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Form 990-PF

EXTENSION GRANTED UNTIL NOVEMBER 15, 2011

Return of Private Foundation

or Section 4947(a)(1) Nonexempt Charitable Trust

Department of the Treasury Internal Revenue Service

Treated as a Private Foundation

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

2010

OMB No 1545-0052

For	calendar year 2010, or tax year beginning		, and ending			
G	heck all that apply: Initial return	Initial return of a fo	. —	Final return		
<u> </u>	Amended return	Address chang	je	Name change		
Nar	ne of foundation			A Employer identification	number	
	SIDNEY KOHL FAMILY FO	UNDATION		65-6429919		
Nun	ber and street (or P O box number if mail is not delivered to street		Room/suite	B Telephone number	· · - · · · · · · · · · · · · · · · · ·	
	340 ROYAL POINCIANA W	ΆΥ	305	561 833-42	11	
City	or town, state, and ZIP code	·		C If exemption application is pe	ending, check here	
	PALM BEACH, FL 33480			D 1. Foreign organizations	, check here	
H C	heck type of organization: X Section 501(c)(3) ex			Foreign organizations med check here and attach col	mputation .	
느		Other taxable private founda		E If private foundation stat		
	ur market value of all assets at end of year J Accounts	ng method: X Cash :her (specify)	Accrual	under section 507(b)(1)	• •	
	om Part II, col. (c), line 16) Ut. \$ 2,703,948. (Part I, colu		oasis)	F If the foundation is in a 6 under section 507(b)(1)		
	+ 1 Analysis of Revenue and Expenses	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements	
	(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	expenses per books	income	income	for charitable purposes (cash basis only)	
	1 Contributions, gifts, grants, etc., received	0.	· ,	. N/A	/ ky^ . / ^	
	2 Check X if the foundation is not required to attach Sch. B	* , * * * * * * * * * * * * * * * * * *	*** *	*		
	3 Interest on savings and temporary cash investments					
	4 Dividends and interest from securities	98,906.	98,906.		STATEMENT 1	
. 	5a Gross rents	· ,		, ,		
NUVZDANI.	b Net rental income or (loss)	<660,195.	* * *	<u> </u>	*	
ie j	6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all 414,575.	7000,133.	* * * *		× ,	
{ ¼ ₺ Revenue	7 Capital gain net income (from Part IV, line 2)	*-, * , , , , , , , , , , , , , , , , ,	0.	* * * * * * * * * * * * * * * * * * * *	2 2 w/s 4 4 5	
≥ &	8 Net short-term capital gain	* * *	-,	w· x,		
Ž	9 Income modifications	, r s	≽ ×ý ×			
	10a and allowantes	× *	× - *	× ,	2 X X	
E E	Less Cost of goods sold		(* -	· · · · · · · · · · · · · · · · · · ·	
	t Gross profit or (loss) 11 Sther income 2 1 2011	-110 407	> 0.		CM3 MEMENT 3	
5	11 Sther income 2 1 2011	<119,407. <680,696.			STATEMENT 2	
r		0.	0.		0	
	13 Compensation of officers, directors, trustees etc 14 Other employee salaries and wages					
	15 Pension plans, employee benefits	***************************************	-,-			
ses	16a Legal fees					
kbenses	b Accounting fees STMT 3	3,500.	0.		3,500	
Ä	c Utner professional fees					
tive	17 Interest 18 Taxes STMT 4	867.	320.	<u> </u>	0	
and Administrative E		007.	320.			
Ē	19 Depreciation and depletion 20 Occupancy				***	
Adn	21 Travel, conferences, and meetings					
ģ	22 Printing and publications		- · · · · · · · · · · · · · · · · · · ·			
ga	23 Other expenses STMT 5	7,549.	7,488.		61	
Operating	24 Total operating and administrative					
рет	expenses. Add lines 13 through 23	11,916.	7,808.		3,561	
U	25 Contributions, gifts, grants paid	716,807.	, , , , , , , , , , , , , , , , , , ,		716,807	
	26 Total expenses and disbursements.	728,723.	7,808.		720,368	
	Add lines 24 and 25 27 Subtract line 26 from line 12:	120,123.	7,000.	1 3 2 3 3	720,300	
	27 Subtract line 20 from line 12. 2 Excess of revenue over expenses and disbursements	<1,409,419.	>			
	b Net investment income (if negative, enter -0-)		91,098.			
	c Adjusted net income (if negative, enter -0-)	1 1 - 2	1-24 5 Fee 14	N/A	7 3.	
0235	01 7-10 LHA For Paperwork Reduction Act Notice, see	the instructions.			Form 990-PF (2010)	

Form **990-PF** (2010)

	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End o	
Part	Balance Sneets column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
T 1	Cash - non-interest-bearing			
2	Savings and temporary cash investments	1,914,402.	169,261.	169,261.
	Accounts receivable			
	Less: allowance for doubtful accounts ▶			
4	Pledges receivable		· " "	
'	Less: allowance for doubtful accounts		~ *	* * * *
5				
1 -	Receivables due from officers, directors, trustees, and other			
"				
,	disqualified persons	5. 5. 7. 7. 7. 7.	х ,	
'	Other notes and loans receivable		Tallor 3 A Lilly C	
١.	Less: allowance for doubtful accounts			
Assets				
ss 9				
10	a Investments - U.S. and state government obligations	225 102	725 102	249 204
1	b Investments - corporate stock STMT 6	235,183.	235,183.	248,294.
'	c Investments - corporate bonds			
11	Investments - land, buildings, and equipment, basis		N. WANT THE TOTAL PROPERTY OF THE PARTY OF T	1,
	Less accumulated depreciation			
12	Investments - mortgage loans			
13	Investments - other STMT 7	1,894,256.	2,263,298.	2,286,393.
14	Land, buildings, and equipment basis	3 TI 6 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	ž.,	
	Less accumulated depreciation	1		
15				
"				
16	Total assets (to be completed by all filers)	4,043,841.	2,667,742.	2,703,948.
17		25,180.	58,500.	
18			<u> </u>	1 3,
	• •			
ties				
Liabilities 20 21 21 20 20 21				1, , , , , , , , ,
별 21	. ,		· · · · · · · · · · · · · · · · · · ·	1
22	Other liabilities (describe			
١.,	T (all Pak 1985 and add have 47 Abreaugh 20)	25,180.	58,500.	1 (25)
23	Total liabilities (add lines 17 through 22)	25,100.	30,300.	
	Foundations that follow SFAS 117, check here			757
σ l	and complete lines 24 through 26 and lines 30 and 31.			1, "(1)
Se 24	•			
호 25				
<u>m</u> 26	Permanently restricted		 	
š	Foundations that do not follow SFAS 117, check here			
Net Assets or Fund Bala 25 25 25 25 25 26 27 28 29 25 26 27 27 28 28 28 28 28 28 28 28 28 28 28 28 28	and complete lines 27 through 31.			
္တ 27	Capital stock, trust principal, or current funds	4,018,661.	2,609,242.	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -
g 28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
& 29	Retained earnings, accumulated income, endowment, or other funds	0.	0.	
₹ 30	Total net assets or fund balances	4,018,661.	2,609,242.	<u>.</u> "
~				
31	Total liabilities and net assets/fund balances	4,043,841.	2,667,742	
	t III Analysis of Changes in Net Assets or Fund I			
Par				_
1 Tot	al net assets or fund balances at beginning of year - Part II, column (a), line	e 30		1
(m	ust agree with end-of-year figure reported on prior year's return)		1	
2 Ent	ter amount from Part I, line 27a		2	<1,409,419.
3 Oth	ner increases not included in line 2 (itemize)		3	
	d lines 1, 2, and 3		4	2,609,242.
	creases not included in line 2 (itemize)		5	
	tal net assets or fund halances at end of year (line 4 minus line 5) - Part II.	column (b), line 30	6	2,609,242.

Part I	V Capital Gains	and Lo	sses for Tax on In	vestment	Income					
	(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.) (b) How acquired P - Purchase D - Donation					acquired lay, yr.)	(d) Date sold (mo., day, yr.)			
1a KB			-1 PASS THRU	J			P			
	HMAN BROS LO						P	ļ <u>-</u>		
	RGAN CREEK A	BSOLU	TE REURN OF	FSHORE		<u> </u>	P	-		
d						-				
е		(6) D	epreciation allowed	(a) Con	t or other basis	Н		(b) C	ain or (loss	Λ
	e) Gross sales price	(1)	(or allowable)		xpense of sale				s (f) minus	(g)
<u>a</u>	805. 2,961.				372,64	 				805. <369,688.>
<u>b</u>	410,809.				$\frac{372,04}{702,12}$					<291,312.>
d	410,000.				702,12					<u> </u>
e										
	plete only for assets showing	ig gain in d	column (h) and owned by t	he foundation	on 12/31/69	<u> </u>		(I) Gains ((Col. (h) gain	minus
	M V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Ex	cess of col. (1) col. (j), if any		C	ol. (k), but		n -0-) or
a					·					805.
b										<369,688.>
C										<291,312.>
đ										
е	·		<u></u>	_		_				
2 Capita	I gain net income or (net ca	pital loss)	$\begin{cases} \text{ If gain, also enter} \\ \text{ If (loss), enter -0-} \end{cases}$	ın Part I, line ın Part I, line	7 7	}	2			<660,195 . >
lf gain	ort-term capital gain or (los , also enter in Part I, line 8,			d (6):		$\left \cdot \right $			N/A	
Part.\	s), enter -0- in Part I, line 8 / Qualification U	nder S	ection 4940(e) for	Reduced	Tax on Net	Inv	estment li	ncome	14/ 1	•
,, ,	nal use by domestic private									
•			-	(- /			-7			
If section	4940(d)(2) applies, leave the	his part bla	ınk.							
Was the f	oundation liable for the sec	tion 4942	tax on the distributable ami	ount of any ye	ar in the base per	rıod?				Yes X No
	ne foundation does not qual									
1 Enter	the appropriate amount in	each colun	nn for each year, see instru	ictions before	making any entri	es.				
Calend	(a) Base period years ar year (or tax year beginni	ng in)	(b) Adjusted qualifying dist		Net value of no		rtable-use asse		Dıstrı (col. (b) dı	(d) bution ratio vided by col (c))
	2009			2,222.			, 233, 38			.192437
	2008			3,559.			,209,76			.144644
	2007			0,193.			,957,11			.050591
_	2006			2,564.			,490,05			.091129
-	2005		19	2,611.			,044,82	i 1 •		.112510
	of line 1, column (d)			-				2	ļ	.591311
	ge distribution ratio for the undation has been in existe			n line 2 by 5,	or by the number	of ye	ars	3		.118262
4 Enter	the net value of noncharitat	ole-use ass	ets for 2010 from Part X, I	ine 5				4		2,634,620.
5 Multip	oly line 4 by line 3							5		311,575.
6 Enter	1% of net investment incon	ne (1% of	Part I, line 27b)					6		911.
7 Add li	nes 5 and 6				_			7		312,486.
	qualifying distributions fror	n Part XII.	line 4		-			8		720,368.
If line	8 is equal to or greater than be Part VI instructions.			1b, and comp	lete that part usin	ng a 19	% tax rate.	L	•	

10 Did any persons become substantial contributors during the tax year? if "Yes," attach a schedule listing their names and addresses

10

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	2(b)(13)? If "Yes," attach schedule (see instructions)	11		X
12		ndation acquire a direct or indirect interest in any applicable insurance contract before			
	August 17,		12	İ	X
13		ndation comply with the public inspection requirements for its annual returns and exemption application?	13	X	<u> </u>
		dress ▶ N/A	<u> </u>		·
14		are in care of ► SIDNEY A KOHL Telephone no. ► 561	833-4	4211	
			>33480		
15		47(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here			
		he amount of tax-exempt interest received or accrued during the year]	A/N	
16		during calendar year 2010, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	-	or other financial account in a foreign country?	16	1	X
		O of the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of			
	the foreign				1
Pa		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		year did the foundation (either directly or indirectly):			
	_	e in the sale or exchange, or leasing of property with a disqualified person?	No -		
		w money from, lend money to, or otherwise extend credit to (or accept it from)	2 1 x	- -	·
	a disq	ualified person?	No .*	,	*
	(3) Furnis	h goods, services, or facilities to (or accept them from) a disqualified person?	No	1 .	
		ompensation to, or pay or reimburse the expenses of, a disqualified person?	No	1.	,
		er any income or assets to a disqualified person (or make any of either available	, , ,	, , ,	
		benefit or use of a disqualified person)?	No .	1	,
	(6) Agree	to pay money or property to a government official? (Exception. Check "No"			1
	ıf the f	oundation agreed to make a grant to or to employ the official for a period after		, ` ,	
		ation of government service, if terminating within 90 days.)	No		
t	If any ansv	ver 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		
	Organizatio	ons relying on a current notice regarding disaster assistance check here	□ [,	` . ×	
	Did the fou	indation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected	,		- x
	before the	first day of the tax year beginning in 2010?	10		X
2	Taxes on fa	alture 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)):	55	, ,	1 - 4
	At the end	of tax year 2010, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			**
	before 201	0? Yes X	No -	' · ·	
		t the years > ,,,,,	× ×	ş (%)	
ı	b Are there a	iny years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect	**,	*	1
	valuation o	of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach	_		1 .
		- see instructions.) N/.	A 2b		<u> </u>
•	c If the provi	sions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	*		
	.	· _ · · _ · _ · _ · _ · _ · _ · _ · _ · _ · · _ ·	»~		
3	a Did the fou	indation hold more than a 2% direct or indirect interest in any business enterprise at any time	1. *		14.
	during the		No	;	
١		d it have excess business holdings in 2010 as a result of (1) any purchase by the foundation or disqualified persons after	: ;	. .	1 2 3 2 2
	-	969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose	1 3		1, 1
		s acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,	_ :	2	٠- څـــا
		10 , to determine if the foundation had excess business holdings in 2010.)			
		indation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	+	X
		indation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	, , ,	`*	
	had not be	en removed from jeopardy before the first day of the tax year beginning in 2010?	4b		X

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Part VII-B Statements Regarding Activities for Which I	orm 4720 May Be I	Required (contin	ued)	
 5a During the year did the foundation pay or incur any amount to: (1) Carry on propaganda, or otherwise attempt to influence legislation (section (2) Influence the outcome of any specific public election (see section 4955); o 		ectly,	es X No	
 any voter registration drive? (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 			es X No	
509(a)(1), (2), or (3), or section 4940(d)(2)? (5) Provide for any purpose other than religious, charitable, scientific, literary,				
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 und			es X No	5b X
section 53.4945 or in a current notice regarding disaster assistance (see instru	•			5b X
Organizations relying on a current notice regarding disaster assistance check h c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fi expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53 4945	rom the tax because it mainta	ined X Yo	es No	
6a Did the foundation, during the year, receive any funds, directly or indirectly, to a personal benefit contract?	pay premiums on	Y	es X No	6b X
 b Did the foundation, during the year, pay premiums, directly or indirectly, on a p If "Yes" to 6b, file Form 8870 7a At any time during the tax year, was the foundation a party to a prohibited tax s 		Y	es 🛣 No 🏻	
b If "Yes," did the foundation receive any proceeds or have any net income attribu	itable to the transaction?		N/A	7b
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors		anagers, Highl	y 	
1 List all officers, directors, trustees, foundation managers and their		1		
(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
340 ROYAL POINCIANA WAY, STE 305	TRUSTEE	_	_	
PALM BEACH, FL 33480	0.00	0.	0.	0.
340 ROYAL POINCIANA WAY, STE 305	TRUSTEE			İ
PALM BEACH, FL 33480	0.00	0.	0.	0.
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none,	, enter "NONE."	!	
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				
				ļ
Total number of other employees paid over \$50,000	1		<u> </u>	0

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Part VIII Information About Officers, Directors, Trustees, Foundatio Paid Employees, and Contractors (continued)	n Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "N	IONE."	
(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 Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical number of organizations and other beneficiaries served, conferences convened, research papers produce		Expenses
THIS FOUNDATION MAY PROVIDE GRANTS TO QUALIFIE ORGANIZATIONS IT DOES NOT PARTICIPATE IN ANY I		
CHARITABLE ACTIVITIES.		0
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 on lines	s 1 and 2.	Amount
1N/A		

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0.

>

2

All other program-related investments. See instructions.

Total. Add lines 1 through 3

Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) Part X Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: 214,733. a Average monthly fair market value of securities 1a 314,448. b Average of monthly cash balances 1b 145,560. c Fair market value of all other assets 1c 2,674,741. 1d d Total (add lines 1a, b, and c) e Reduction claimed for blockage or other factors reported on lines 1a and 0 1c (attach detailed explanation) Acquisition indebtedness applicable to line 1 assets 2 3 Subtract line 2 from line 1d 40,121. Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 4 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 5 2,634,620. 131,731. Minimum investment return. Enter 5% of line 5 Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain Part XI foreign organizations check here and do not complete this part.) 131,731. 1 Minimum investment return from Part X, line 6 911. 2a Tax on investment income for 2010 from Part VI, line 5 Income tax for 2010. (This does not include the tax from Part VI.) 2b Add lines 2a and 2b 2с 911. 820. Distributable amount before adjustments. Subtract line 2c from line 1 3 4 Recoveries of amounts treated as qualifying distributions Add lines 3 and 4 5 Deduction from distributable amount (see instructions) 6 130,820. 7 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: 720,368. a Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 1a b Program-related investments - total from Part IX-B 16 2 2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes Amounts set aside for specific charitable projects that satisfy the: a Suitability test (prior IRS approval required) 3a 3b b Cash distribution test (attach the required schedule) 720,368. Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b Adjusted qualifying distributions. Subtract line 5 from line 4 6 719.457. Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section

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4940(e) reduction of tax in those years.

Part:XIII Undistributed Income (see instructions)

		(a) Corpus	(b) Years prior to 2009	(¢) 2009	(d) 2010
1 Distributable amount for line 7	2010 from Part XI,	9 A			130,820.
2 Undistributed income, if any,	as of the end of 2010	<u> </u>			130,020.
a Enter amount for 2009 o				0.	- '
b Total for prior years:	····y	Y	<u> </u>		* *
g rounter prior youres			0.		
3 Excess distributions carr	yover, if any, to 2010:			*,	
a From 2005	799,356.	7 7 7 7			
b From 2006	690,002.				
c From 2007		-			
d From 2008	753,559.		, ,		
e From 2009	622,753.		4 * 1 * 4 *		
f Total of lines 3a through		2,865,670.		* , , , , ,	
4 Qualifying distributions f		',×	, ,,,	y a lay of	
Part XII, line 4: ►\$	720,368.		, , , , , , , , , , , , , , , , , , , ,		
a Applied to 2009, but not				0.	
b Applied to undistributed		*,\$-, *, , , , , , , , , , , , , , , , , ,			2 1 v 4 2 k 2 v 4 2 k
years (Election required	•	, x - 1^-, '	0.	The state of the s	
c Treated as distributions	·		2, 1, 2, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,	and they bear a target	and the state of t
(Election required - see i	•	720,368.		The state of the s	
d Applied to 2010 distribu	·	2., * 2., * ~	فأمعين والم	_, _^^,	0.
e Remaining amount distr		0.	* ****	2	<i>→</i> * * .*
· · · · · · · · · · · · · · · · · · ·		130,820.	1 5	h 1 c s 22	130,820.
5 Excess distributions carryov (If an amount appears in columnust be shown in column (a)		, ×		`, ', ', , , × , × ,	** **
6 Enter the net total of ea indicated below:	•			A STATE OF THE STA	
a Corpus Add lines 3f, 4c, and	d 4e Subtract line 5	3,455,218.			
b Prior years' undistribute		No. No.	· · · · · · · · · · · · · · · · · · ·		No. of the state o
line 4b from line 2b			0.		
c Enter the amount of pric undistributed income to deficiency has been issu the section 4942(a) tax assessed	r which a notice of led, or on which		0.		
d Subtract line 6c from lin	e 6b. Taxable	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	_		
amount - see instruction	ıs	** * * * * * * * * * * * * * * * * * * *	0.	Participation of the second	3 × × 1 × 1 × 1 × 1
e Undistributed income fo	r 2009. Subtract line	**************************************			
4a from line 2a. Taxable	amount - see ınstr.			0.	,* ,* ,*
f Undistributed income fo					
lines 4d and 5 from line	1. This amount must				
be distributed in 2011			. ", ", ",	1 x 1, x 1 = - 1	0.
7 Amounts treated as dist			**	The state of the s	
corpus to satisfy require			in the second		* * *
section 170(b)(1)(F) or		0.	**		
8 Excess distributions car	•	CC0 52C			
not applied on line 5 or		668,536.		- 1	2 14 4 4 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
9 Excess distributions ca	=	2 706 602		*	
Subtract lines 7 and 8 fr	om line ba	2,786,682.			- , , · · · · · · · · · · · · · · · · ·
10 Analysis of line 9:	600 002				
a Excess from 2006	690,002.		<u>.</u>		·-
b Excess from 2007	752 550			¥ , *	-
c Excess from 2008	753,559. 622,753.	[· `
d Excess from 2009	720,368.	-			1
e Excess from 2010	720,300.		<u>L</u>	! 	Form 990-PF (2010)

the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

a The name, address, and telephone number of the person to whom applications should be addressed:

SIDNEY KOHL, 561-833-4211

340 ROYAL POINCIANA WAY, STE 305, PALM BEACH, FL 33480

b The form in which applications should be submitted and information and materials they should include:

c Any submission deadlines:

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

3 Grants and Contributions Paid During the Y	ear or Approved for Future	Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	COMITION CONTRACTOR	
a Paid during the year SEE STATEMENT 8	or substantial contributor	recipient		
Total	<u>. l.</u> .	<u> </u>	▶ 3a	716,807.
b Approved for future payment NONE			. ► 3b	0.
Total			. ► 3b	
023611 12-07-10			F	orm 990-PF (2010)

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.		DUSINESS INCOME		1 by section 512, 513, or 514	(e)
1 Program service revenue:	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
a	_				
b	_				
C	_				
d	_	·			
e	_				
f					
g Fees and contracts from government agencies					·
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments			1		
4 Dividends and interest from securities		·····	14	98,906.	·
5 Net rental income or (loss) from real estate:	1	1 1 2 x 3 x 3 x 3 x 3 x 3 x 3 x 3 x 3 x 3 x	2" .		151 L N
a Debt-financed property	234.	A - 1 = 1	1 1		
b Not debt-financed property			+		
6 Net rental income or (loss) from personal		·-		·	
	ŀ				
property 7 Other constructions to accomp	900099	<119,407	, 		
7 Other investment income	300033	<u> </u>	•		
8 Gain or (loss) from sales of assets other			18	-CCO 10E	
than inventory			- 1 - 0	<660,195.	<u> </u>
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory	<u> </u>				
11 Other revenue:					
a	_		\perp		
b		···			
С					
d					
e					
12 Subtotal. Add columns (b), (d), and (e)		<119,407	' • ⊳ `	<561,289.	> 0
13 Total. Add line 12, columns (b), (d), and (e)				. 13	<680,696
(See worksheet in line 13 instructions to verify calculations	s.)			_	•
		maliahmant of	Evennt	Duragoog	
Part XVI-B Relationship of Activitie	es to the Accor	npushment or	Exempt	Purposes	
Line No. Explain below how each activity for which	income is reported in	column (e) of Part XV	I-A contribut	ed importantly to the accor	nplishment of
the foundation's exempt purposes (other t	han by providing fund	ds for such purposes).		,	•
					
		···			
	· · · · · · · · · · · · · · · · · · ·				
				·	
				_	
		•			
		•			
		· · · · · · · · · · · · · · · · · · ·			
. 					
023621 12-07-10					Form 990-PF (2010

Form 990-PF (2010)
Part XVII. Ir Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

	2	ectly engage in any of the followin	= = =		* Yes No
		(3) organizations) or in section 52		ations?	2 3 4 4 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5
a Transf	ers from the reporting founda	ition to a noncharitable exempt org	ganization of:		
(1) Ca	ash	•			1a(1) X
(2) 01	ther assets				1a(2) X
b Other t	ransactions:				*
(1) Sa	ales of assets to a noncharital	ole exempt organization			1b(1) X
(2) Pi	urchases of assets from a nor	ncharitable exempt organization			1b(2) X
(3) R	ental of facilities, equipment, (or other assets			1b(3) X
(4) R	eimbursement arrangements				1b(4) X
(5) Lo	oans or loan guarantees				1b(5) X
		mbership or fundraising solicitatio	ns		1b(6) X
c Sharin	g of facilities, equipment, mai	ılıng lısts, other assets, or paid em	ployees		1c X
				ays show the fair market value of th	e goods, other assets,
				in any transaction or sharing arran	
		other assets, or services received.		,	•
(a)Line no	(b) Amount involved	(c) Name of noncharitable	exempt organization	(d) Description of transfers, transa	ctions, and shanng arrangements
(-/		N/A	· · · · · · · · · · · · · · · · · · ·		
		14, 11		 	
				 	
				-	
				ļ	
			<u></u> .		
					,
				<u> </u>	
2a Is the	foundation directly or indirect	tly affiliated with, or related to, one	or more tax-exempt organiza	ations described	
		r than section 501(c)(3)) or in sec			Yes X No
	s," complete the following sch				
D II TES	(a) Name of org		(b) Type of organization	(c) Description o	f relationship
		ganzation	(b) type of organization	(0) 2000 (\$100 0	- TORGOTOTIP
	N/A		 		
	· <u>-</u> -				
				··	
	. 481		ļ		
			<u> </u>		
	Under penalties of perjury, I declar	e that I have examined this return, includ arer (other than taxpayer or fiduciary) is b	ling accompanying schedules and	statements, and to the best of my knowledge	edge and belief, it is true, correct,
Sign	and complete Declaration of prapa	(Office (Mar) taxpayer or inductary) is o		repair ras any knowneege	
Here		A COL	11-11-	TRUSTEE	
	Signature of officer or tri	istee	Date	Title	
	Print/Type preparer's na	ame Preparer's s	ignature///	Date Check	f PTIN
		/ - M.	1/N/AP	self- employed	
Paid	MICHAEL S.	LEONE //LC	KaX/L.COA	1/11/2011	
Prepar		ERN ROSENTHAL	Z Jour VI	Firm's EIN	<u> </u>
Use Or			1	THIN S LIN	
USE OI		O COLUMBIA DR.,	STITE 500		
		ST PALM BEACH,		R	(561) 689-7888
		DI PALM DEACH,	EU 22402-1300	Phone no.	
					Form 990-PF (2010)

FORM 990-PF D	IVIDENDS	AND	INTER	EST	FROM	SECU	RITIES	STATEMENT	1
SOURCE			GROSS	AMO	UNT		ITAL GAINS IVIDENDS	COLUMN (A AMOUNT)
K-1 PASS THROUGH DIVIDI K-1 PASS THROUGH INTERI WELLS FARGO ADVISORS CA	EST	_			008.		0.	15,0 80,1	
DISTRIBUTION WELLS FARGO ADVISORS DE				3	107. 597.		0. 0.	1 3,5	07. 97.
TOTAL TO FM 990-PF, PAI	RT I, LN	4 =		98	906.		0.	98,9	06.
FORM 990-PF	<u>n.</u> .	0'	THER I	NCOI	1E			STATEMENT	2
DESCRIPTION			:	RE	(A) /ENUE BOOKS		(B) NET INVEST- MENT INCOME		
CASUALTY LOSS FROM M IN	NVESTORS			-	<119,	407.>	0	•	
TOTAL TO FORM 990-PF, 1	PART I,	LINE	11		<119,	407.>	0	•	
FORM 990-PF		AC	COUNTI	NG 1	FEES			STATEMENT	3
DESCRIPTION		EXPE	A) NSES BOOKS		(B) INVI IT INC	EST-	(C) ADJUSTED NET INCOM		
ACCOUNTING FEES			3,500.			0.		3,5	00.
TO FORM 990-PF, PG 1,	LN 16B		3,500.			0.		3,5	00.

FORM 990-PF	TAX	ES		STATEMENT 4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOM	
FOREIGN TAX K-1 PASS THROUGH EXCISE TAX FOR 2009	320. 547.			0.
TO FORM 990-PF, PG 1, LN 18	867.	320.		0.
FORM 990-PF	OTHER E	XPENSES		STATEMENT 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOM	
PORTFOLIO DEDUCTION FILING FEES OTHER EXPENSE K-1 PASS	6,335. 61.			0. 61.
THROUGH	1,153.	1,153.		0.
TO FORM 990-PF, PG 1, LN 23	7,549.	7,488.		61.
FORM 990-PF	CORPORAT	E STOCK		STATEMENT 6
DESCRIPTION		ВО	OK VALUE	FAIR MARKET VALUE
DELPHI FINANCIAL GROUP STOCK EQUITY RESIDENTIAL PROPERTIE	S STOCK	<u></u>	230,304. 4,879.	241,852. 6,442.
TOTAL TO FORM 990-PF, PART I	I, LINE 10B		235,183.	248,294.

10022

FORM 990-PF OT	HER INVESTMENTS		STATEMENT 7
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
INVESTMENT LEHMAN BROS	COST	0.	0 .
INVESTMENT M INVESTORS	COST	0.	0
INVESTMENT MORGAN CREEK ABSOLUTE RETURN FD	COST	235,249.	144,186
INVESTMENT KBI INVESTORS	COST	1,651,608.	
INVESTMENT LTG INVESTORS	COST	376,441.	
TOTAL TO FORM 990-PF, PART II, LI	NE 13	2,263,298.	2,286,393
	AND CONTRIBUTION DURING THE YEAR	S	STATEMENT {
RECIPIENT NAME AND ADDRESS	RECIPIENT RELA AND PURPOSE O	F GRANT ST	PIENT ATUS AMOUNT
211 PALM BEACH/TREASURE COAST P.O. BOX 3588 LANTANA, FL 33465	NONE CHARITABLE	PUBLI	C 3,000
AMERICAN FRIENDS OF HEBREW UNIVERSITY ONE BATTERY PARK PLAZA, 25TH FLOOR NEW YORK, NY 10004	NONE CHARITABLE	PUBLI	C 1,000
AMERICAN PRINTER OF MAR ICENT			
PHIL ORCHESTRA 122 EAST 42ND ST., STE 4507 NEW	NONE CHARITABLE	PUBLI	C 4,600
AMERICAN FRIENDS OF THE ISRAEL PHIL ORCHESTRA 122 EAST 42ND ST., STE 4507 NEW YORK, NY 10168 AMERICAN HEART ASSOCIATION P.O. BOX 2903 PALM BEACH, FL 33480	CHARITABLE		C 4,600

SIDNEY KOHL FAMILY FOUNDATION			65-6429919
AMERICAN RED CROSS PALM BEACH CHAPTER 825 FERN ST WEST PALM BEACH, FL 33401	NONE CHARITABLE	PUBLIC	2,000.
ARTHUR I. MEYER JEWISH ACADEMY 3261 NORTH MILITARY TRAIL WEST PALM BEACH, FL 33409		PUBLIC	1,000.
BRUCE AND LORI GENDELMAN FAMILY FOUNDATION 10335 N. PORT WASHINGTON ROAD, SUITE 200 MEQUON, WI 53092	NONE CHARITABLE	PRIVATE	24,000.
CENTER ON HALSTED, CHICAGO 3656 N HALSTED ST CHICAGO, IL 60613	NONE CHARITABLE	PUBLIC	10,000.
CHICAGO SYMPHONEY ORCHESTRA 220 SOUTH MICHIGAN AVENUE CHICAGO, IL 60604	NONE CHARITABLE	PUBLIC	8,000.
CHILDREN'S HOME SOCIETY OF FLORIDA 3333 FOREST HILL BOULEVARD WEST PALM BEACH, FL 33406	NONE CHARITABLE	PUBLIC	1,000.
CYSTIC FIBROSIS FOUNDATION 2200 N. FLORIDA MANGO RD, SUITE 403 WEST PALM BEACH, FL 33409		PUBLIC	1,000.
DANA-FARBER CANCER INSTITUTE 220 SUNRISE AVENUE, SUITE 204 PALM BEACH, FL 33480	NONE CHARITABLE	PUBLIC	4,000.
HARVARD LAW SCHOOL 124 MOUNT AUBURN STREET CAMBRIDGE, MA 02138	NONE CHARITABLE	PUBLIC	5,000.
HISTORICAL SOCIETY OF PALM BEACH COUNTY 300 NORTH DIXIE HIGHWAY WEST PALM BEACH, FL 33401	NONE CHARITABLE	PUBLIC	1,000.

SIDNEY ROHL FAMILY FOUNDATION			65-6429919
HOSPICE OF PALM BEACH COUNTY FOUNDATION 5300 EAST AVENUE WEST PALM BEACH, FL 33407	NONE CHARITABLE	PUBLIC	500.
JEWISH FEDERATION OF PALM BEACH COUNTY 4601 COMMUNITY DRIVE WEST PALM BEACH, FL 33417	NONE CHARITABLE	PUBLIC	210,000.
JEWISH UNITED FUND 30 SOUTH WELLS STREET CHICAGO, IL 60606	NONE CHARITABLE	PUBLIC	7,000.
JOHN HOPKINS HEALTH SYSTEM 901 SOUTH BOND STREET, SUITE 520 BALTIMORE, MD 21231		PUBLIC	1,900.
KIDS OF NYU FOUNDATION 902 BROADWAY, SUITE 1603 NEW YORK, NY 10010	NONE CHARITABLE	PUBLIC	2,500.
KOHL CHILDREN'S MUSEUM OF GREATER CHICAGO 2100 PATRIOT BOULEVARD GLENVIEW, IL 60026	NONE CHARITABLE	PUBLIC	41,667.
KRAVIS CENTER FOR THE PERFORMING ARTS 701 OKEECHOBEE BOULEVARD WEST PALM BEACH, FL 33401	NONE CHARITABLE	PUBLIC	100,000.
MILWAUKEE JEWISH FEDERATION 1360 N PROSPECT AVENUE MILWAUKEE, WI 53202	NONE CHARITABLE	PUBLIC	25,000.
NATIONAL JEWISH HEALTH 1400 JACKSON ST DENVER, CO 80206	NONE CHARITABLE	PUBLIC	930.
NATIONAL MUSEUM OF AMERICAN JEWISH HISTORY 101 SOUTH INDEPENDENCE MALL EAST PHILADELPHIA, PA 19106	NONE CHARITABLE	PUBLIC	25,000.

SIDNEY KOHL FAMILY FOUNDATION			65-6429919
MORSE LIFE FOUNDATION 4847 FRED GLADSTONE DRIVE WEST PALM BEACH, FL 33417	NONE CHARITABLE	PUBLIC	10,500.
PALM BEACH ATLANTIC UNIVERSITY 901 SOUTH FLAGLER DR WEST PALM BEACH, FL 33416		PUBLIC	3,000.
PALM BEACH CIVIC ASSOCIATION 139 N COUNTY ROAD #33 PALM BEACH, FL 33480	NONE CHARITABLE	PUBLIC	2,850.
PALM BEACH COUNTRY CLUB FOUNDATION P.O. BOX 615 PALM BEACH, FL 33480	NONE CHARITABLE	PUBLIC	1,000.
PARACARE ASSOCIATION OF PALM BEACH, INC P.O. BOX 532 PALM BEACH, FL 33480	NONE CHARITABLE	PUBLIC	200.
PLANNED PARENTHOOD 2300 N FLORIDA MANGO ROAD WEST PALM BEACH, FL 33409	NONE CHARITABLE	PUBLIC	4,670.
RYAN LICHT SANG BIPOLAR FOUNDATION PO BOX 2657 PALM BEACH, FL 33480	NONE CHARITABLE	PUBLIC	5,000.
SIMON WEISENTHAL CENTER 1399 SOUTH ROXBURY DR LOS ANGELES, CA 90035	NONE CHARITABLE	PUBLIC	5,000.
SONOMA COUNTY ANIMAL SHELTER 1247 CENTURY CT SANTA ROSA, CA 95403		PUBLIC	2,100.
SOUTH FLORIDA SCIENCE MUSEUM 4801 DREHER TRAIL NORTH WEST PALM BEACH, FL 33405	NONE CHARITABLE	PUBLIC	1,000.

SIDNEY KOHL FAMILY FOUNDATION			65-6429919
SUSAN G. KOMEN FOR THE CURE 5005 LBJ FREEWAY, SUITE 250 DALLAS, TX 75244	NONE CHARITABLE	PUBLIC	1,000.
THE ARCHER SCHOOL FOR GIRLS 11725 SUNSET BOULEVARD LOS ANGELES, CA 90049	NONE CHARITABLE	PUBLIC	5,000.
TEMPLE EMANU-EL OF PALM BEACH 190 N COUNTY ROAD PALM BEACH, FL 33480	NONE CHARITABLE	PUBLIC	7,675.
THE ASPEN INSTITUTE ONE DUPONT CIRCLE NW, SUITE 700 WASHINGTON, DC 20036	NONE CHARITABLE	PUBLIC	5,000.
THE SOCIETY OF THE FOUR ARTS 2 FOUR ARTS PLAZA PALM BEACH, FL 33480	NONE CHARITABLE	PUBLIC	11,200.
THE SOLOMON R GUGGENHEIM FOUNDATION 1071 FIFTH AVENUE NEW YORK, NY 10128	NONE CHARITABLE	PUBLIC	13,755.
TOWN OF PALM BEACH UNITED WAY, INC, 44 COCOANUT ROW, M201 PALM BEACH, FL 33480	NONE CHARITABLE	PUBLIC	90,000.
TRINITY SCHOOL 139 WEST 91ST NEW YORK, NY 10024	NONE CHARITABLE	PUBLIC	27,500.
THE HAMPTON SYNAGOGUE 154 SUNSET AVENUE WESTHAMPTON BEACH, NY 11978	NONE CHARITABLE	PUBLIC	500.
THE PALM BEACH POLICE FOUNDATION 139 N COUNTY ROAD, SUITE 20C PALM BEACH, FL 33480	NONE CHARITABLE	PUBLIC	2,500.

SIDNEY KOHL FAMILY FOUNDATION			65-6429919
LANGE FOUNDATION 2178 ROSCOMARE ROAD LOS ANGELES, CA 90077	NONE CHARITABLE	PUBLIC	1,000.
BRIGHAM AND WOMEN'S HOSPITAL 116 HUNTINGTON AVE, 5TH FL BOSTON, MA 02116		PUBLIC	2,000.
BRUCE & MARSHA MOSKOWITZ CHARITABLE FOUNDATION 225 LIST ROAD PALM BEACH, FL 33480	NONE CHARITABLE	PUBLIC	1,000.
LUBAVITZ WOMEN'S ORGANIZATION 400 EAST OHIO STREET, #402 CHICAGO, IL 60611	NONE CHARITABLE	PUBLIC	6,400.
MAIN LINE ANIMAL RESCUE P.O. BOX 89 CHESTER SPRINGS, PA 19425	NONE CHARITABLE	PUBLIC	500.
MAKE-A-WISH FOUNDATION OF SOUTHERN FLORIDA 4491 SOUTH STATE ROAD 7, SUITE 201 FORT LAUDERDALE, FL 33314	NONE CHARITABLE	PUBLIC	1,000.
THE METROPOLITAN OPERA GUILD LINCOLN CENTER NEW YORK, NY 10023	NONE CHARITABLE	PUBLIC	560.
OAKDALE FOUNDATION 16 OAK STREET GREAT BARRINGTON, MA 01230	NONE CHARITABLE	PUBLIC	1,000.
ONE FAMILY FUND 1029 TEANECK ROAD, SUITE 3B TEANECK, NJ 07666	NONE CHARITABLE	PUBLIC	1,000.
PALM BEACH FIREFIGHTER & PARAMEDIC EDUCATION FUND P.O. BOX 2130 PALM BEACH, FL 33480	NONE CHARITABLE	PUBLIC	500.

SIDNEY KOHL FAMILY FOUNDATION			65-6429919
PALM BEACH OPERA 415 SOUTH OLIVE AVENUE WEST PALM BEACH, FL 33401	NONE CHARITABLE	PUBLIC	1,000.
PALM BEACH SYNAGOGUE 120 NORTH COUNTY ROAD PALM BEACH, FL 33480	NONE CHARITABLE	PUBLIC	1,800.
PALM HEALTHCARE FOUNDATION, INC. 1016 NORTH DIXIE HIGHWAY WEST PALM BEACH, FL 33401		PUBLIC	500.
PROJECT HOPE 255 CARTER HALL LANE MILLWOOD, VA 22646	NONE CHARITABLE	PUBLIC	500.
US HOLOCAUST MEMORIAL MUSEUM 100 RAOUL WALLENBERG PLACE SW WASHINGTON, DC 20024	NONE CHARITABLE	PUBLIC	2,500.
VILLAGE SCHOOL 780 SWARTHMORE AVENUE PACIFIC PALISADES, CA 90272	NONE CHARITABLE	PUBLIC	10,000.
TOTAL TO FORM 990-PF, PART XV, LI	NE 3A		716,807.

SUPPLEMENTARY STATEMENTS

SIDNEY KOHL FAMILY FOUNDATION PALM BEACH, FLORIDA

EIN 65-6429919 YEAR ENDED 12/31/2010

STATEMENT

Federal Form 990-PF Part XIII, Line 4c

ELECTION STATEMENT ATTACHED TO AND MADE PART OF THE RETURN

Pursuant to IRC Sec. 4942(h)(2) and Reg. Sec. 53.4942(a)-3(d)(2), the above referenced foundation hereby elects to treat the 2010 qualifying distributions of \$720,368 in excess of the immediately preceding tax year's undistributed income as being made out of corpus

SUPPLEMENTARY STATEMENTS

SIDNEY KOHL FAMILY FOUNDATION PALM BEACH, FLORIDA

EIN 65-6429919 YEAR ENDED 12/31/2010

STATEMENT

Federal Form 990-PF Part VII-B, Line 5 (c)

STATEMENT OF EXPENDITURE RESPONSIBILITY

Pursuant to Treasury Regulation Section 53.4945-5(d)(2), the Sidney Kohl Family Foundation, a private foundation, is exercising expenditure responsibility for a donation made to Bruce and Lori Gendelman Family Foundation, a non-public charity in 2010.

The following information is submitted in accordance with Treas. Reg. Sec. 53.4945-5(d)(2):

(I) The name and address of the grantee: Bruce

Bruce and Lori Gendelman Family Foundation

Milwaukee, Wisconsin

(ii) The date and amount of the grant:

January 21, 2010 \$24,000

(iii) The purpose of the grant:

Detail available in taxpayer's files.

(iv) The amounts expended by the grantee:

Detail available in taxpayer's files.

- (v) Whether the grantee has diverted any portion of the funds from the purpose of the grant: No
- (vi) The dates of any reports from the grantee: Detail available in taxpayer's files.
- (vii) The date and results of any verification of the grantee's report undertaken pursuant to and to the extent under paragraph (c) (1) of this section by the grantor or by others at the direction of the grantor: N/A

Form 8868

(Rev January 2011) Department of the Treasury

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

File a separate application for each return.

OMB No. 1545-1709

Internal Revenue Service \triangleright X If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form). Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868. Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www irs.gov/efile and click on e-file for Charities & Nonprofits Automatic 3-Month Extension of Time. Only submit original (no copies needed). A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns Name of exempt organization Employer identification number print SIDNEY KOHL FAMILY FOUNDATION 65-6429919 File by the Number, street, and room or suite no. If a P.O. box, see instructions. due date fo filing your 340 ROYAL POINCIANA WAY, NO. 305 instructions City, town or post office, state, and ZIP code. For a foreign address, see instructions. PALM BEACH, FL 33480 0 6 Enter the Return code for the return that this application is for (file a separate application for each return) **Application** Return **Application** Return Is For Code Code Form 990 01 Form 990-T (corporation) 07 Form 990-BL 02 Form 1041-A Form 990-EZ Form 4720 03 09 Form 990-PF Form 5227 04 10 Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 6069 11 Form 990-T (trust other than above) Form 8870 06 12 SIDNEY A KOHL The books are in the care of > 340 ROYAL POINCIANA WAY #305 - PALM BEACH, FL 33480 Telephone No. ► 561 833-4211 FAX No > If the organization does not have an office or place of business in the United States, check this box if this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for. I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until AUGUST 15, 2011 , to file the exempt organization return for the organization named above. The extension is for the organization's return for: ► X calendar year 2010 or tax year beginning , and ending Initial return If the tax year entered in line 1 is for less than 12 months, check reason. Change in accounting period If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any 0. nonrefundable credits. See instructions. За If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

estimated tax payments made. Include any prior year overpayment allowed as a credit.

by using EFTPS (Electronic Federal Tax Payment System). See instructions.

Balance due, Subtract line 3b from line 3a, Include your payment with this form, if required,

3b

0.

Form 8868 (Rev. 1-2011)				Page 2
If you are filing for an Additional (Not Automatic) 3-Month Ext	tension, c	complete only Part II and check this bo	×	X
Note. Only complete Part II if you have already been granted an a	utomatic	3-month extension on a previously filed	Form 8868.	
If you are filing for an Automatic 3-Month Extension, complet				
Part II Additional (Not Automatic) 3-Month Ex	xtensio	n of Time. Only file the original (no co	opies needed).	
Name of exempt organization			Employer identification	number
orint SIDNEY KOHL FAMILY FOUNDATION			65-6429919	
Number, street, and room or suite no lf a P.O box, se		tions.		
due date for 340 ROYAL POINCIANA WAY, NO.			 	
etum See City, town or post office, state, and ZIP code For a for nstructions PALM BEACH, FL 33480	oreign add	ress, see instructions		
FAIM DEACH, FB 33400			- 	
Enter the Return code for the return that this application is for (file	e a separa	te application for each return)		0 4
Application	Return	Application		Return
s For	Code	Is For		Code
Form 990	01	A CONTRACTOR OF THE STATE OF TH		1
Form 990-BL	02	Form 1041-A		08
Form 990-EZ	03	Form 4720		09
Form 990-PF	04	Form 5227		10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069		11
Form 990-T (trust other than above) STOP! Do not complete Part II if you were not already granted	06	Form 8870		12
SIDNEY A KOHL The books are in the care of ► 340 ROYAL POING Telephone No ► 561 833-4211 If the organization does not have an office or place of business		FAX No. ▶	CH, FL 33480	
If this is for a Group Return, enter the organization's four digit (is is for the whole group.	check this
box ▶	٦.	ach a list with the names and EINs of all		
4 I request an additional 3-month extension of time until	NOVEM	BER 15, 2011		
5 For calendar year 2010, or other tax year beginning		, and ending		
6 If the tax year entered in line 5 is for less than 12 months, c	heck reas	on Initial return	Final retum	
Change in accounting period				
7 State in detail why you need the extension				
ADDITIONAL TIME IS NEEDED TO (OBTAI	N K-1 PASS THROUGH I	NFORMATION F	ROM
INVESTMENTS.				
8a If this application is for Form 990-BL, 990-PF, 990-T, 4720,	or 6069, e	enter the tentative tax, less any		04.4
nonrefundable credits. See instructions.			8a \$	914.
b If this application is for Form 990-PF, 990-T, 4720, or 6069,	-		Sx	
tax payments made. Include any pnor year overpayment all	lowed as	a credit and any amount paid		0
previously with Form 8868.			8b \$	0.
c Balance due. Subtract line 8b from line 8a. Include your pa		th this form, if required, by using		014
EFTPS (Electronic Federal Tax Payment System) See instru		- IV- iC i	8c \$	914.
Under penalties of perjury, I declare that I have examined this form, includ it is true, correct, and complete, and that I am authorized to prepare this form.	ling accom	nd Verification panying schedules and statements, and to th	e best of my knowledge and b	oelief,
, , , , , , , , , , , , , , , , , , , ,	TRUST	EE	Date >	
			Form 8868 (F	lev. 1-2011)