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Form, 990-PF

Return of Private Foundation

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

Department of the Treasury Internal Revenue Service

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

OMB No 1545-0052

2010

	aici	iuai yeai 2010, Ui lax yea	i nediminină			, 4114 6	numy		
G C	heck	all that apply:	Initial return		Initial return of a fo	•	· —	Final return	1
			Amended return		Address change	<u>ge</u>		Name change	
Nar	ne of	foundation						A Employer identification	n number
		THE KENNET		OMT	TZ FAMILY			65 050005	
-		FOUNDATION					[65-0728975)
Nun	iber a	nd street (or P O box number i			address)		Room/suite	B Telephone number	
-		496 NORTH	LAKE WAY				<u>!</u>	561-863-86	
City	or t	own, state, and ZIP code		400				C if exemption application is i	
<u></u>		PALM BEACH		480				D 1. Foreign organization	s, check here
H_C	-				kempt private foundation			2 Foreign organizations mocheck here and attach co	omputation L
يا		ction 4947(a)(1) nonexem			Other taxable private founda			E If private foundation sta	
		arket value of all assets at e	end of year J A		ing method. X Cash	Accr	rual	under section 507(b)(1)(A), check here
		Part II, col. (c), line 16)			ther (specify)			F If the foundation is in a	
				I, COIL	mn (d) must be on cash b			under section 507(b)(1	
Pa	rt I	Analysis of Revenue an (The total of amounts in colu- necessarily equal the amoun	mns (b), (c), and (d) ma	y not	(a) Revenue and expenses per books		ivestment ome	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1	Contributions, gifts, grant	ts, etc., received					N/A	
	2	Check X if the foundation		ch B					
-	- 3	Interest on savings and tempo cash investments	orary		10.		10.		STATEMENT 1
	4	Dividends and interest fro	m securities		2,303.		2,303.		STATEMENT 2
	5a	Gross rents							
	b	Net rental income or (loss)							
es.	6a	Net gain or (loss) from sale of	assets not on line 10		-57,750.				RECEIVED
Revenue	b	Gross sales price for all assets on line 6a	50,21	0.				1 1	
ě	7	Capital gain net income (from	Part IV, line 2)				0.	0	100
Œ	8	Net short-term capital gai	n					rv	I MDA : O SAIL ;
	9	Income modifications							
	10a	Gross sales less returns and allowances							OGDEN UT
	b	Less Cost of goods sold						است	
	C	Gross profit or (loss)							
	11	Other income							
	12	Total. Add lines 1 through	h 11		-55,437.		2,313.		
	13	Compensation of officers, dire	ctors, trustees, etc		0.		0.		0.
	14	Other employee salaries a	ind wages						
	15	Pension plans, employee	benefits						
ses	16a	Legal fees							
bense	b	Accounting fees	STMT	3	1,350.		0.		1,350.
	C	Other professional fees							
Š	17	Interest							
Operating and Administrative Ex	18	Taxes	STMT	4	25.		0.		0.
ist	19	Depreciation and depletio	ก						
Ē	20	Occupancy							
A	21	Travel, conferences, and	meetings						
and	22	Printing and publications							
ρ	23	Other expenses	STMT	5	1,576.		0.		1,362.
aţį	24	Total operating and adm	inistrative						
per		expenses. Add lines 13 th	hrough 23		2,951.		0.		2,712.
0	25	Contributions, gifts, grant	s paid .		49,822.				49,822.
	26	Total expenses and disb	ursements.						
		Add lines 24 and 25			52,773.		0.	<u> </u>	52,534.
	27	Subtract line 26 from line	12:						
	a	Excess of revenue over expen-	ses and disbursement	.5	-108,210.				
	b	Net investment income o	f negative, enter -0-)				2,313.		
	C	Adjusted net income (If ne	egative, enter -0-)					N/A]

Form 990-PF (2010) FOUNDATION 65-0728975 Page 2 Beginning of year End of year Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (c) Fair Market Value (a) Book Value (b) Book Value 1 Cash - non-interest-bearing 4,840. 2,287. 2,287. 2 Savings and temporary cash investments 3 Accounts receivable Less: allowance for doubtful accounts 4 Pledges receivable Less: allowance for doubtful accounts 5 Grants receivable 6 Receivables due from officers, directors, trustees, and other disqualified persons 7 Other notes and loans receivable Less: allowance for doubtful accounts 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Investments - U.S. and state government obligations 826,976. 721,259. 835,157. STMT 7 b Investments - corporate stock c Investments - corporate bonds 11 Investments - land, buildings, and equipment basis Less accumulated depreciation 12 Investments - mortgage loans 13 Investments - other 14 Land, buildings, and equipment; basis Less accumulated depreciation 14. 15 Other assets (describe ► FUNDS IN TRANSIT 831,830 723,546. 837,444. 16 Total assets (to be completed by all filers) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons Mortgages and other notes payable 22 Other liabilities (describe > _ 0. 23 Total liabilities (add lines 17 through 22) 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 ► X Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. 27 Capital stock, trust principal, or current funds 28 Paid-in or capital surplus, or land, bldg., and equipment fund 0 29 Retained earnings, accumulated income, endowment, or other funds 831,830. 723,546. 831,830. 723,546 30 Total net assets or fund balances 831,830, 723,546 31 Total liabilities and net assets/fund balances Part III Analysis of Changes in Net Assets or Fund Balances 1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) 831,830. 2 Enter amount from Part I, line 27a Other increases not included in line 2 (itemize) Add lines 1, 2, and 3 Decreases not included in line 2 (itemize) SEE STATEMENT 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

Form 990-PF (2010)

	NDATION					65-072	8975	Page 3
<u></u>	and Losses for Tax on In		Income					
	ibe the kind(s) of property sold (e.g ehouse; or common stock, 200 sha			(b) How acquired P - Purchase D - Donation	1 (6)	Date acquired no., day, yr.)	(d) Date (mo., da	
1a RCN STOCK					0:	2/23/00	08/26	5/10
b EVERGREEN INSTI	MONEY MKT					0/20/08	01/26	
c WELLS FARGO ADV	ANTAGE HERITAGE	MONEY	MKT		1(0/20/08	11/1	7/10
d METROMEDIA CLAS	SS ACTION SETTLE	MENT			VZ	RIOUS	03/23	3/10
e								
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale		(1	(h) Gain or (loss) e) plus (f) minus (
a			57,96	0.			-57	960.
b 15,000.			_15,00					0.
c 35,000.			35,00	0.				0.
d 210.								210.
e								
Complete only for assets showing	g gain in column (h) and owned by	the foundation	on 12/31/69		(I) Ga	ins (Col. (h) gain	minus	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (i) col. (j), if any		còl. (k)	, but not less that osses (from col. (1 -0-) or	
a							-57	960.
b								0.
_c								0.
d			· · · · · · · · · · · · · · · · · · ·					210.
e					-			
2 Capital gain net income or (net cap	ontal loss) { If gain, also enter of the loss of the l			} 2			-57	750.
	s) as defined in sections 1222(5) ar					·		
If gain, also enter in Part I, line 8,		iu (0).						
If (loss), enter -0- in Part I, line 8	, o, a			} 3		N/A		
	nder Section 4940(e) for	Reduced	Tax on Net	Investment	Incor			
(For optional use by domestic private	foundations subject to the section	4940(a) tax on	net investment in	come.)				
		(-,		,				
If section 4940(d)(2) applies, leave th	is part blank.							
Was the foundation liable for the secti	ion 4942 tax on the distributable an	nount of any ve	ear in the hase ner	od?			Γ Ves	X No
If "Yes," the foundation does not quali				.00.				110
	ach column for each year; see instr			ıs.				
	(b)		maning any on the				(d)	
(a) Base period years Calendar year (or tax year beginnin	ا نام ا	tributions	Net value of no	(c) ncharitable-use as	ssets	Distrib	(d) oution ratio rided by col.	
2009	9 111/	9,770.		806,1	77	(60: (6) 010		(c))
2008		7,842.		810,9				
					1') (1			24523
2007							.09	2 <u>4523</u> 95992
2006	1	2,239.		851,7	735.		.09	24523 95992 19592
2005		6,814.		851,7 823,2	735.		.09	24523 95992 19592 32572
				851,7	735.		.09	24523 95992 19592
2 Total of line 1, column (d)	4	6,814. 6,263.		851,7 823,2 750,5	735.	2	.09	24523 95992 19592 32572
3 Average distribution ratio for the 5	5-year base period - divide the total	6,814. 6,263.	or by the number	851,7 823,2 750,5	735.	2	.04	24523 95992 19592 32572 51641
• • • •	5-year base period - divide the total	6,814. 6,263.	or by the number	851,7 823,2 750,5	735.	2 3	.04	24523 95992 19592 32572 51641
3 Average distribution ratio for the 5	5-year base period - divide the total	6,814. 6,263.	or by the number	851,7 823,2 750,5	735.		.04	24523 95992 19592 32572 51641
3 Average distribution ratio for the 5	5-year base period - divide the total nce if less than 5 years	6,814. 6,263. on line 2 by 5,	or by the number	851,7 823,2 750,5	735.		.09	24523 95992 19592 32572 51641
3 Average distribution ratio for the 5 the foundation has been in existen	5-year base period - divide the total nce if less than 5 years	6,814. 6,263. on line 2 by 5,	or by the number	851,7 823,2 750,5	735.	3	.09	24523 95992 19592 32572 51641 54320
3 Average distribution ratio for the 5 the foundation has been in existen	5-year base period - divide the total nce if less than 5 years	6,814. 6,263. on line 2 by 5,	or by the number	851,7 823,2 750,5	735.	3	.09	24523 95992 19592 32572 51641 54320 52864
 Average distribution ratio for the 5 the foundation has been in exister Enter the net value of noncharitable 	5-year base period - divide the total nce if less than 5 years	6,814. 6,263. on line 2 by 5,	or by the number	851,7 823,2 750,5	735.	3 4	.09	24523 95992 19592 32572 51641 54320
 3 Average distribution ratio for the 5 the foundation has been in exister 4 Enter the net value of noncharitable 5 Multiply line 4 by line 3 	5-year base period - divide the total nce if less than 5 years le-use assets for 2010 from Part X,	6,814. 6,263. on line 2 by 5,	or by the number	851,7 823,2 750,5	735.	3 4 5	.09	24523 95992 19592 32572 51641 54320 52864 ,085.
 Average distribution ratio for the 5 the foundation has been in exister Enter the net value of noncharitable 	5-year base period - divide the total nce if less than 5 years le-use assets for 2010 from Part X,	6,814. 6,263. on line 2 by 5,	or by the number	851,7 823,2 750,5	735.	3 4	.09	24523 95992 19592 32572 51641 54320 52864
 3 Average distribution ratio for the 5 the foundation has been in exister 4 Enter the net value of noncharitable 5 Multiply line 4 by line 3 6 Enter 1% of net investment income 	5-year base period - divide the total nce if less than 5 years le-use assets for 2010 from Part X,	6,814. 6,263. on line 2 by 5,	or by the number	851,7 823,2 750,5	735.	3 4 5	.09 .03 .00 .20 .09 831	24523 95992 19592 32572 51641 54320 52864 ,085.
 3 Average distribution ratio for the 5 the foundation has been in exister 4 Enter the net value of noncharitable 5 Multiply line 4 by line 3 	5-year base period - divide the total nce if less than 5 years le-use assets for 2010 from Part X,	6,814. 6,263. on line 2 by 5,	or by the number	851,7 823,2 750,5	735.	3 4 5	.09 .03 .00 .20 .09 831	24523 95992 19592 32572 51641 54320 52864 ,085.
 3 Average distribution ratio for the 5 the foundation has been in exister 4 Enter the net value of noncharitable 5 Multiply line 4 by line 3 6 Enter 1% of net investment incom 7 Add lines 5 and 6 8 Enter qualifying distributions from 	5-year base period - divide the total nce if less than 5 years le-use assets for 2010 from Part X, ne (1% of Part I, line 27b)	6,814. 6,263. on line 2 by 5, line 5		851,7 823,2 750,5 of years	735.	3 4 5	.09 .02 .09 .09 .09 .09 .09 .09 .09 .09 .09 .09	24523 95992 19592 32572 51641 54320 52864 ,085.
 3 Average distribution ratio for the 5 the foundation has been in exister 4 Enter the net value of noncharitable 5 Multiply line 4 by line 3 6 Enter 1% of net investment incom 7 Add lines 5 and 6 8 Enter qualifying distributions from 	5-year base period - divide the total nce if less than 5 years le-use assets for 2010 from Part X, se (1% of Part I, line 27b)	6,814. 6,263. on line 2 by 5, line 5		851,7 823,2 750,5 of years	735.	3 4 5 6 7	.09 .02 .09 .09 .09 .09 .09 .09 .09 .09 .09 .09	24523 95992 19592 32572 51641 54320 52864 ,085. ,934. 23.

	1 99U-PF (2010) FOUNDATION			<u>0728</u>			Page 4
Pa	ert VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b),	4940(e), or	4948 ·	- see ii	nstru	ictio	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here \[\bigcup \] and enter "N/A" on line 1.)					
	Date of ruling or determination letter: (attach copy of letter if necessary-see instruct						
þ	Domestic foundations that meet the section 4940(e) requirements in Part V, check here $lackbrack$ and enter 19	1				<u>23.</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, co	ol. (b). J					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		2	<u> </u>			0.
3	Add lines 1 and 2	-	_ 3	<u></u>			23.
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-		5				23.
6	Credits/Payments:						
а	2010 estimated tax payments and 2009 overpayment credited to 2010 6a	815					
	Exempt foreign organizations - tax withheld at source 6b			1			
	Tax paid with application for extension of time to file (Form 8868)		7				
	Backup withholding erroneously withheld 6d		1				
	Total credits and payments. Add lines 6a through 6d		7	}		8	15.
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached		8				
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	•	9				
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		10			7	92.
		Refunded	11				0.
	art VII-A Statements Regarding Activities	.,		·			
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it partic	pate or interven	e in			Yes	No
	any political campaign?			w	1a	_	X
	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions	for definition)?			1b		X
Ĭ	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any ma	•	ed or				
	distributed by the foundation in connection with the activities.	padien.	•				
c	Did the foundation file Form 1120-POL for this year?				10		\mathbf{x}_{-}
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:						
Ū	(1) On the foundation. ► \$ (2) On foundation managers. ► \$	0					
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on		_				
Ť	managers. ▶ \$ 0 •						
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?				2		х
_	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	of incorporation.	or				
•	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	,			3		x _
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?				4a		X
	if "Yes," has it filed a tax return on Form 990-T for this year?		N	/A	4b		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?				5		Х
	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 cor	iflict with the sta	te 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.		•				
R2	Enter the states to which the foundation reports or with which it is registered (see instructions)						
Ja	FL, DE				'		
h	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or o	designate)					
U	of each state as required by General Instruction G? If "No," attach explanation	aosignato j			8b	X	
۵	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4	1942(1)(5) for an	landar		VU		
9	year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If "Yes," complete Part XIV	****	onual		9		x
10	Did any persons become substantial contributors during the tax year? if "Yes," attach a schedule listing their names ar				10		X
	pro drift persons second substitution during the tax years in Yes, attach a schedule listing their names ar	iu addresses			10		43

orm	990-PF (2010) FOUNDATION	65-0728	975	1	Page 5
Pa	rt VII-A Statements Regarding Activities (continued)				
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of	·			
	section 512(b)(13)? If "Yes," attach schedule (see instructions)		11		<u> X</u>
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before		1		
	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		<u>▶561-86</u>		<u>686</u>	
	Located at ► 496 NORTH LAKE WAY, PALM BEACH, FL	ZIP+4 ► 33	480		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	t t		, , ,	ш
	and enter the amount of tax-exempt interest received or accrued during the year	15	N	/A	N/ -
16	At any time during calendar year 2010, did the foundation have an interest in or a signature or other authority over a bank,		ا مد ا	Yes	No
	securities, or other financial account in a foreign country?		16		<u> </u>
	See page 20 of the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of the foreign country				
Pa	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required	 -	 -		
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.			Yes	No
1a	During the year did the foundation (either directly or indirectly):				
		es X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)				
		res X No			
		es X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	/es - X No-	-		
	(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)?	res 🗶 No			
	(6) Agree to pay money or property to a government official? (Exception Check "No"				
	if the foundation agreed to make a grant to or to employ the official for a period after		i		
	termination of government service, if terminating within 90 days.)	es X No			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations				
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 22 of the instructions)?	N/A	16		
	Organizations relying on a current notice regarding disaster assistance check here				
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected				
	before the first day of the tax year beginning in 2010?		1c		<u> </u>
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)): At the end of tax year 2010, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginn	0.0			
d		rig res X No			
	if 'Yes,' list the years ,	es Land			
h	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorre	et			
-	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attack				
	statement - see instructions.)	N/A	2b		
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.				
	>				
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time	_			
	during the year?	/es 🗶 No			
b	If "Yes," did it have excess business holdings in 2010 as a result of (1) any purchase by the foundation or disqualified persons a	fter			
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to				
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule				
	Form 4720, to determine if the foundation had excess business holdings in 2010.)	N/A	3b		
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4a		<u> </u>
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpo	se that]		3.7
	had not been removed from jeopardy before the first day of the tax year beginning in 2010?	 -	4b	Dr.	<u>X</u>
		FOI	m 990	r (ZU IU)

THE KENNETH A. HOROWITZ FAMILY Form 990-PF (2010) FOUNDATION 65-0728975 Page 6 Part VII-B | Statements Regarding Activities for Which Form 4720 May Be Required (continued) 5a. During the year did the foundation pay or incur any amount to: Yes X No (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly, or indirectly, any voter registration drive? Yes X No Yes X No (3) Provide a grant to an individual for travel, study, or other similar purposes? (4) Provide a grant to an organization other than a charitable, etc., organization described in section Yes X No 509(a)(1), (2), or (3), or section 4940(d)(2)? (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for Yes X No the prevention of cruelty to children or animals? b if any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? 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 from the tax because it maintained Yes No expenditure responsibility for the grant? N/A If "Yes," attach the statement required by Regulations section 53.4945-5(d). 6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on Yes X No a personal benefit contract? 6b X b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870 Yes X No 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? 7b b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors 1 List all officers, directors, trustees, foundation managers and their compensation. (d) Contributions to employee benefit plans and deferred compensation (b) Title, and average hours per week devoted to position (c) Compensation (e) Expense account, other (If not paid, enter -0-) (a) Name and address allowances KENNETH HOROWITZ PRES/SEC/TREAS 496 NORTH LAKE WAY 0. 0 0 PALM BEACH, FL 33480 4.00 BARBARA HOROWITZ VICE-PRES 496 NORTH LAKE WAY PALM BEACH, FL 33480 0 0 0. 2.00 VICE-PRES ROSE HOROWITZ 33 CARDINAL DRIVE ROSLYN, NY 11576 0 0 0. 1.00 BARBARA DUNN VICE-PRES 90 RANDOM FARM'S DRIVE CHAPPAOUA, NY 10514 1.00 0. 2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (d) Contributions to employee benefit plans and deterred (e) Expense account, other allowances (b) Title, and average (a) Name and address of each employee paid more than \$50,000 hours per week devoted to position (c) Compensation NONE

(a) Name and address of each employee paid more than \$50,000

NONE

(b) Title, and average hours per week devoted to position

(c) Compensation

(d) Contributions to employee benefit plans and detared compensation

(e) Expense account, other allowances

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

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Part VIII Information About Officers, Directors, Trustees, Found Paid Employees, and Contractors (continued)	ation Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, ent	er "NONE."	
(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		<u> </u>
List the foundation's four largest direct charitable activities during the tax year. Include relevant stat number of organizations and other beneficiaries served, conferences convened, research papers pro-	istical information such as the oduced, etc.	Expenses
1		
SEE STATEMENT 8		1,362.
2		2/3020
3		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year o	in lines 1 and 2.	Amount
I N/A		
2		
All other program-related investments. See instructions.		
3		

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Total, Add lines 1 through 3

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P	art X Minimum Investment Return (All domestic foundations must complete this part Foreign four	ndations, s	ee instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a		1a	832.359.
b	Average of monthly cash balances	1b	832,359. 11,382.
C	Fair market value of all other assets	10	
d	Total (add lines 1a, b, and c)	1d	843,741.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	843,741.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	12,656.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	831,085.
6	Minimum investment return. Enter 5% of line 5	6	41,554.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations an foreign organizations check here and do not complete this part.)	d certain	
1	Minimum investment return from Part X, line 6	1	41,554.
2a	Tax on investment income for 2010 from Part VI, line 5		
b	Income tax for 2010. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	23.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	41,531.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5 -	-Add lines 3 and 4	5	41,531.
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	41,531.
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	<u>52,534.</u>
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:		
а	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	52,534.
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	23.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	_6	52,511.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation q 4940(e) reduction of tax in those years.	jualifies for t	he section

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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,			
line 7				41,531.
2 Undistributed income, if any, as of the end	of 2010			
a Enter amount for 2009 only	<u> </u>		0.	
b Total for prior years:				
		0.		
3 Excess distributions carryover, if any	y, to 2010:			
a From 2005				
b From 2006				
c From 2007				
d From 2008	958.			
e From 2009				
f Total of lines 3a through e	958.		 	
4 Qualifying distributions for 2010 from	•			
<u></u>	2,534.			
a Applied to 2009, but not more than			0.	
b Applied to undistributed income of p				
years (Election required - see instruc		0.		
c Treated as distributions out of corpu				
(Election required - see instructions)				41 534
d Applied to 2010 distributable amoun				41,531.
e Remaining amount distributed out o				
5 Excess distributions carryover applied to 2 (If an amount appears in column (d), the samust be shown in column (a))	2010 O .		 	0.
6 Enter the net total of each column a indicated below:	as			
a Corpus Add lines 3f, 4c, and 4e Subtract	line 5 11,961.			
b Prior years' undistributed income. S	ubtract			
line 4b from line 2b	<u> </u>	0.		
c Enter the amount of prior years' undistributed income for which a no deficiency has been issued, or on which a section 4942(a) tax has been pre-	hich			
assessed .		0.		
d Subtract line 6c from line 6b. Taxabl	le			
amount - see instructions		0.		
e Undistributed income for 2009. Sub	tract line			
4a from line 2a. Taxable amount - se	ee instr.		0.	
f Undistributed income for 2010. Sub				
lines 4d and 5 from line 1. This amo	unt must			
be distributed in 2011				0.
7 Amounts treated as distributions ou				
corpus to satisfy requirements impo				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2				
Subtract lines 7 and 8 from line 6a	11,961.			ļ
10 Analysis of line 9:				
a Excess from 2006]		
b Excess from 2007	050	\		
c Excess from 2008	958.	ł		
d Excess from 2009	003			
e Excess from 2010 1 11	.,003.	<u>L</u>	L <u> </u>	

Form 990-PF (2010) FOUNDA?				65-07	28975 Page 10
Part XIV Private Operating F	-oundations (see in	structions and Part V	II-A, question 9)	N/A	
1 a If the foundation has received a ruling	or determination letter tha	it it is a private operating			
foundation, and the ruling is effective fo	or 2010, enter the date of	the ruling	>		
b Check box to indicate whether the foun	idation is a private operati	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	1				
each year listed		<u> </u>			
b 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed	-				1
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities	1				}
e Qualifying distributions made directly		1			
for active conduct of exempt activities.					
Subtract line 2d from line 2c					
3 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)			-		ł
b-"Endowment" alternative test - enter					
2/3 of minimum investment return					
shown in Part X, line 6 for each year listed	1		ľ		
c "Support" alternative test - enter:			 		
• •				ĺ	
 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					1
organizations as provided in		1	1		}
section 4942(j)(3)(B)(iii)		 	 		_
(3) Largest amount of support from					1
an exempt organization			ļ	<u> </u>	ļ
(4) Gross investment income Part XV Supplementary Info	rmetion (Comple	to this port only	if the foundation	n had \$5 000 ar m	oro in opports
at any time during			if the foundation	n nau \$5,000 or m	ore in assets
1 Information Regarding Foundation		111011 40110110.7			
a List any managers of the foundation wi	~	than 2% of the total con	tributions received by th	a foundation hafore the clo	en af any tay
year (but only if they have contributed i			andations received by th	e ioditidation before the cio	se of any lax
SEE STATEMENT 9	, , , ,	(, , , ,			
b List any managers of the foundation wi	no own 10% or more of the	ne stock of a corporation	(or an equally large port	ion of the ownership of a p	artnership or
other entity) of which the foundation ha			(0, 0) 9 -		a. I. o. o p o.
NONE					
2 Information Regarding Contribut	tion, Grant, Gift, Loan	, Scholarship, etc., P	rograms:		
Check here 🕨 🕱 if the foundation	only makes contributions	to preselected charitable	organizations and does	not accept unsolicited requ	uests for funds. If
the foundation makes gifts, grants, etc.	(see instructions) to indi-	viduals or organizations	under other conditions, o	complete items 2a, b, c, and	d d.
a The name, address, and telephone num	ber of the person to who	m applications should be	addressed;		
		 			
b The form in which applications should	be submitted and informa	ition and materials they s	should include:		
c Any submission deadlines:					
d Any restrictions or limitations on award	ls, such as by geographic	al areas, charitable fields	, kinds of institutions. or	other factors:	
-				•	

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3 Grants and Contributions Paid During the Y	ear or Approved for Future I	Payment		
Recipient	If recipient is an individual,		Durages of great 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	Amount
a Paid during the year				
·				
		1		
SEE STATEMENT 10				
Total			► 3a	49,822.
b Approved for future payment				
NONE				
		i		
				i
		ļ		
Total			▶ 3b	0.

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Part XVI-A Analysis of Income-Prod		d business income	Evelu	ded by section 512, 513, or 514	
Enter gross amounts unless otherwise indicated.	(a) Business	(b) Amount	(C) Exclu- sion code	(d) Amount	(e) Related or exempt function income
1 Program service revenue:	code		Code	, amount	
a	-				
	1		 		
	l l		 		
d	1		 -		
e	-		 		· · · · · · · · · · · · · · · · · · ·
g Fees and contracts from government agencies	_		 		
2 Membership dues and assessments			 -		
3 Interest on savings and temporary cash		- 	<u> </u>		
investments	-	ſ	14	10.	
4 Dividends and interest from securities	1		14		
5 Net rental income or (loss) from real estate:				2/3031	
a Debt-financed property			 -		
b Not debt-financed property					
6 Net rental income or (loss) from personal			 		
property	1				
7 Other investment income					
8 Gain or (loss) from sales of assets other			-		
than inventory			18	-57,750.	
9 Net income or (loss) from special events			1 20	37,730.	
10 Gross profit or (loss) from sales of inventory			+		·
11 Other revenue:			+		
ab	-				
	1 1		 		
d	[]		<u> </u>	 	
e	-		 		
12 Subtotal. Add columns (b), (d), and (e)		0.		-55,437.	0.
13 Total. Add line 12, columns (b), (d), and (e)				13	
(See worksheet in line 13 instructions to verify calculations.))				
Part XVI-B Relationship of Activities		amplishment of Ex		ot Durnosos	
Helationship of Activities	- Course Acce		veinh	nt Fulposes	
Line No. Explain below how each activity for which in	come is reported	ın column (e) of Part XVI-A	contri	buted importantly to the accom	plishment of
the foundation's exempt purposes (other the	an by providing fu	nds for such purposes).			
	···				
					· · · · · · · · · · · · · · · · · · ·
				·····	
					
					
		- ·			
1					

THE KENNETH A. HOROWITZ FAMILY Form 990-PF (2010) 65-0728975 FOUNDATION Page 13 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable **Exempt Organizations** Yes No Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? a Transfers from the reporting foundation to a noncharitable exempt organization of: 1a(1) (2) Other assets 1a(2) **b** Other transactions: (1) Sales of assets to a noncharitable exempt organization 1b(1) (2) Purchases of assets from a noncharitable exempt organization 1b(2) (3) Rental of facilities, equipment, or other assets 16(3) (4) Reimbursement arrangements 16(4) (5) Loans or loan guarantees 1b(5) (6) Performance of services or membership or fundraising solicitations 1b(6) c Sharing of facilities, equipment, mailing lists, other assets, or paid employees d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (b) Amount involved (c) Name of noncharitable exempt organization (a) Line no (d) Description of transfers, transactions, and sharing arrangements N/A 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described Yes X No in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? b If "Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A

		/						
	Inder penalties of perjury, I declare that I have expering the complete Declaration of preparer conier than tax pay		nich preparer has any kni					
Paid	Print/Type preparer's name AMY A. ILES Firm's name ► SCIARABBA W	Preparer's signature Any Fles, CPA	Date	Check I if PTIN self- employed				
Prepare Use Onl	Firm's name SCIARABBA W	ALKER & CO., LLP		Fırm's EIN ▶				
	Firm's address ► 200 E BUFF ITHACA, NY			Phone no. 607-272-555	0_			
				- 000 DE#				

FORM 990-PF INTEREST ON SAVI	NGS A1	ND TEM	PORARY C	ASH IN	IVESTMENTS	STATEMENT	1
SOURCE						AMOUNT	
INTEREST INCOME					-		10.
TOTAL TO FORM 990-PF, PART I,	LINE	3, CO	LUMN A		:		10.
FORM 990-PF DIVIDEND	S AND	INTER	EST FROM	SECUE	RITIES	STATEMENT	2
SOURCE		GROSS	AMOUNT		ITAL GAINS IVIDENDS	COLUMN (A AMOUNT)
DIVIDEND INCOME	-		2,303.	·	0.	2,3	03.
TOTAL TO FM 990-PF, PART I, L	.N 4		2,303.		0.	2,3	03.
FORM 990-PF	ACC	COUNTI	NG FEES			STATEMENT	3
DESCRIPTION	EXPE	A) NSES BOOKS	(B) NET INV MENT IN	EST-	(C) ADJUSTED NET INCOM		
ACCOUNTING		L,350.		0.		1,3	50.
TO FORM 990-PF, PG 1, LN 16B	-	L,350.		0.		1,3	50.
FORM 990-PF		TAX	ES			STATEMENT	4
DESCRIPTION	EXPE		NET INV		(C) ADJUSTED NET INCOM	CHARITA	
DELAWARE FRANCHISE TAX		25.	·	0.			0.
TO FORM 990-PF, PG 1, LN 18		25.		0.			0.

HURRICANE RELIEF 1,362. 0. 1,362. LICENSES AND PERMITS 168. 0. 0. DUES AND SUBSCRIPTIONS 46. 0. 0. TO FORM 990-PF, PG 1, LN 23 1,576. 0. 1,362. FORM 990-PF OTHER DECREASES IN NET ASSETS OR FUND BALANCES STATEMENT 6. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0.	FORM 990-PF	OTHER EXPENSES			STATEMENT	5
LICENSES AND PERMITS 168. 0. 0. DUES AND SUBSCRIPTIONS 46. 0. 0. TO FORM 990-PF, PG 1, LN 23 1,576. 0. 1,362. FORM 990-PF OTHER DECREASES IN NET ASSETS OR FUND BALANCES STATEMENT DESCRIPTION ADJUST BEGINNING OF THE YEAR BALANCE TO ACTUAL TOTAL TO FORM 990-PF, PART III, LINE 5 74. FORM 990-PF CORPORATE STOCK STATEMENT DESCRIPTION BOOK VALUE FAIR MARKET VALUE STOCK 721,259. 835,157. TOTAL TO FORM 990-PF, PART II, LINE 10B 721,259. 835,157. FORM 990-PF SUMMARY OF DIRECT CHARITABLE ACTIVITIES STATEMENT 6 ACTIVITY ONE PROVIDED DIRECT AID IN CONJUNCTION WITH THE ACTIVITIES OF HUBBICANNES IN THE STATE OF FLORIDA. RED CROSS KITS & CELL EXPENSES EXPENSES	DESCRIPTION	EXPENSES	NET INVEST-	ADJUSTEI	CHARITA	
LICENSES AND PERMITS 168. 0. 0. 0. DUES AND SUBSCRIPTIONS 46. 0. 0. 0. TO FORM 990-PF, PG 1, LN 23 1,576. 0. 1,362. FORM 990-PF OTHER DECREASES IN NET ASSETS OR FUND BALANCES STATEMENT 6 DESCRIPTION AMOUNT ADJUST BEGINNING OF THE YEAR BALANCE TO ACTUAL 74. TOTAL TO FORM 990-PF, PART III, LINE 5 74. FORM 990-PF CORPORATE STOCK STATEMENT 7. DESCRIPTION BOOK VALUE FAIR MARKET VALUE STOCK 721,259. 835,157. TOTAL TO FORM 990-PF, PART II, LINE 10B 721,259. 835,157. FORM 990-PF SUMMARY OF DIRECT CHARITABLE ACTIVITIES STATEMENT 6. ACTIVITY ONE PROVIDED DIRECT AID IN CONJUNCTION WITH THE ACTIVITIES OF HUBBICANNES IN THE STATE OF FLORIDA. RED CROSS KITS & CELL PHONE CHARGES EXPENSES	HURRICANE RELIEF	1,362.	0	•	1,3	62.
TO FORM 990-PF, PG 1, LN 23 1,576. 0. 1,362. FORM 990-PF OTHER DECREASES IN NET ASSETS OR FUND BALANCES STATEMENT 6 DESCRIPTION AMOUNT ADJUST BEGINNING OF THE YEAR BALANCE TO ACTUAL 74. TOTAL TO FORM 990-PF, PART III, LINE 5 74. FORM 990-PF CORPORATE STOCK STATEMENT 75. DESCRIPTION BOOK VALUE FAIR MARKET VALUE 75. TOTAL TO FORM 990-PF, PART II, LINE 10B 721,259. 835,157. FORM 990-PF SUMMARY OF DIRECT CHARITABLE ACTIVITIES STATEMENT 6. ACTIVITY ONE PROVIDED DIRECT AID IN CONJUNCTION WITH THE ACTIVITIES OF HURRICANES IN THE STATE OF FLORIDA. RED CROSS KITS & CELL PHONE CHARGES EXPENSES	LICENSES AND PERMITS	168.			-,-	0.
FORM 990-PF OTHER DECREASES IN NET ASSETS OR FUND BALANCES STATEMENT OF THE YEAR BALANCE TO ACTUAL 74. TOTAL TO FORM 990-PF, PART III, LINE 5 74. FORM 990-PF CORPORATE STOCK STATEMENT 75. DESCRIPTION BOOK VALUE FAIR MARKET VALUE STOCK 721,259. 835,157. TOTAL TO FORM 990-PF, PART II, LINE 10B 721,259. 835,157. FORM 990-PF SUMMARY OF DIRECT CHARITABLE ACTIVITIES STATEMENT 85. ACTIVITY ONE PROVIDED DIRECT AID IN CONJUNCTION WITH THE ACTIVITIES OF THE AMERICAN RED CROSS FOR THE BENEFIT OF VICTIMS OF THE AMERICAN RED CROSS FOR THE BENEFIT OF VICTIMS OF THE AMERICAN RED CROSS FOR THE BENEFIT OF VICTIMS OF THE CHARGES EXPENSES	DUES AND SUBSCRIPTIONS	46.	0	•		0.
DESCRIPTION ADJUST BEGINNING OF THE YEAR BALANCE TO ACTUAL TOTAL TO FORM 990-PF, PART III, LINE 5 FORM 990-PF CORPORATE STOCK DESCRIPTION BOOK VALUE FAIR MARKET VALUE STOCK 721,259. TOTAL TO FORM 990-PF, PART II, LINE 10B 721,259. FORM 990-PF SUMMARY OF DIRECT CHARITABLE ACTIVITIES ACTIVITY ONE PROVIDED DIRECT AID IN CONJUNCTION WITH THE ACTIVITIES OF THE AMERICAN RED CROSS FOR THE BENEFIT OF VICTIMS OF HURRICANS IN THE STATE OF FLORIDA. RED CROSS KITS & CELL PHONE CHARGES EXPENSES	TO FORM 990-PF, PG 1, LN 23	1,576.	0	•	1,3	62.
ADJUST BEGINNING OF THE YEAR BALANCE TO ACTUAL TOTAL TO FORM 990-PF, PART III, LINE 5 FORM 990-PF CORPORATE STOCK STATEMENT DESCRIPTION BOOK VALUE FAIR MARKET VALUE STOCK 721,259. 835,157. TOTAL TO FORM 990-PF, PART II, LINE 10B 721,259. FORM 990-PF SUMMARY OF DIRECT CHARITABLE ACTIVITIES ACTIVITY ONE PROVIDED DIRECT AID IN CONJUNCTION WITH THE ACTIVITIES OF THE AMERICAN RED CROSS FOR THE BENEFIT OF VICTIMS OF THE AMERICAN RED CROSS FOR THE BENEFIT OF VICTIMS OF THE AMERICANES IN THE STATE OF FLORIDA. RED CROSS KITS & CELL PHONE CHARGES EXPENSES	FORM 990-PF OTHER DECREASE	ES IN NET AS	SETS OR FUND	BALANCES	STATEMENT	6
ADJUST BEGINNING OF THE YEAR BALANCE TO ACTUAL TOTAL TO FORM 990-PF, PART III, LINE 5 FORM 990-PF CORPORATE STOCK STATEMENT DESCRIPTION BOOK VALUE FAIR MARKET VALUE STOCK 721,259. 835,157. TOTAL TO FORM 990-PF, PART II, LINE 10B 721,259. FORM 990-PF SUMMARY OF DIRECT CHARITABLE ACTIVITIES ACTIVITY ONE PROVIDED DIRECT AID IN CONJUNCTION WITH THE ACTIVITIES OF THE AMERICAN RED CROSS FOR THE BENEFIT OF VICTIMS OF THE AMERICAN RED CROSS FOR THE BENEFIT OF VICTIMS OF THE AMERICANES IN THE STATE OF FLORIDA. RED CROSS KITS & CELL PHONE CHARGES EXPENSES	DESCRIPTION				AMOUNT	
FORM 990-PF CORPORATE STOCK STATEMENT TO STOCK DESCRIPTION BOOK VALUE FAIR MARKET VALUE TOTAL TO FORM 990-PF, PART II, LINE 10B 721,259. 835,157. FORM 990-PF SUMMARY OF DIRECT CHARITABLE ACTIVITIES FORM 990-PF SUMMARY OF DIRECT CHARITABLE ACTIVITIES STATEMENT 8 ACTIVITY ONE PROVIDED DIRECT AID IN CONJUNCTION WITH THE ACTIVITIES OF HURRICAN RED CROSS FOR THE BENEFIT OF VICTIMS OF HURRICANES IN THE STATE OF FLORIDA. RED CROSS KITS & CELL PHONE CHARGES EXPENSES	ADJUST BEGINNING OF THE YEAR	BALANCE TO	ACTUAL			74.
FORM 990-PF CORPORATE STOCK STATEMENT TO STOCK DESCRIPTION BOOK VALUE FAIR MARKET VALUE TOTAL TO FORM 990-PF, PART II, LINE 10B 721,259. 835,157. FORM 990-PF SUMMARY OF DIRECT CHARITABLE ACTIVITIES FORM 990-PF SUMMARY OF DIRECT CHARITABLE ACTIVITIES STATEMENT 8 ACTIVITY ONE PROVIDED DIRECT AID IN CONJUNCTION WITH THE ACTIVITIES OF HURRICAN RED CROSS FOR THE BENEFIT OF VICTIMS OF HURRICANES IN THE STATE OF FLORIDA. RED CROSS KITS & CELL PHONE CHARGES EXPENSES						
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TOTAL TO FORM 990-PF, PART II, LINE 10B 721,259. 835,157. FORM 990-PF SUMMARY OF DIRECT CHARITABLE ACTIVITIES STATEMENT ACTIVITY ONE PROVIDED DIRECT AID IN CONJUNCTION WITH THE ACTIVITIES OF THE AMERICAN RED CROSS FOR THE BENEFIT OF VICTIMS OF HURRICANES IN THE STATE OF FLORIDA. RED CROSS KITS & CELL PHONE CHARGES EXPENSES	DESCRIPTION		В	OOK VALUE		т
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PROVIDED DIRECT AID IN CONJUNCTION WITH THE ACTIVITIES OF THE AMERICAN RED CROSS FOR THE BENEFIT OF VICTIMS OF HURRICANES IN THE STATE OF FLORIDA. RED CROSS KITS & CELL PHONE CHARGES EXPENSES	FORM 990-PF SUMMARY OF	F DIRECT CHA	RITABLE ACTI	VITIES	STATEMENT	8
THE AMERICAN RED CROSS FOR THE BENEFIT OF VICTIMS OF HURRICANES IN THE STATE OF FLORIDA. RED CROSS KITS & CELL PHONE CHARGES EXPENSES	ACTIVITY ONE					
	THE AMERICAN RED CROSS FOR THE STATE OF FI	HE BENEFIT O	F VICTIMS OF	ı		
(O FORM 990-PF, PART IX-A, LINE 1 1,362.					EXPENSES	
	CO FORM 990-PF, PART IX-A, L	INE 1			1,3	62.

	T XV - LINE 1A FOUNDATION MANAGERS	STAT	ement 9
NAME OF MANAGER			
KENNETH HOROWITZ BARBARA HOROWITZ			
	AND CONTRIBUTIONS DURING THE YEAR	STATI	EMENT 10
RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT	RECIPIENT STATUS	AMOUNT
CORNELL UNIVERSITY 55 BROWN RD ITHACA, NY 14850	NONE GENERAL	PUBLIC	33,244.
EVERYBODY WINS! DC 666 11TH STREET, N.W. SUITE 1030 WASHINGTON, DC 20001	NONE GENERAL	PUBLIC	200.
SUNCOAST HIGH SCHOOL FOUNDATION 600 W. 28TH STREET RIVIERA BEACH, FL 33480	NONE GENERAL	PUBLIC	789.
TEMPLE ISRAEL 1901 NORTH FLAGLER DRIVE WEST PALM BEACH, FL 334076193	NONE GENERAL	PUBLIC	2,960.
AMERICAN RED CROSS 2025 E STREET, NW WASHINGTON, DC 20006	NONE GENERAL	PUBLIC	5,000.
METROPOLITAN MUSEUM OF ART 1000 FIFTH AVENUE NEW YORK, NY 10028-0197	NONE GENERAL	PUBLIC	229.

THE KENNETH A. HOROWITZ FAMILY	FOUNDATIO		65-0728975
OVERCOMING OBSTACLES 125 MAIDEN LANE, 5TH FLOOR NEW YORK, NY 10038	NONE GENERAL	PUBLIC	2,000.
ZOE LOREN MAKE A DIFFERENCE FOUNDATION 127 SIESTA WAY PALM BEACH GARDENS, FL 33418	NONE GENERAL	PUBLIC	5,000.
THE JEWISH GUILD FOR THE BLIND 15 WEST 65TH STREET NEW YORK, NY 10023	NONE GENERAL	PUBLIC	200.
GENTLEMEN OF THE GARDEN 1025 W INDIANTOWN ROAD JUPITER, FL 33458	NONE GENERAL	PUBLIC	200.
TOTAL TO FORM 990-PF, PART XV, LI	NE 3A		49,822.

Form 886	8 (Rev. 1-2011)					Page 2
• If you a	re filing for an Additional (Not Automatic) 3-Month Ex	tension, d	complete only Part II and check this bo	x .	▶	\mathbf{x}
Note. On	y complete Part II if you have already been granted an a	automatic	3-month extension on a previously filed	Form 8	8868	
• If you a	re filing for an Automatic 3-Month Extension, comple	te only Pa	art I (on page 1)			
Part II	Additional (Not Automatic) 3-Month E			opies r	reeded).	
	Name of exempt organization				oyer identification	number
Type or	THE KENNETH A. HOROWITZ FAM.	ILY]	•	
print	FOUNDATION			65-0728975		
File by the extended	Number, street, and room or suite no. If a P.O box, s					
due date for	496 NORTH LAKE WAY					
filing your return See	City, town or post office, state, and ZIP code. For a fo	oreign add	ress, see instructions			
instructions	PALM BEACH, FL 33480	Ū	·			
						
Enter the	Return code for the return that this application is for (file	a senara	te application for each return)			0 4
2,110, 1,10	included for the potential time approaches to the	,	to application to out notally			L <u>v.1</u> 1
Applicati	on	Return	Application			Return
ls For		Code	Is For		Code	
Form 990		01				
Form 990		02	Form 1041-A			08
Form 990		03	Form 4720			09
Form 990		04	Form 5227			10
	-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
	Form 990-T (trust other than above) 06 Form 8870				 	12
	not complete Part II if you were not already granted	an autor		slv file	ed Form 8868.	
<u> </u>	KENNETH A. HORO			<u> </u>		
• The bo	ooks are in the care of > 496 NORTH LAKE		- PALM BEACH, FL 334	80		
	one No ▶ 561-863-8686		FAX No ▶			
	organization does not have an office or place of business	s in the Ur				
	s for a Group Return, enter the organization's four digit			is is fo	r the whole aroun cl	heck this
box ▶ [If it is for part of the group, check this box	٦.	· · · · · · · · · · · · · · · · · · ·			
	quest an additional 3-month extension of time until			111011110	ord and externoloring	
	calendar year 2010, or other tax year beginning		, and ending			
	te tax year entered in line 5 is for less than 12 months, c	heck reas		Final r	eturo	 -
<u> </u>	Change in accounting period			,a, ,	otaiti	
7 Sta	te in detail why you need the extension					
	XPAYER RESPECTFULLY REQUESTS	SAN	EXTENSION OF TIME IN	I OR	DER TO GAT	HER
TH						
						
8a If th	us application is for Form 990-BL, 990-PF, 990-T, 4720,	or 6069. e	enter the tentative tax, less any	Γ		
nonrefundable credits. See instructions.			8a	\$	0.	
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated			 	- Y		
	payments made Include any prior year overpayment all	•		}		
	eviously with Form 8868.		a orodit and any amount paid	8b	\$	0.
	ance due. Subtract line 8b from line 8a. Include your pa	vment wi	th this form if required by using	55	*	
EFTPS (Electronic Federal Tax Payment System). See instructions 8c \$			•	0.		
			nd Verification	, 50	1	
Under pen	alties of perjury, I declare that I have examined this form, includ prrect, and complete, and that I am authorized to prepare this fo	ling accomi		e best o	f my knowledge and be	elief,
				Date		
Signature	Title -	CEW _		Date		4.00