · · · · · · · · · · · · · · · · ·		▶ 3a	313,195.
b Approved for future payment				
NONE				
		j		
Total			. > 3b	0.

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

Enter gross amounts unless otherwise indicated.	Unrelated business income		Exclu	ided by section 512, 513, or 514	(e)
	(a) Business	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
1 Program service revenue:	code		code	71110011	
a			├		
b			ļ		
c			<u> </u>		
d			<u> </u>		
e					
1					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					<u> </u>
investments			14	2,775.	
4 Dividends and interest from securities			14	2,775. 148,437.	
5 Net rental income or (loss) from real estate:			<u> </u>		
a Debt-financed property			}		
b Not debt-financed property					
	 			<u>-</u>	
6 Net rental income or (loss) from personal	[
property	 		1.4	0 (57	
7 Other investment income			14	-9,657.	
8 Gain or (loss) from sales of assets other	!				
than inventory			18	222,471.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue					
a					
b					
C					
d					
8					
2 Subtotal Add columns (b), (d), and (e)		0.		364,026.	0.
3 Total. Add line 12, columns (b), (d), and (e)				. 13	
See worksheet in line 13 instructions to verify calculations.)	•••••		•		
	Al- A			4 D	
Part XVI-B Relationship of Activities to	tne Acco	mpiisnment of Ex	emp	t Purposes	
Line No. Explain below how each activity for which incom	ne is reported in	column (e) of Part XVI-A	contrib	outed importantly to the accord	plishment of
the foundation's exempt purposes (other than b					
N/A	··	 			
					······································
					
					
					
		 = <u>-</u> -			
				·-	
			-		
					
					

		Exempt Organ	izations										
1	Did the	organization directly or indi	rectly engage in any	of the followin	ng with any other	r organizatio	on describe	d in secti	on 501(c) of	["		Yes	No
		de (other than section 501(c											
а		ers from the reporting found				•							
_	(1) Ca				•					1:	(1)	Ì	Х
	, ,	her assets				• •	•	• •		·· · -	(2)		X
h		ransactions:	•	•	•			•••	•		3=4		
b			hia ayamat arganizat	ion						111	(1)	i	X
		iles of assets to a noncharita					• • •			· -	(2)		X
		irchases of assets from a no						• •					X
		ental of facilities, equipment,			••					·····	(3)		X
	• •	eimbursement arrangements						• • •	• • • • • • • • • • • • • • • • • • • •		(4)		X
		ans or loan guarantees						••••			(5)		
	• •	rformance of services or me						•		··· ··· ·	(6)		X
		g of facilities, equipment, ma									C		X
đ		nswer to any of the above is	•	-		-						ets,	
		ices given by the reporting fo				market valu	ie in any tra	nsaction	or sharing arrange	ement, show	in		
		(d) the value of the goods,					4-1						
<u>(a)</u> ⊔	ne no	(b) Amount involved	(c) Name of		exempt organiz	ation	(d) D	escription	of transfers, transacti	ons, and shari	g an	angeme	nts
				N/A									
							_						
							<u> </u>						
		·							••				
								_					
						· · · · · · · · · · · · · · · · · · ·	<u></u>						
2a	is the fe	oundation directly or indirect	tly affiliated with, or re	elated to, one	or more tax-exe	mpt organi:	zations desc	cribed					_
	in secti	on 501(c) of the Code (other	r than section 501(c)	(3)) or in sect	tion 527?					. Ш	es/	X	No
b	If "Yes,"	complete the following sche									_		
		(a) Name of org	anization		(b) Type of org	ganization		(c) Description of r	elationship			
		N/A											
			<u> </u>										
		······································											
			· · ·		L								
		nder penalties of perjury, I declare nd complete. Declaration of prepa								ge and belief, it	ıs tru	e, correc	ot,
Sig	n	Complete becaused of prope	2/2:			- 11/							
He	re 📗	James 10	Men			3/6//	<u> </u>	PR	ESIDENT				
		Signature of officer or tru	ıstee			Date '		Tı	itle				
		Print/Type preparer's na	ime	Preparer's s	ignature		Date		Check if	PTIN			
			l	Albert	Thurs	CPA	3.4.	14	self- employed	7012	31	359	ı
Pai	d	JAMES J. L		1	V-V	•		'				ا د ,	<u>, </u>
Pre	pare	r Firm's name ► SHO	INVESTME	MAN VUŅ	AGEMENT	COMP	ANY		Firm's EIN				
Us	e Onl			·									
		Firm's address ► 30				UITE	530						
		AT:	LANTA, GA	30305					Phone no 4	04 - 23	<u>1 – </u>	233	3
				_						Form \$	90	-PF (2010)

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

2010

Name of the organization

Employer identification number

BARBARA AND SANFORD H. ORKIN FOUNDATION, 58-1451650 Organization type (check one): Filers of: Section: 501(c)(Form 990 or 990-EZ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. **Special Rules** For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year. Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

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

Name of organization

Employer identification number

BARBARA AND SANFORD H. ORKIN FOUNDATION,

58-1451650

Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	SANFORD H. ORKIN 3050 PEACHTREE ROAD, NW ATLANTA, GA 30305	\$ 799,470.	Person Payroll Noncash X (Complete Part II if there Is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
2	SANFORD H. ORKIN CHARITABLE REMAINDER TRUST 3050 PEACHTREE ROAD, NW ATLANTA, GA 30305	\$1,119,380.	Person Payroll Noncash X (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
3	SHERRI ORKIN SORIANO CHARITABLE REMAINDER TRUST 3050 PEACHTREE ROAD, NW ATLANTA, GA 30305	\$169,024.	Person Payroll Noncash X (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
4	LAURIE ORKIN GINBURG CHARITABLE REMAINDER TRUST 3050 PEACHTREE ROAD, NW ATLANTA, GA 30305	\$\$.	Person Payroll Noncash X (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroli Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
3452 12-23	-10	Schedule B (Form 9	990, 990-EZ, or 990-PF) (2010)

Page 1 of 1 of Part II
Employer Identification number

BARBARA AND SANFORD H. ORKIN FOUNDATION,

58-1451650

Part II	Noncash Property (see instructions)		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	13,500 COMMON SHARES ALLIED WORLD ASSURANCE	_	
		\$ 799,470.	11/18/10
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
2	SEE ATTACHED STATEMENT	_	
		\$\$\$	10/20/10
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
3	SEE ATTACHED STATEMENT	_	
			10/20/10
(a) No. from	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
4	SEE ATTACHED STATEMENT	_	
			10/20/10
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		_	·

	`		
Name of orga	m 990, 990-EZ, or 990-PF) (2010) anization		Page of of Part Employer identification number
BARBAR Part III	more than \$1,000 for the year. Complete Part III, enter the total of exclusively religion	ndividual contributions to section columns (a) through (e) and the columns (b) through (e) and the columns charitable, etc., contribution	58-1451650 on 501(c)(7), (8), or (10) organizations aggregating e following line entry. For organizations completing s of
(a) No. from Part I	\$1,000 or less for the year. (Enter this info	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gif	
	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, ar	(e) Transfer of gif	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gif	
-	Transferee's name, address, an	IG ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

N/A

58-1451650 **PAGE** BARBARA AND SANFORD H. ORKIN FOUNDATION, OF Part IV | Capital Gains and Losses for Tax on Investment Income (b) How acquired (a) List and describe the kind(s) of property sold, e.g., real estate, (c) Date acquired (d) Date sold P - Purchase D - Donation (mo., day, yr.) (mo., day, yr.) 2-story brick warehouse; or common stock, 200 shs. MLC Co. VARIOUS VARIOUS 1a SEE ATTACHED STATEMENT P P VARIOUS VARIOUS **b SEE ATTACHED STATEMENT** 02/28/0711/29/10 P c SALE OF ACADIAN; NON US EQUITY 05/31/0707/31/10 P d SALE OF FAIRHOLME P VARIOUS € PASSTHROUGH FROM K-1 VARIOUS f PASSTHROUGH FROM K-1 P VARIOUS VARIOUS P VARIOUS VARIOUS q PASSTHROUGH FROM K-1 P VARIOUS VARIOUS h PASSTHROUGH FROM K-1 CAPITAL GAINS DIVIDENDS k 1 m n 0 (h) Gain or (loss) (q) Cost or other basis (f) Depreciation allowed (e) Gross sales price (or allowable) plus expense of sale (e) plus (f) minus (g) 644,948. 577,732. 67,216. а ,284,354. 637,151. 1,273,843. 637,273. -10,511. b 122. C 977,937. 1,000,000. -22,063.ď 162,171. 0 -16,766. f 12,642. g 23,809. h 5,851. 5,851. ŀ m n 0 Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Losses (from col. (h)) Gains (excess of col. (h) gain over col (k), (i) Adjusted basis (k) Excess of col (i) but not less than "-0-") (i) F M V. as of 12/31/69 as of 12/31/69 over col. (j), if any 67,216. а -10,511.b 122. C -22,063.d 162,171. е -16,766. f 12,642. g 23,809. h 5,851. i k 1 m n 0 2 Capital gain net income or (net capital loss) (If gain, also enter in Part I, line 7) 222,471. 2

Net short-term capital gain or (loss) as defined in sections 1222(5) and (6):

If gain, also enter in Part I, line 8, column (c).

If (loss), enter "-0-" in Part I, line 8

AMENDED RETURN

FORM 990-PF IS BEING AMENDED FOR THE ADDITION OF A SCHEDULE K-1. THE GS ANCHORAGE ILLIQUID OPPORTUNIES ACCESS FUND OFFSHORE HOLDINGS, L.P. (TIN: 98-0649377) SCHEDULE K-1 ARRIVES AFTER THE EXTENDED DUE DATE FOR THE RETURN AND SHOWS A SMALL DEDUCTION AS THE ONLY ENTRY IN PART III OF THE FORM. A RECENT REVIEW OF THE SCHEDULE K-1 REVEALED OVERLOOKED INFORMATION WHICH REQUIRED DISCLOSURES OF PASSIVE FOREIGN INCOME COMPANIES AND TRANSFER OF PROPERTY TO A FOREIGN CORPORATION. ADDITIONALLY IT WAS DISCLOSED THAT INCOME FROM THE PFIC WAS NOT INCLUDED ON THE SCHEDULE K-1. THE DISCLOSURES AND THE ADDITONAL INCOME HAS BEEN ADDED TO THE RETURN.

ALSO CHANGED FROM THE ORIGINAL RETURN IS THE AMOUNT ON FORM 990-PF, PART 1, LINE 1. THE AMOUNT HAS BEEN CHANGED FROM DONATED COST BASIS TO DONATED FAIR MARKET VALUE IN ORDER TO TIE TO THE AMOUNT ON SCHEDULE B. AN ADJUSTING ENTRY HAS BEEN ADDED TO FORM 990-PF, PART III. LINE 5 TO RECONCILE THE FAIR MARKET VALUE DONATION TO THE COST BASIS BOOK VAVLUE NET ASSETS.

FORM 990-PF INTEREST ON SAVI	INGS AND I	EMPORARY C	ASH	INVESTMENTS	STATEMENT	1
SOURCE					AMOUNT	
GOLDMAN SACHS EQ AND FI ACCT OTHER INTEREST	- OID			-	2,4	22. 53.
TOTAL TO FORM 990-PF, PART I,	LINE 3,	COLUMN A		=	2,7	75.
FORM 990-PF DIVIDEND	S AND INT	EREST FROM	SEC	URITIES	STATEMENT	2
SOURCE	GRO	SS AMOUNT		PITAL GAINS DIVIDENDS	COLUMN (A AMOUNT)
ANCHORAGE ILLIQUID GOLDMAN SACHS BROKERAGE		24,387. 129,901.		32. 5,819.	24,3 124,0	
TOTAL TO FM 990-PF, PART I, I	LN 4	154,288.		5,851.	148,4	37.
FORM 990-PF	OTHER	INCOME			STATEMENT	3
DESCRIPTION		(A) REVENUE PER BOOK		(B) NET INVEST- MENT INCOME	(C) ADJUSTE NET INCO	
ORDINARY LOSS FROM PASSTHROUG MISCELLANEOUS INCOME FEDERAL TAX REFUND	SHS	21,	172. 102. 413.	-37,172 21,102 6,413	•	
TOTAL TO FORM 990-PF, PART I,	LINE 11	-9,	657.	-9,657	•	· · · · ·
FORM 990-PF O	THER PROF	ESSIONAL F	EES		STATEMENT	4
DESCRIPTION	(A) EXPENSES PER BOOK		EST- COME	(C) ADJUSTED NET INCOMI	(D) CHARITA E PURPOS	
INVESTMENT ADVISORY FEES ANCHORAGE ILLIQUID K-1	28,36 98		,361 983		.,,=.,,,	0.
- TO FORM 990-PF, PG 1, LN 16C	29,34	4. 29	,344	•		0.

	TAX	ES	STATEMENT			
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITAI PURPOSI		
FOREIGN TAXES	1,304.	1,304.			0.	
TO FORM 990-PF, PG 1, LN 18	1,304.	1,304.			0.	
FORM 990-PF	OTHER E	XPENSES		STATEMENT	6	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITAI PURPOSI		
NON DEDUCTIBLE FROM PASSTHROUGHS OTHER PORTFOLIO DEDUCTIONS INVESTMENT INTEREST EXPENSE OTHER EXPENSES	767. 24,205. 2,258. 511.				0. 0. 0.	
TO FORM 990-PF, PG 1, LN 23	27,741.	26,463.			0.	
FORM 990-PF OTHER DECREASE	ES IN NET AS	SETS OR FUND 1	BALANCES	STATEMENT	7	
DESCRIPTION				AMOUNT		
DESCRIPTION COST/FMV DIFFERENCE ON CONTR	BUTED SECUR	ITIES	-	AMOUNT 1,227,72	21.	
		ITIES	- - -			
COST/FMV DIFFERENCE ON CONTR			- - -	1,227,7		
COST/FMV DIFFERENCE ON CONTRI	II, LINE 5	E STOCK	- E DK VALUE	1,227,72	21.	
COST/FMV DIFFERENCE ON CONTRI TOTAL TO FORM 990-PF, PART II	CORPORAT	E STOCK BOO	74,376. 145,727. 147,150.	1,227,73 1,227,73 STATEMENT FAIR MARKES	8 F 99.	

FORM 990-PF	O'.	THER INVES	TMENTS			STAT —	EMENT	9
DESCRIPTION		VALU MET	ATION HOD	воок л	VALUE		MARKE' ALUE	r
CHATHAM INVESTMENT FU FULCRUM FUND GS LIBERTY HARBOR I GS ANCHORAGE ILLIQUID GS EQUITIES & FIXED I	OPPORTUNIT		V V V	30 1,00 18	09,756. 08,175. 00,000. 36,529.	1	209,7 325,1 ,132,0 196,5	34, 20, 18,
INCOME GS EQUITIES & FIXED I	NCOME: OTHER	R CO	ST		12,675. 28,059.	1	835,99 055,50,	
TOTAL TO FORM 990-PF,	PART II, L	INE 13		3,57	75,194.	3	,754,9	39.
FORM 990-PF	INTERES	ST AND PEN	ALTIES			STAT	EMENT	10
TAX DUE FROM FORM 99	-	VI						68.
LATE PAYMENT INTER LATE PAYMENT PENAL TOTAL AMOUNT DUE							<u> </u>	80.
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	AND CONTRIBUTIONS DURING THE YEAR	STATI	EMENT 13
RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT	RECIPIENT STATUS	AMOUNT
AHAVATH ACHIM CONGREGATION 600 PEACHTREE BATTLE ATLANTA, GA 30327	RELIGIOUS	501(C)(3)	25,770.
AMERICAN JEWISH COMMITTEE 3525 PIEDMONT ROAD, NE ATLANTA, GA 30305	CIVIC ORGANIZATION	501(C)(3)	5,000.
AMIT PROGRAM 6255 BARFIELD ROAD, SUITE 100 ATLANTA, GA 30328	EDUCATION	501(C)(3)	250.
ATLANTA SYMPHONY ORCHESTRA 1280 PEACHTREE STREET, NE ATLANTA, GA 30309	CIVIC ORGANIZATION	501(C)(3)	1,750.
BOY SCOUTS OF AMERICA 1800 CIRCLE 75 PARKWAY, SE ATLANTA, GA 30339	CIVIC ORGANIZATION	501(C)(3)	2,500.
CITY OF HOPE 1500 EAST DUARTE STREET DUARTE, CA 91010	MEDICAL RESEARCH	501(C)(3)	5,000.
EPSTEIN SCHOOL 335 COLEWOOD WAY, NW ATLANTA, GA 30328	EDUCATION	501(C)(3)	1,800.
HIGH MUSEUM OF ART 1280 PEACHTREE STREET, NE ATLANTA, GA 30309	ART ORGANIZATION	501(C)(3)	15,000.

BARBARA AND SANFORD H. ORKIN FO	DUNDATION,		58-1451650
HOSPICE ATLANTA 5775 GLENRIDGE DRIVE, SUITE E200 ATLANTA, GA 30328	CIVIC ORGANIZATION	501(C)(3)	5,000.
JEWISH FAMILY & CAREER SERVICES 4519 CHAMBLEE DUNWOODY ROAD ATLANTA, GA 30338	CIVIC ORGANIZATION	501(C)(3)	1,000.
JEWISH FEDERATION OF GREATER ATLANTA 1440 SPRING STREET, NW ATLANTA, GA 30309	CIVIC ORGANIZATION	501(C)(3)	126,500.
MARCUS JEWISH COMMUNTIY CENTER OF ATLANTA 5342 TILLY MILL ROAD DUNWOODY, GA 30338	CIVIC ORGANIZATION	501(C)(3)	500.
SARASOTA MANATEE JEWISH FEDERATION 580 MCINTOSH ROAD SARASOTA, FL 34232	CIVIC ORGANIZATION	501(C)(3)	2,500.
THE ARCH FOUNDATION 394 SOUTH MILLEDGE AVE ATHENS, GA 30302	EDUCATION	501(C)(3)	45,000.
THE WEBER SCHOOL 6751 ROSWELL ROAD ATLANTA, GA 30328	EDUCATION	501(C)(3)	50,000.
VAN WEZEL FOUNDATION, INC 777 NORTH TAMIAMI TRAIL SARASOTA, FL 34232	ARTS ORGANIZATION	501(C)(3)	2,500.
WEINSTEIN HOSPICE 3150 HOWELL MILL ROAD NW ATLANTA, GA 30327	CIVIC ORGANIZATION	501(C)(3)	1,000.
WILLIAM BREMAN JEWISH HERITAGE MUSEUM 1440 SPRING STREET NW ATLANTA, GA 30309	CIVIC ORGANIZATION	501(C)(3)	2,500.

BARBARA AND SANFORD H. ORKIN FO	UNDATION,		58-1451650
WILLIAM BREMAN JEWISH HOME 3150 HOWELL MILL ROAD NW ATLANTA, GA 30327	CIVIC ORGANIZATION	501(C)(3)	2,500.
ANTI DEFAMATION LEAGUE 3490 PIEDMONT ROAD ATLANTA, GA 30305	CIVIC ORGANIZATION	501(C)(3)	7,500.
ATLANTA SYMPHONY ORCHESTRA 1280 PEACHTREE STREET, NE ATLANTA, GA 30309	ARTS ORGANIZATION	501(C)(3)	1,500.
ATLANTA JEWISH FILM FESTIVAL 3525 PIEDMONT ROAD, NE ATLANTA, GA 30305	CIVIC ORGANIZATION	501(C)(3)	3,000.
HADASSAH 47 PERIMETER CENTER EAST ATLANTA, GA 30346	CIVIC ORGANIZATION	501(C)(3)	500.
HUNGER WALK/ATLANTA COMMUNITY FOOD BANK 732 JOSEPH E LOWRY BLVD ATLANTA, GA 30318	CIVIC ORGANIZATION	501(C)(3)	350.
RINGLING COLLEGE LIBRARY ASSOCIATION 3178 REGATTA DRIVE SARASOTA, FL 34231	EDUCATIONAL	501(C)(3)	1,200.
THE DAVIS ACADEMY 8105 ROBERTS DRIVE ATLANTA, GA 30350	EDUCATIONAL	501(C)(3)	2,500.
UNIVERSITY OF WYOMING FOUNDATION 1200 EAST IVINSON STREET LARAMIE, WY 82070	EDUCATIONAL	501(C)(3)	500.
YOUNG AUDIENCES 115 EAST 92ND STREET NEW YORK, NY 10128	ARTS EDUCATION	501(C)(3)	75.
TOTAL TO FORM 990-PF, PART XV, LI	NE 3A	 -	313,195.
10 10Idi),0 11, 11mi mv, III			

Power of Attorney and Declaration of Representative

OMB No 1545-0150

For IRS Use Only

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Received by

Internal Reve	enue Service	► Type or print. ► See the	separate ins	structions.		Name		
Don't E	Power of	Attorney				Telephone	1	
Part I	Caution: A se	ution: A separate Form 2848 should be completed for each taxpayer. Form 2848 will not be honored for any						
		er than representation before the IRS.				Date	7	/
1 Taxpay	er information	. Taxpayer must sign and date this form on page 2, line 7.						
Taxpayer n	ame and addre	ss		Taxpayer identification num	per(s)			
				58-1451650				
		SANFORD H. ORKIN FOUNDATION	,					
		REE ROAD, NO. 530						
ATLANTA, GA 30305				Daytime telephone number 4042312333	F	Plan numbe	r (If a	pplicable)
hereby app	oints the follow	ring representative(s) as attorney(s)-in-fact.						
2 Repres	entative(s) mu	st sign and date this form on page 2, Part II.						
Name and a				CAF No.	65	05-822	252	!R
		MES J. LOWRY		PTIN				
		50 PEACHTREE ROAD, NW, SUITE	530	Telephone No		4-231-		
		LANTA, GA 30305-2296		Fax No.		4231	<u> </u>	
		and communications		Check if new: Address	i_Telep	hone No.	<u> F</u> ;	ax No L
Name and a	address			CAF No.			•••	
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Cneck II to Name and a		and communications		Check if new Address CAF No.	relep	hone No L	F	ax No.L
Maille allu a	1001633			PTIN				
				Telephone No	· ·······	• • ••		
				Fax No	•			
				Check if new Address	Telen	hone No	٦ _{F:}	ax No 🗀
o represen	t the taxpayer b	efore the Internal Revenue Service for the following matters						
3 Matters		<u></u>						
Descriptio	n of Matter (Inc	come, Employment, Payroll, Excise, Estate, Gift, Whisteblower,		Tax Form Number	Year(s) or Penod(s) (ıf	applicable)
Practit	ioner Discipline	, PLR, FOIA, Civil Penalty, etc.) (see instructions for line 3)	(1040, 9	941, 720, etc.) (if applicable)	(se	e instructio	ns for	r line 3)
	- mar		000 5	~				
EXCIS	E TAX		990 PI		2009	9-2013	<u> </u>	
					 			
					1			
	use not record	led on Centralized Authorization File (CAF). If the power of at	tomevie for a	epacific use not recorded on	CAE cha			
•		ctions for Line 4. Specific Uses Not Recorded on CAF	torney is for a	specific ass not recorded on	OAI , CIICI	OR .		▶□
		s otherwise provided below, the representatives generally are au	thorized to re	ceive and inspect confidential	tax infor	mation and	to ne	rform any
and all a	cts that I can po	erform with respect to the tax matters described on line 3, for ex	cample, the au	ithority to sign any agreement	s, conser	nts, or other	docu	uments.
The repr	esentative(s), h	lowever, is (are) not authorized to receive or negotiate any amou ins or paper checks). Additionally, unless the appropriate box(e	unts paid to th	ne client in connection with thi	s represe	intation (inc	ludin	g refunds
		if tax returns or return information to a third party, substitute an						
	closure to third			return;				
_								
Oth	ner acts author	zed [.]		(se	e instruct	ions for mo	re inf	ormation)
Except	tions. An unen	rolled return preparer cannot sign any document for a taxpayer						
only repr	resent taxpayer	s to the extent provided in section 10.3(d) of Treasury Departme	ent Circular N	o. 230 (Circular 230) An enro	illed retire	ement plan a	agent	may only
represen	t taxpayers to t	he extent provided in section 10.3(e) of Circular 230 A register ar 230 See the line 5 instructions for restrictions on tax matters	ed tax return S partners In	preparer may only represent to most cases, the student pract	ixpayers '	to the exten	I pro	vided in
limited (f	or example, the	ey may only practice under the supervision of another practition	er)	or organic high		,	·oracy	.5
		ns to the acts otherwise authorized in this power of attorney:						

Form 2848 (Rev	3-2012)			Page 2			
6 Retention	n/revocation of prior pov	wer(s) of attorney. The filing	of this power of attorney automatically revokes all earlier				
	of attorney on file with the Internal Revenue Service for the same matters and years or periods covered by this t If you do not want to revoke a prior power of attorney, check here						
•							
			YOU WANT TO REMAIN IN EFFECT.				
7 Signatu	re of taxpayer. If a tax ma e representative(s) is (are	atter concerns a year in whice) being appointed If signed	th a joint return was filed, the husband and wife must each file a separate power by a corporate officer, partner, guardian, tax matters partner, executor, receiver only to execute this form on behalf of the taxpayer.				
► IE NIC	T OONED AND DATED 1	TUIC DOWED OF ATTODNEY	WILL BE RETURNED TO THE TAXPAYER.				
FIFN	JI SIGNED AND DATED	INS POWER OF ALTORNET	WILL BE RETURNED TO THE TAXFATER.				
	Navgoria	Mh	3/1// PRESIDENT				
	·	Signature	Date Title (if app	olicable)			
SANFO	RD H. ORKIN	·	BARBARA AND SANFORD H. (FOUNDATION,	ORKIN			
2-2-1-2-2	Print Name	PIN	Number Print name of taxpayer from line 1 if other than	individual			
Part II	Declaration of F	Ponrocontativo					
Fatth:	Declaration of F			· · · · · · · · · · · · · · · · · · ·			
	s of perjury, I declare tha						
			ctice before the Internal Revenue Service,				
	Tel		Part 10), as amended, concerning practice before the Internal Revenue Service	•			
		taxpayer identified in Part I f	or the matter(s) specified there; and				
	e of the following:						
			nighest court of the jurisdiction shown below				
b Ce	rtified Public Accountant -	 duly qualified to practice as 	s a certified public accountant in the jurisdiction shown below.				
c En	rolled Agent - enrolled as	an agent under the requiren	nents of Circular 230.				
d Off	icer - a bona fide officer o	of the taxpayer's organization	1.				
e Ful	I-Time Employee - a full-t	ime employee of the taxpaye	эг.				
		of the taxpayer's immediate	family (for example, spouse, parent, child, grandparent, grandchild, step-parent	t, step-child,			
	ther, or sister).	builba laiat Da	and far the Carellmant of Actuaries under 20 H.C.C. 1040 /the outhorth				
			ard for the Enrollment of Actuaries under 29 U.S.C. 1242 (the authority				
	to practice before the Internal Revenue Service is limited by section 10.3(d) of Circular 230). h Unenrolled Return Preparer - Your authority to practice before the Internal Revenue Service is limited. You must have been eligible to sign the return						
und	der examination and have		ce 2011-6 and Special rules for registered tax return preparers and unenroll				
	he Instructions.						
			rrn preparer under the requirements of section 10 4 of Circular 230. Your autho				
the	Internal Revenue Service	is limited. You must have b	een eligible to sign the return under examination and have signed the return. Se	e Notice 2011-6 and			
•	~	• •	nenrolled return preparers in the Instructions.				
			ce before the IRS by virtue of his/her status as a law, business, or accounting st	udent working in			
			instructions for Part II for additional information and requirements				
r Enr	olled Retirement Plan Ag	ent - enrolled as a retiremen	t plan agent under the requirements of Circular 230 (the authority to practice be	fore the			
Inte	ernal Revenue Service is l	imited by section 10.3(e))					
•			OT SIGNED AND DATED, THE POWER OF ATTORNEY WILL BE RETURNED. REP	PRESENTATIVES			
	MUST SIGN IN THE ORI	DER FIRTEN IN FINE 5 VRO/	/E. See the instructions for Part II.				
Note: For desig	nations d-f, enter your te	tle, position, or relationship	to the taxpayer in the "Licensing jurisdiction" column See the instructions for Pa	art II for more			
information.							
Designation -	Licensing jurisdiction	Bar, license, certification,					
Insert above letter (a-r)	(state) or other licensing authority (if applicable)	registration, or enrollment number (if applicable) See	Signature	Date			

Insert above letter (a-r)	(state) or other licensing authority (if applicable)	registration, or enrollment number (if applicable) See instructions for Part II for more information.	Signature	Date
В	GA, FL	GA 017520	Amenything	3.4.14
014002 08-22-12				Form 2848 (Rev 3-2012