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DLN: 93491164000581

OMB No 1545-0052

Department of the Treasury

Internal Revenue Service

#### **Return of Private Foundation** or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation

**Not e.** The foundation may be able to use a copy of this return to satisfy state reporting requirements

2010

For	cale	ndar year 2010	, or tax y	year beginning 01	-01-2010 , an	d end	ding 12-31-	2010			
<b>G</b> C1	neck a	_	Initial retui	_	n of a former public cl		Final re	turn			
TH		Indation LEY AND ROBERTA BOGE			<u>.</u>		<b>A Employer ic</b> 94-3457573	lentification numbe	er		
		l street (or P O box num ETTI CO 1114 SIXTH AVE		not delivered to street addre	ss) Room/suite		(212) 302-330	umber (see page 10 o	of the instructions)		
		n, state, and ZIP code NY 10036					C If exemption application is pending, check here D 1. Foreign organizations, check here				
_		ype of organization i 4947(a)(1) nonexe		n 501(c)(3) exempt priv able trust Other tax		on		rganizations meeting re and attach comput			
of y	year <i>(1</i> e 16)	ket value of all asset from Part II, col. (c), \$ 1,003,260		Other (specify) (Part I, column (d) mus	Part I, column (d) must be on cash basis.)		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here				
Part I		total of amounts in c	olumns (b), (d	and Expenses (The c), and (d) may not column (a) (see page 11 of	(a) Revenue and expenses per books	(b) N	let investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)		
	1	Contributions, gifts, grai	nts, etc , rece	ived (attach schedule)	587,950						
	2	Check 🟲 🦵 if the foun	dation is <b>not</b>	required to attach Sch B							
	3	Interest on savings	and tempo	orary cash investments							
	4	Dividends and inter	est from se	ecurities	. 18,092		18,092				
	5a	Gross rents									
	ь	Net rental income o	r (loss)								
Revenue	6a	Net gain or (loss) fr	om sale of	assets not on line 10	-7,890						
	b	Gross sales price for all	assets on line	6a <u>595,086</u>							
	7	Capital gain net inc	ome (from l	Part IV , line 2)			0				
	8	Net short-term cap	ıtal gaın .								
	9	Income modificatio	ns								
	10a	Gross sales less returns	and allowance	es							
	b	Less Cost of goods	ssold								
	С	Gross profit or (loss	s) (attach s	chedule)							
	11	Other income (attac		e)							
	12	Total. Add lines 1 t					18,092		_		
	13	Compensation of of	· ·	,	0		0		0		
φ.	14	• •		vages							
ž	15			fits							
Expenses	16a	-	•		(SE)		500		2.440		
	Ь			iule)	3,610		500		3,110		
EVE	_ c	•	-	hschedule)							
trai	17			4 - 6 - 4 - 4 - 4 - 4 - 4 - 4 - 4 - 4 -	4 000		0		0		
Š	18	Taxes (attach schedule)	, , ,	•	4,823		U				
and Administrative	19	Depreciation (attac									
Ā	20	Occupancy									
пd	21	•	•	ings							
	22						0		0		
Ë	23				100						
Operating	24	Add lines 13 through		ative expenses.	8,533		500		3,110		
å	25	-			·		300		181,500		
	25				190,033		500		184,610		
	26	Total expenses and d		ts. Add lines 24 and 25	190,033				104,010		
	27	Subtract line 26 fro		ses and disbursements	408,119						
	a b	Net investment inco			100,119		17,592				
	-			ve, enter - 0 - )			11,552				
	С	Aujusteu net mcom	· vii negati	vo, circa -0-)	'1						

) a	rt II	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year			d of ye	
			(a) Book Value 244,054	(b) Book	: Value 67,5		:) Fair Market Value
	1	Cash—non-interest-bearing	244,034		67,3	49	67,549
	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 (attach schedule) (see page 15 of the					
	_	instructions)				-	
	7	Other notes and loans receivable (attach schedule)					
اہ		Less allowance for doubtful accounts 🟲					
Á	8	Inventories for sale or use					
<u> </u>	9	Prepaid expenses and deferred charges					
	10a	Investments—U S and state government obligations (attach schedule)	0	<b>%</b>	222,1	29	222,333
	b	Investments—corporate stock (attach schedule)	238,389	<b>%</b>	560,1	84	631,010
	c	Investments—corporate bonds (attach schedule)	41,600	<b>%</b>	82,3	00	82,368
	11	Investments—land, buildings, and equipment basis 🕨					
		Less accumulated depreciation (attach schedule)					
	12	Investments—mortgage loans					
	13	Investments—other (attach schedule)					
	14	Land, buildings, and equipment basis 🟲					
		Less accumulated depreciation (attach schedule)					
	15	Other assets (describe 🟲)					
	16	Total assets (to be completed by all filers—see the					_
		ınstructions Also, see page 1, item I)	524,043		932,1	62	1,003,260
	17	Accounts payable and accrued expenses					
	18	Grants payable					
ួ	19	Deferred revenue					
[ [	20	Loans from officers, directors, trustees, and other disqualified persons					
5	21	Mortgages and other notes payable (attach schedule)					
╸╽	22	Other liabilities (describe)					
			_				
	23	Total liabilities (add lines 17 through 22)	0			0	
		Foundations that follow SFAS 117, check here					
ا بر		and complete lines 24 through 26 and lines 30 and 31.					
or Fund Balances	24	Unrestricted				_	
<u> </u>	25	Temporarily restricted				_	
<u> </u>	26	Permanently restricted				_	
ĭ		Foundations that do not follow SFAS 117, check here					
디		and complete lines 27 through 31.	0				
	27	Capital stock, trust principal, or current funds	0			0	
ASSets	28	Paid-in or capital surplus, or land, bldg, and equipment fund			022.1	63	
ادِ	29	Retained earnings, accumulated income, endowment, or other funds	524,043		932,1	62	
	30	Total net assets or fund balances (see page 17 of the	F24 042		022.1	63	
뒬		instructions)	524,043		932,1	62	
	31	Total liabilities and net assets/fund balances (see page 17 of	F24.042		022.1	63	
		the instructions)	524,043		932,1	62	
Pa	rt II	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 a	gree			
				=	1		524,043
2		Enter amount from Part I, line 27a			2		408,119
3		Other increases not included in line 2 (itemize)			3		0
1		Add lines 1, 2, and 3			4		932,162
5		Decreases not included in line 2 (itemize) 🟲			5		0
5		Total net assets or fund balances at end of year (line 4 minus line 5)—P	art II, column (b), l	ine 30	6		932,162

	• •	kind(s) of property sold (e g , re. , or common stock, 200 shs M	,	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	<b>(d)</b> Date sold (mo , day, yr )	
1 a	5,000 SH BANK OF AME	RICA CORP		D	2010-03-15	2010-03-12	
b	1,000 SH NOKIA CORPO	) RATIO N		D	2010-04-08	2010-09-10	
С	20,000 SH CBS CORPOR	RATION - REDEMPTION		D	2010-10-26	2010-11-08	
d							
e							
(e	e) Gross sales price	(f) Depreciation allowed (or allowable)		t or other basis spense of sale	(e) plus (f	or (loss) ) mınus (g)	
а	84,9			84,95		-14	
b	10,1			15,02		-4,876	
С	500,0	00		503,00	0	-3,000	
d							
e							
	mplete only for assets show	(j) Adjusted basis as of 12/31/69	(k) Exc	n on 12/31/69 cess of col (ı) col (j), ıf any	(1) Gains (Col (h) gain mi col (k), but not less than -0 Losses (from col (h))		
а						-14	
b						-4,876	
с						-3,000	
d							
e					<u> </u>		
2	Capital gain net income o		If gain, also enter If (loss), enter -0-		2	-7,890	
3	Net short-term capital ga	in or (loss) as defined in section	ns 1222(5) and (6	,		.,	
	If gain, also enter in Part If (loss), enter -0- in Part	I, line 8, column (c) (see pages I, line 8			}     3		
Part	V Oualification Und	er Section 4940(e) for R	educed Tax or	Net Investme	nt Income		
Was the If "Yes,	" the foundation does not qu	e this part blank ction 4942 tax on the distributa alify under section 4940(e) Do n each column for each year, se	not complete this	part		Γ Yes <b>Γ</b> No	
	(a)				(d)		
	named waars Calandar	<b>(b)</b> Adjusted qualifying distributions	(c) Net value of noncha		Distribution ratio (col (b) divided by col (c))		
	2009	7,847		354,861		0 022113	
	2008	0		17,546		0 0	
	2007						
	2005						
		-					
2	Total of line 1 column (d)				2	0 022113	
3		for the 5-year base period—div		<del></del>	-	0 02211.	
		oundation has been in existence			3	0 01105	
4	Enter the net value of non	charitable-use assets for 2010	from Part X, line 5	5	4	643,78	
5	Multiply line 4 by line 3.	<b>5</b> Multiply line 4 by line 3					
	<b>6</b> Enter 1% of net investment income (1% of Part I, line 27b)					7,11:	
6	Enter 1% of net investme	nt income (1% of Part I, line 27	'b)		6	·	
6 7	Enter 1% of net investme	nt income (1% of Part I, line 27	'b)		7	7,118 176 7,294	
	Add lines 5 and 6	nt income (1% of Part I, line 27				170	

	990-PF (2010) <b>t VI</b> Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of th	 ie instr	uctio		age <b>4</b>
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1				
	Date of ruling or determination letter (attach copy of letter if necessary-see				
ь	instructions)  Domestic foundations that meet the section 4940(e) requirements in Part V, check				176
ь	here F and enter 1% of Part I, line 27b				
c	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)				0
3	Add lines 1 and 2				176
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)				
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0				 176
6	C redits/Payments				
а	2010 estimated tax payments and 2009 overpayment credited to 2010   6a   2,840				
ь	Exempt foreign organizations—tax withheld at source 6b				
c	Tax paid with application for extension of time to file (Form 8868)  6c 1,500				
d	Backup withholding erroneously withheld 6d				
7	Total credits and payments Add lines 6a through 6d				4,340
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here if Form 2220 is attached.				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed				
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid • 10				4,164
11	Enter the amount of line 10 to be <b>Credited to 2011 estimated tax</b> • 4,164 <b>Ref unded</b> • 11				0
Par	t VII-A Statements Regarding Activities				
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did			Yes	No
	ıt participate or intervene in any political campaign?		1a		No
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 of				
	the instructions for definition)?		1b		No
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials				
	published or distributed by the foundation in connection with the activities.				
C	Did the foundation file Form 1120-POL for this year?	.	<b>1</b> c		No
d	Enter the amount (If any) of tax on political expenditures (section 4955) imposed during the year				
	(1) On the foundation $\blacktriangleright$ \$ 0 (2) On foundation managers $\blacktriangleright$ \$ 0				
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed				
	on foundation managers 🕨 \$0				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	• 1	2		No
_	If "Yes," attach a detailed description of the activities.				
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles		_		
_	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	• +	3		No
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	•  -	4a		No
b	If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?		4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	· 1	5		No
_	If "Yes," attach the statement required by General Instruction T.				
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either  • By language in the governing instrument, or				
	By state legislation that effectively amends the governing instrument so that no mandatory directions				
	that conflict with the state law remain in the governing instrument?		6		No
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV		7	Yes	
, 8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the	 	-		
	Instructions) ►NY				
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney	_			
	General (or designate) of each state as required by General Instruction G? If "No," attach explanation .		8b	Yes	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3)				
	or 4942(j)(5) for calendar year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV on				
	page 27)? If "Yes," complete Part XIV		9		No
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		10	Yes	

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 page 20 of the instructions)	11		No
4.5				
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?  Website address ►N/A	13	Yes	<u> </u>
14	The books are in care of ►TAXPAYER Telephone no ►(212)	302-	3300	
	Located at ►GRAF REPETTI CO 1114 SIXTH AVENUE NEW YORK NY ZIP+4 ►10036			
15				<u> </u>
13	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2010, did the foundation have an interest in or a signature or other authority over			
	a bank, securities, or other financial account in a foreign country?	16		No
	See page 20 of the instructions for exceptions and filing requirements for Form TD F 90-22 1 If "Yes", enter the		•	
Da	name of the foreign country   Tt VIII-B Statements Regarding Activities for Which Form 4720 May Be Required			
ı c	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
			163	140
Ia	During the year did the foundation (either directly or indirectly)  (1) Engage in the sale or exchange, or leasing of property with a disqualified person?  Yes V No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?  Yes V No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes V 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)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	if the foundation agreed to make a grant to or to employ the official for a period			
	after termination of government service, if terminating within 90 days ) Yes V No			
Ь	If any answer is "Yes" to 1a(1)-(6), did <b>any</b> 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 20 of the instructions)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here			
С	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		No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
а	At the end of tax year 2010, did the foundation have any undistributed income (lines 6d			
	and 6e, Part XIII) for tax year(s) beginning before 2010?			
	If "Yes," list the years 🕨 20, 20, 20			
Ь	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)			
	to <b>all</b> years listed, answer "No" and attach statement—see page 20 of the instructions )	2b		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	▶ 20, 20, 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business			
	enterprise at any time during the year?			
b	If "Yes," did it have excess business holdings in 2010 as a result of (1) any purchase by the foundation			
	or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved			
	by the Commissioner under section $4943(c)(7)$ ) to dispose of holdings acquired by gift or bequest, or (3)			
	the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine			
	ıf the foundation had excess business holdings in 2010.)	3Ь		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			
	charitable numbers that had not been removed from jeopardy before the first day of the tay year beginning in 20102	1 4b	1	l Na

5a	During the year did the foundatio	n pay	or incur any amoun	t to								
	(1) Carry on propaganda, or othe	rwise	attempt to influence	e leg	ıslatıon (section 49	45(e	))?	│ Yes │	✓ No			
	(2) Influence the outcome of any	spec	ıfıc publıc electıon (	see	section 4955), or to	car	ry					
	on, directly or indirectly, any	vote	registration drive?.					☐ Yes ☐	✓ No			
	(3) Provide a grant to an individu	al for	travel, study, or oth	ers	ımılar purposes?			│ Yes │	✓ No			
	(4) Provide a grant to an organiz			-	· -							
	ın section 509(a)(1), (2), or (	(3), o	r section 4940(d)(2	)? (s	ee page 22 of the in	stru	ctions)	│ Yes │	✓ No			
	(5) Provide for any purpose other								_			
	educational purposes, or for t											
b	If any answer is "Yes" to 5a(1)-(											
	Regulations section 53 4945 or								_	5b		
	Organizations relying on a currer		-									
С	· ·	•	••	does the foundation claim exemption from the								
	tax because it maintained expenditure responsibility for the grant?											
_	If "Yes," attach the statement requ											
6a	Did the foundation, during the year							<b>-</b> , ,	<del>.</del>			
	premiums on a personal benefit o									6.	NI-	
Ь	Did the foundation, during the year	ar, pa	y premiums, directly	ori	ndirectly, on a perso	naı	benefit contrac	t/	•	6b	No	
7-	If "Yes" to 6b, file Form 8870.							┌ Yes 「				
7а ь	At any time during the tax year, w							,		7b		
ь	If yes, did the foundation receive  Information Abou										lovees	
Pai	and Contractors	·	ilcers, Directors	,	ustees, Founda	ıtıoı	ii Mailageis	, iligiliy	raiu	ш	noyees,	
1	List all officers, directors, trustee	s, fo	ındat ion managers a	nd t	heir compensation (	see p	page 22 of the	inst ruct io	ns).			
		(b)	Title, and average		c) Compensation	1	(d) Contribution		(e) E	Expens	e account,	
	(a) Name and address	de	hours per week evoted to position	(:	If not paid, enter -0-)	1	mployee benefi I deferred comp	•	l ot		owances	
STAN	LEY BOGEN		JSTEE AS NEEDED		0			0			0	
GRA	F REPETTI CO 1114 AVE OF	0 00	o									
THE												
	RICAS YYORK,NY 10036											
	RTA BOGEN	TRU	STEE AS NEEDED		0		0			0		
GRA	F REPETTI CO 1114 AVE OF	0 00					·					
THE												
	RICAS YYORK,NY 10036											
	Compensation of five highest-paid	l emr	olovees (ot her t han t	hos	e included on line 1–	-see	page 23 of the	instruction	ons).			
	If none, enter "NONE."								,.			
, ,			(b) Title, and aver	age			(d) Contribu		, , ,	_		
(a)	Name and address of each emplo paid more than \$50,000	yee	hours per week		(c) Compensation	n	employee I				se account, owances	
	pana		devoted to positi	on			compens					
NON	Е											
				_			<u> </u>		$\perp$			
Tota	I number of other employees hald	ovor 9	± 5.0.000		•			- I				

Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)  3. Five highest-paid independent contractors for professional services (see page 23 of the instructions). If none, enter "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.     O	Form 990-PF (2010)		Page <b>7</b>
(c) Compensation  NONE  Total number of others receiving over \$50,000 for professional services.   Total number of others receiving over \$50,000 for professional services.   Total number of others receiving over \$50,000 for professional services.   Total number of others receiving over \$50,000 for professional services.   Total number of others receiving over \$50,000 for professional services.   Total number of others receiving over \$50,000 for professional services.   Total number of others receiving over \$50,000 for professional services.   Total number of others receiving over \$50,000 for professional services.   Total number of others receiving over \$50,000 for professional services.   Total number of others receiving over \$50,000 for professional services.   Total number of others receiving over \$50,000 for professional services.   Total number of others receiving over \$50,000 for professional services.   Total number of others receiving over \$50,000 for professional services.   Total number of others receiving over \$50,000 for professional services.   Total number of others receiving over \$50,000 for professional services.   Total number of others receiving over \$50,000 for professional services.   Total number of others receiving over \$50,000 for professional services.   Total number of others receiving over \$50,000 for professional services.   Total number of others receiving over \$50,000 for professional services.   Total number of others receiving over \$50,000 for professional services.   Total number of others receiving over \$50,000 for professional services.   Total number of others receiving over \$50,000 for professional services.   Total number of others receiving over \$50,000 for professional services.   Total number of others receiving over \$50,000 for professional services.   Total number of others receiving over \$50,000 for professional services.   Total number of others receiving over \$50,000 for professional services.   Total number of others receiving over \$50,000 for professional services.		rustees, Foundation Managers, Highly	Paid Employees,
Total number of others receiving over \$50,000 for professional services.     Description   Descripti	3 Five highest-paid independent contractors for professional serv	vices (see page 23 of the instructions). If none, e	:nter "NONE".
Total number of others receiving over \$50,000 for professional services.  Del the foundation's four largest direct charitable Activities  List the foundation's four largest direct charitable activities during the lax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.  1  2  3  4  Part IX-B Summary of Program-Related Investments (see page 24 of the instructions)  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  Amount  1  Amount  Total. Add lines 1 through 3.	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
Dart IX-B Summary of Direct Charitable Activities  List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficianes served, conferences convened, research papers produced, etc.  1 2 3 3 4 4 Part IX-B Summary of Program-Related Investments (see page 24 of the instructions)  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  A mount  1 A mount	NONE		
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Expenses  Lest the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficianes served, conferences convened, research papers produced, etc.  1 2 3 3 4 4 Part IX-B Summary of Program-Related Investments (see page 24 of the instructions)  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  All other program-related investments. See page 24 of the instructions  Total. Add lines 1 through 3.	Total number of others receiving over \$50,000 for professional serv	rices	. 0
List the foundation's four largest direct chantable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficianes served, conferences convened, research papers produced, etc.  1 2 3 3 4 4 Part IX-B Summary of Program-Related Investments (see page 24 of the instructions)  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  All other program-related investments. See page 24 of the instructions.			
Total. Add lines 1 through 3	Summary of Direct Charitable Activities		
2  Part IX-B Summary of Program-Related Investments (see page 24 of the instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  All other program-related investments See page 24 of the instructions  3  Total. Add lines 1 through 3.   • 0	List the foundation's four largest direct charitable activities during the tax year. Including any other handle activities during the tax year. Including any other handle activities during the tax year.	ude relevant statistical information such as the number of	Expenses
Part IX-B Summary of Program-Related Investments (see page 24 of the instructions)  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  All other program-related investments See page 24 of the instructions  Total. Add lines 1 through 3.		15 produced, etc	
Part IX-B Summary of Program-Related Investments (see page 24 of the instructions)  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  All other program-related investments See page 24 of the instructions  Total. Add lines 1 through 3.	-		•
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Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  A mount  All other program-related investments See page 24 of the instructions  Total. Add lines 1 through 3	<u></u>		•
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  A mount  All other program-related investments See page 24 of the instructions  Total. Add lines 1 through 3			•
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All other program-related investments See page 24 of the instructions  Total. Add lines 1 through 3			A mount
All other program-related investments See page 24 of the instructions  Total. Add lines 1 through 3		9 , ,	- Timount
All other program-related investments See page 24 of the instructions  Total. Add lines 1 through 3			•
All other program-related investments See page 24 of the instructions  Total. Add lines 1 through 3			-
All other program-related investments See page 24 of the instructions  Total. Add lines 1 through 3	2		
3	•		-
3			•
3	All other program-related investments. See page 24 of the instru	ctions	
Total. Add lines 1 through 3		ctions	
Total Add Illies I tillough 5	<u> </u>		1
Total Add Illies I tillough 5			1
Total Add Illies I tillough 5		_ 1	
	Iotal. Add lines 1 through 3		

Form	990-PF (2010)		Page <b>8</b>
Pa	<b>Minimum Investment Return</b> (All domestic foundations must complete this part. For see page 24 of the instructions.)	reign	foundations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc ,		
	purposes		
а	A verage monthly fair market value of securities	1a	519,828
b	A verage of monthly cash balances	1b	133,760
c	Fair market value of all other assets (see page 24 of the instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	653,588
e	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	653,588
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see page 25		
	of the instructions)	4	9,804
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	643,784
6	Minimum investment return. Enter 5% of line 5	6	32,189
Dat	<b>Distributable Amount</b> (see page 25 of the instructions) (Section 4942(j)(3) and (j)(		
FC	foundations and certain foreign organizations check here 🕨 🗀 and do not complete t	his pa	art.)
1	Minimum investment return from Part X, line 6	1	32,189
2a	Tax on investment income for 2010 from Part VI, line 5 2a 176		
b	Income tax for 2010 (This does not include the tax from Part VI) 2b		
c	Add lines 2a and 2b	2c	176
3	Distributable amount before adjustments Subtract line 2c from line 1	3	32,013
4	Recoveries of amounts treated as qualifying distributions	4	0
5	Add lines 3 and 4	5	32,013
6	Deduction from distributable amount (see page 25 of the instructions)	6	0
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1	7	32,013
Par	t XII Qualifying Distributions (see page 25 of the instructions)	•	
1	A mounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	184,610
b	Program-related investments—total from Part IX-B	1b	0
2	A mounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc ,		
	purposes	2	
3	A mounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
ь	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	184,610
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 (see page 26 of the instructions).	5	176
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	184,434
-	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the section 4940(e) reduction of tax in those years		· ·

L	ondistributed income (see page	26 of the instructi	ions)		
		<b>(a)</b> Corpus	(b) Years prior to 2009	<b>(c)</b> 2009	<b>(d)</b> 2010
1	Distributable amount for 2010 from Part XI, line 7				32,013
2	Undistributed income, if any, as of the end of 2010				
	Enter amount for 2009 only			4,381	
	Total for prior years 20, 20, 20		0		
	Excess distributions carryover, if any, to 2010				
	From 2005				
	From 2006				
	From 2007				
	From 2008				
	From 2009				
f	Total of lines 3a through e	0			
	Qualifying distributions for 2010 from Part				
	XII, line 4 🕨 \$ 184,610				
а	Applied to 2009, but not more than line 2a			4,381	
	Applied to undistributed income of prior years				
	(Election required—see page 26 of the instructions)		0		
c	Treated as distributions out of corpus (Election				
	required—see page 26 of the instructions)	0			
d	Applied to 2010 distributable amount				32,013
е	Remaining amount distributed out of corpus	148,216			
5	Excess distributions carryover applied to 2010	0			0
	(If an amount appears ın column (d), the same amount must be shown ın column (a).)				
6	Enter the net total of each column as				
_	indicated below:	148,216			
	Corpus Add lines 3f, 4c, and 4e Subtract line 5	140,210			
b	Prior years' undistributed income Subtract line 4b from line 2b		0		
C	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a) tax has been previously assessed		0		
d	Subtract line 6c from line 6b Taxable				
_	amount—see page 27 of the instructions		0		
е	Undistributed income for 2009 Subtract line				
	4a from line 2a Taxable amount—see page 27			0	
	of the instructions				
T	Undistributed income for 2010 Subtract lines 4d and 5 from line 1 This amount must				
	be distributed in 2011				0
7	A mounts treated as distributions out of				
	corpus to satisfy requirements imposed by				
	section 170(b)(1)(F) or 4942(g)(3) (see page 27	0			
	of the instructions)				
8	Excess distributions carryover from 2005 not				
	applied on line 5 or line 7 (see page 27 of the instructions)	0			
9	Excess distributions carryover to 2011.				_
_	Subtract lines 7 and 8 from line 6a	148,216			
10	Analysis of line 9				
а	Excess from 2006				
b	Excess from 2007				
c	Excess from 2008				
d	Excess from 2009				
е	Excess from 2010 148,216				

1a	If the foundation has received a ruling or d foundation, and the ruling is effective for 2		•	•		
b	Check box to indicate whether the organiz	ation is a private o	perating foundation	n described in secti	on <b>「</b> 4942(j)(3) o	or <b>—</b> 4942(j)(5)
2a	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year (a) 2010	<b>(b)</b> 2009	Prior 3 years (c) 2008	(d) 2007	(e) Total
	Investment return from Part X for each year listed					
	85% of line 2a					
	Qualifying distributions from Part XII, line 4 for each year listed					
	Amounts included in line 2c not used directly for active conduct of exempt activities					
е	Q ualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the alternative test relied upon					
а	"Assets" alternative test—enter					
	<ul><li>(1) Value of all assets</li><li>(2) Value of assets qualifying under section 4942(j)(3)(B)(i)</li></ul>					
b	"Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c	"Support" alternative test—enter		1	1		
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
	(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(III)					
	(3) Largest amount of support from an exempt organization					
	(4) Gross investment income					
Pa	rt XV Supplementary Information assets at any time during				on had \$5,000	or more in
1	Information Regarding Foundation Manage	ers:				
а	List any managers of the foundation who habefore the close of any tax year (but only i					dation
b	List any managers of the foundation who or ownership of a partnership or other entity)		•		lly large portion of t	he
2	Information Regarding Contribution, Gran	t, Gift, Loan, Scho	larship, etc., Progra	ıms:		
	Check here F if the foundation only ma unsolicited requests for funds. If the found under other conditions, complete items 2 a	atıon makes gıfts,	to preselected char grants, etc (see p	ritable organizations age 28 of the instru	s and does not acce actions) to individual	pt Is or organizations
а	The name, address, and telephone numbe	r of the person to v	whom applications s	should be addressed	d	
b	The form in which applications should be s	submitted and info	rmation and materi	als they should incl	ude	
c	Any submission deadlines					
d	Any restrictions or limitations on awards, factors	such as by geogra	aphical areas, chari	table fields, kinds o	f institutions, or oth	er

3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to status of A mount any foundation manager contribution recipient Name and address (home or business) or substantial contributor a Paid during the year See Additional Data Table 181,500 **b** Approved for future payment

	-PF (2010) <b>I-A</b> Analysis of Income-Produc	ing Activitio				Page <b>1</b> 2
	ss amounts unless otherwise indicated		siness income	Excluded by section	ı 512, 513, or 514	(e)
	m service revenue	(a) Business code	( <b>b)</b> A mount	(c) Exclusion code	( <b>d</b> ) A mount	Related or exemption function income (See page 28 of the instructions.)
a	s and contracts from government agencies tership dues and assessments			14	18,092 -7,890	the instructions )
d e 12 Subto 13 Total. (See	tal Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions on page 2  T-B Relationship of Activities to  Explain below how each activity for whith accomplishment of the organization page 28 of the instructions )	28 to verify calc the Accom ich income is re	ulations) <b>plishment of E</b> ported in column(	Exempt Purpos  (e) of Part XVI-A co	<b>es</b> ontributed importa	10,202 ntly to

Form 9	90-PF (2	2010)							Pa	ge <b>13</b>
Part	XVII	Information Re Noncharitable		Transfers To and Tr organizations	ansac	tions and Relation	ships With			
<b>1</b> Did	the organi	zation directly or indirectly	y engage in any	of the following with any other	r organız	ation described in section			Yes	No
501	(c) of the	Code (other than section	501(c)(3) orgai	nizations) or in section 527, rela	ating to p	oolitical organizations?				
<b>a</b> Tra	nsfers fr	om the reporting four	ndation to a r	oncharitable exempt orga	anızatıc	on of				
(1)	Cash.							1a(1)		No
(2)	Othera	issets						1a(2)		No
<b>b</b> Oth	ner trans	actions								
(1)	Sales	fassets to a noncha	rıtable exem	pt organization				1b(1)		No
(2)	Purcha	ses of assets from a	noncharitabl	e exempt organization.				1b(2)		No
(3)	(3) Rental of facilities, equipment, or other assets									No
(4)	Reımbu	ırsement arrangemer	nts					1b(4)		No
								1b(5)		No
		_		r fundraising solicitations				1b(6)		No
				other assets, or paid em				<u> </u>		No
	•	, ,		mplete the following sche						
	iny trans		angement, sh	by the reporting foundation ow in column (d) the value on the value on the repeated or the column (d) the value of the val	ue of th		r services receive	ed		nts
(d) Line	110	(b) Amount involved	(c) Name or	ionenantable exempt organizat	CIOTI	(a) Description of durisiers,	transactions, and she	aring arra	rigerrier	11.5
des	cribed ir	•	ne Code (otho schedule	ed with, or related to, one er than section 501(c)(3)	)) or in s	section 527?			ıs F	, No
	Under	penalties of perjury,	I declare tha	at I have examined this re	eturn, ır	ncluding accompanying s	schedules and sta	tement	s, and	to
	based			s true, correct, and comp er has any knowledge	lete De	eclaration of preparer (o	ther than taxpaye	r or fıdu	cıary)	IS
	) <u></u>	nature of officer or t	rustee			Date	Title			
	<u> </u>	I				Date	1	TPTIN		
₽						Date	Check if self-	FILM		
Sign Here	ا س ـِ	Preparer's DAV Signature	ID S SUNSH	INE			employed •			
ß	Paid Preparer's Use Only	Firm's name		GRAF REPETTI & CO L	LP.	ı	Fırm's EIN ►	1		
	Se P			1114 AVENUE OF THE	AMER	RICAS	_			
		Firm's address 🕨		NEWYORK, NY 10036	5		Phone no (212	2) 302-3300		
	1	i					I			

Schedule of Contributors —		OMB No 1545-0047	
(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service	0-PF) ► Attach to Form 990, 990-EZ, or 990-PF. 20		2010
Name of organization THE STANLEY AND ROBERTA	BOGEN CHARITABLE	Employer id	entification number
Organization type (che	ack one)	l 94-345757	'3
Organization type (one	eck one)		
Filers of:	Section:		
Form 990 or 990-EZ	501(c)( ) (enter number) organization		
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private f	oundation	
	☐ 527 political organization		
Form 990-PF	501(c)(3) exempt private foundation		
	4947(a)(1) nonexempt charitable trust treated as a private found	dation	
	501(c)(3) taxable private foundation		
	ion filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 ny one contributor. Complete Parts I and II	0 or more (in money or	
under sections 5 greater of (1) \$5  For a section 50 during the year, a scientific, literary	1(c)(3) organization filing Form 990 or 990-EZ, that met the 33 <sup>1</sup> /3% support (509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during (5,000 or <b>(2)</b> 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 91(c)(7), (8), or (10) organization filing Form 990, or 990-EZ, that received from aggregate contributions of more than \$1,000 for use exclusively for religiously, or educational purposes, or the prevention of cruelty to children or animal	ng the year, a contribut 190-EZ, line 1 Complete com any one contributor us, charitable,	e Parts I and II
during the year, of not aggregate to the year for an eapplies to this ordering the year.	1(c)(7), (8), or (10) organization filing Form 990, or 990-EZ, that received fr contributions for use <i>exclusively</i> for religious, charitable, etc., purposes, but more than \$1,000 if this box is checked, enter here the total contributions to exclusively religious, charitable, etc., purpose. Do not complete any of the pagnization because it received nonexclusively religious, charitable, etc., color	ut these contributions of that were received dur arts unless the <b>Gener</b> ntributions of \$5,000 or	did ing <b>al Rule</b> more

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93491164000581

Name of organization
THE STANLEY AND ROBERTA BOGEN CHARITABLE
FOUNDATION

Employer identification number

94-3457573

Part I	Contributors (see Instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
_1_	STANLEY AND ROBERTA BOGEN 956 FIFTH AVENUE  NEW YORK, NY 10075	\$ \$ 	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
_2_	STANLEY AND ROBERTA BOGEN 956 FIFTH AVENUE  NEW YORK, NY 10075	\$\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
_		\$	Person   Payroll   Noncash   Payroll   Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II if there is a noncash contribution )
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
_		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution )
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
_		\$	Person F Payroll F Noncash F  (Complete Part II if there is a noncash contribution)

Name of organization THE STANLEY AND ROBERTA BOGEN CHARITABLE FOUNDATION Employer identification number

94-3457573

Part II	Noncash Property (see Instructions)		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_1_	5000 SHS - BANK OF AMERICA	\$84,950	2010-03-12
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_2_	20000 CBS CORP AT 7 25% DUE 6-30-51	\$503,000	2010-10-25
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

STANLE	rganization Y AND ROBERTA BOGEN CHARITABLE					imployer identification number
UNDATION art III						4-3457573
art III	Exclusively religious, charitable, etc., aggregating more than \$1,000 for the For organizations completing Part III, enter to contributions of \$1,000 or less for the year.	<b>year.</b> (Compl the total of <i>ex</i>	lete c	olumns <b>(a)</b> through <i>vely</i> religious, chari	(e) and table, etc	the follow ing line entry) ; ,
(a) No. from Part I	(b) Purpose of gift		U	(c) se of gift		(d) Description of how gift is held
					-	
_				(e)		
_	Transferee's name, address, an	ıd ZIP + 4	Tr	ansfer of gift Relat	ionship	of transferor to transferee
(a) No. from Part I	(b) Purpose of gift		U	(c) se of gift		(d) Description of how gift is held
					-	
			т.,	(e) ansfer of gift		
-	Transferee's name, address, an	ıd ZIP + 4		_	ionship	of transferor to transferee
a) No. from Part I	(b) Purpose of gift		U	(c) se of gift		(d) Description of how gift is held
					-	
			Tr	(e) ansfer of gift		
	Transferee's name, address, an	id ZIP + 4			ionship	of transferor to transferee
(a) No. from Part I	(b) Purpose of gift		U	(c) se of gift		(d) Description of how gift is held
_					-	
			Tr	(e) ansfer of gift		
	Transferee's name, address, an	d ZIP + 4	···	_	ionship	of transferor to transferee

# Software ID: Software Version:

**EIN:** 94-3457573

Name: THE STANLEY AND ROBERTA BOGEN CHARITABLE

**FOUNDATION** 

Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	A mount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
SALK INSTITUTE PO BOX 85800 SAN DIEGO,CA 92186	NONE	PUBLIC CHARITY	GENERAL SUPPORT	12,800
TEMPLE ISRAEL 112 EAST 75TH ST NEW YORK,NY 10021	NONE	PUBLIC CHARITY	GENERAL SUPPORT	2,400
ALBERT EINSTEIN SCHOOL OF MEDICINE 1300 MORRIS PARK BRONX,NY 10461	NONE	PUBLIC CHARITY	GENERAL SUPPORT	500
AMERICAN FRIENDS OF MAGEN DAVID ADOM 352 SEVENTH AVE NEW YORK,NY 10001	NONE	PUBLIC CHARITY	GENERAL SUPPORT	2,500
AMERICAN FRIENDS OF THE ISRAEL MUSEUM 500 FIFTH AVE NEW YORK,NY 10110	NONE	PUBLIC CHARITY	GENERAL SUPPORT	9,800
AMERICAN FRIENDS OF THE HEBREW UNIVERSITY ONE BATTERY PARK PLAZA NEW YORK,NY 10004	NONE	PUBLIC CHARITY	GENERAL SUPPORT	24,250
AMERICAN FRIENDS OF THE ISRAEL PHILHARMONIC ORCHESTRA 122 EAST 42ND NEW YORK, NY 10168	NONE	PUBLIC CHARITY	GENERAL SUPPORT	5,000
AMERICAN ISRAEL CULTURAL FOUNDATION 1140 BROADWAY NEW YORK,NY 10001	NONE	PUBLIC CHARITY	GENERAL SUPPORT	2,500
AMERICAN JEWISH COMMITTEE NY REGIONAL OFFICE NEW YORK,NY 10001	NONE	PUBLIC CHARITY	GENERAL SUPPORT	1,000
ANDREW GOLKIN MEMORIAL SCHOLARSHIP FUND 55 EXCHANGE PLACE NEW YORK,NY 10005	NONE	PUBLIC CHARITY	GENERAL SUPPORT	500
ANTI-DEFAMATION LEAGUE 605 THIRD AVE NEW YORK,NY 10158	NONE	PUBLIC CHARITY	GENERAL SUPPORT	1,500
ARTHUR I MEYER JEWISH ACADEMY 3261 MILITARY TRAIL WEST PALM BEACH, FL 33409	NONE	PUBLIC CHARITY	GENERAL SUPPORT	1,000
BIRCH WATHEN LENOX SCHOOL 210 E 77TH ST NEW YORK,NY 10075	NONE	PUBLIC CHARITY	GENERAL SUPPORT	900
BREAST CANCER RESEARCH FOUNDATION 60 E 56TH ST NEW YORK, NY 10022	NONE	PUBLIC CHARITY	GENERAL SUPPORT	1,600
BRIGHAM & WOMENS HOSPITAL 75 FRANCIS ST BOSTON,MA 02115	NONE	PUBLIC CHARITY	GENERAL SUPPORT	500
Total				181,500

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
CENTER FOR CREATIVE EDUCATION 435 25TH ST WEST PALM BEACH, FL 33407	NONE	PUBLIC CHARITY	GENERAL SUPPORT	500
CITIZENS' COMMITTEE FOR CHILDREN OF NY 105 E 22ND ST NEW YORK, NY 10010	NONE	PUBLIC CHARITY	GENERAL SUPPORT	500
DIDI HIRSCH MENTAL HEALTH 4760 S SEPULVEDA BLVD CULVER CITY, CA 90230	NONE	PUBLIC CHARITY	GENERAL SUPPORT	7,000
DYSAUTONOMIA FOUNDATION 315 W 39TH ST NEW YORK,NY 10018	NONE	PUBLIC CHARITY	GENERAL SUPPORT	2,000
FOOD FOR NEEDY 6401 LYONS RD COCONUT CREEK,FL 33073	NONE	PUBLIC CHARITY	GENERAL SUPPORT	11,250
FRIENDS OF MORSELIFE 435 25TH ST WEST PALM BEACH,FL 33417	NONE	PUBLIC CHARITY	GENERAL SUPPORT	6,000
FRIENDS OF THE ISRAEL DEFENSE FORCE 350 5TH AVE NEW YORK,NY 10118	NONE	PUBLIC CHARITY	GENERAL SUPPORT	4,750
HOW 1016 N DIXIE HWY WEST PALM BEACH, FL 33401	NONE	PUBLIC CHARITY	GENERAL SUPPORT	500
HAITIAN RELIEF FUND PO BOX 418009 BOSTON,MA 02241	NONE	PUBLIC CHARITY	GENERAL SUPPORT	1,000
HAMILTON PARTNERSHIP FOR PATERSON 32 SPRUCE ST PATERSON,NJ 07501	NONE	PUBLIC CHARITY	GENERAL SUPPORT	250
HEARING THE OVARIAN CANCER WHISPER (HOW) 1016 N DIXIE HWY WEST PALM BEACH, FL 33401	NONE	PUBLIC CHARITY	GENERAL SUPPORT	500
JEWISH FEDERATION OF PALM BEACH COUNTY 4601 COMMUNITY DRIVE WEST PALM BEACH, FL 33417	NONE	PUBLIC CHARITY	GENERAL SUPPORT	6,000
JEWISH HOME FOUNDATION OF NORTH JERSEY INC 50 EISENHOWER DRIVE PARAMUS,NJ 07652	NONE	PUBLIC CHARITY	GENERAL SUPPORT	5,000
KNOXVILLE JEWISH DAY SCHOOL 1529 DOWNTOWN WEST BLVD KNOXVILLE,TN 37919	NONE	PUBLIC CHARITY	GENERAL SUPPORT	2,000
KRAVIS CENTER FOR THE PERFORMING ARTS 701 OKEECHOBEE BLVD WEST PALM BEACH,FL 33401	NONE	PUBLIC CHARITY	GENERAL SUPPORT	4,000
Total				181,500

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
MEMORIAL SLOAN KETTERING CANCER CENTER 160 E 53RD NEW YORK,NY 10022	NONE	PUBLIC CHARITY	GENERAL SUPPORT	1,000
MUSEUM OF ELDBRIDGE STREET 12 ELDRIDGE ST NEW YORK,NY 10002	NONE	PUBLIC CHARITY	GENERAL SUPPORT	500
MUSEUM OF MODERN ART 11 W53RD ST NEW YORK, NY 10019	NONE	PUBLIC CHARITY	GENERAL SUPPORT	1,000
NATURAL RESOURCES DEFENSE COUNCIL 40 W20TH ST NEW YORK,NY 10011	NONE	PUBLIC CHARITY	GENERAL SUPPORT	20,000
NORTH SHORE LONG ISLAND JEWISH HEALTH SYSTEM FOUNDATION 125 COMMUNITY DR GREAT NECK,NY 11021	NONE	PUBLIC CHARITY	GENERAL SUPPORT	1,000
NYU LANGONE MEDICAL CENTER 550 1ST AVE NEW YORK,NY 10016	NONE	PUBLIC CHARITY	GENERAL SUPPORT	250
PALM BEACH COUNTRY CLUB FOUNDATION 760 N OCEAN BLVD PALM BEACH,FL 33480	NONE	PUBLIC CHARITY	GENERAL SUPPORT	1,000
PALM BEACH POLICE FOUNDATION 150 WORTH AVE PALM BEACH,FL 33480	NONE	PUBLIC CHARITY	GENERAL SUPPORT	500
PLANNED PARENTHOOD 434 W33RD ST NEW YORK,NY 10001	NONE	PUBLIC CHARITY	GENERAL SUPPORT	500
POLY PREP CDS 9216 SEVENTH AVE BROOKLYN,NY 11228	NONE	PUBLIC CHARITY	GENERAL SUPPORT	1,000
PREP FOR PREP 328 W71ST ST NEW YORK,NY 10023	NONE	PUBLIC CHARITY	GENERAL SUPPORT	5,000
SLE LUPUS FOUNDATION 330 7TH AVE NEW YORK, NY 10001	NONE	PUBLIC CHARITY	GENERAL SUPPORT	2,250
SID JACOBSON JEWISH COMMUNITY CENTER 300 FOREST DR EAST HILLS,NY 11548	NONE	PUBLIC CHARITY	GENERAL SUPPORT	1,000
TEMPLE ISRAEL OF THE CITY OF NEW YORK 112 EAST 75TH ST NEW YORK,NY 10021	NONE	PUBLIC CHARITY	GENERAL SUPPORT	1,000
THE FRICK COLLECTION 1 E70TH ST NEW YORK, NY 10021	NONE	PUBLIC CHARITY	GENERAL SUPPORT	1,000
Total				181,500

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
<b>a</b> Paid during the year				
THE ISEF FOUNDATION 135 W29TH ST NEW YORK,NY 10001	NONE	PUBLIC CHARITY	GENERAL SUPPORT	500
THE JERUSALEM FOUNDATION 420 LEXINGTON AVE NEW YORK,NY 10170	NONE	PUBLIC CHARITY	GENERAL SUPPORT	2,500
THE KRAVIS CENTER FOR THE PERFORMING ARTS 701 OKEECHOBEE BLVD WEST PALM BEACH, FL 33401	NONE	PUBLIC CHARITY	GENERAL SUPPORT	1,100
THE LEGAL AID SOCIETY 199 WATER ST NEW YORK, NY 10038	NONE	PUBLIC CHARITY	GENERAL SUPPORT	1,600
THE METROPOLITAN MUSEUM OF ART 1000 5TH AVE NEW YORK,NY 10028	NONE	PUBLIC CHARITY	GENERAL SUPPORT	1,200
THE METROPOLITAN OPERA 70 LINCOLN CTR NEW YORK,NY 10023	NONE	PUBLIC CHARITY	GENERAL SUPPORT	3,000
THE NEWYORK PHILHARMONIC 10 LINCOLN CTR NEW YORK,NY 10023	NONE	PUBLIC CHARITY	GENERAL SUPPORT	1,500
THE NORTON MUSEUM OF ART 1451 S OLIVE AVE WEST PALM BEACH, FL 33401	NONE	PUBLIC CHARITY	GENERAL SUPPORT	1,500
THE WASHIGTON INSTITUTE FOR NEAR EAST POLICY 1828 L ST WASH DC,DC 20036	NONE	PUBLIC CHARITY	GENERAL SUPPORT	10,000
UNITED STATES HOLOCAUST MEMORIAL MUSEUM 100 RAOUL WALLENBERG PLACE WASH DC,DC 20024	NONE	PUBLIC CHARITY	GENERAL SUPPORT	1,700
UNITED JEWISH APPEAL OF NEW YORK 130 E 59TH ST NEW YORK, NY 10022	NONE	PUBLIC CHARITY	GENERAL SUPPORT	1,400
WESTCHESTER FAIRFIELD HEBREW ACADEMY 270 LAKE AVE GREENWICH,CT 06830	NONE	PUBLIC CHARITY	GENERAL SUPPORT	500
Total				181,500

### **TY 2010 Accounting Fees Schedule**

Name: THE STANLEY AND ROBERTA BOGEN CHARITABLE

**FOUNDATION** 

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
GRAF REPETTI & CO, LLP	3,610	500		3,110

# **TY 2010 Investments Corporate Bonds Schedule**

Name: THE STANLEY AND ROBERTA BOGEN CHARITABLE

**FOUNDATION** 

Name of Bond	End of Year Book Value	End of Year Fair Market Value
40,000 SUPERVALU SR NOTES	41,600	38,300
40000 FORD	40,700	44,068

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# **TY 2010 Investments Corporate Stock Schedule**

Name: THE STANLEY AND ROBERTA BOGEN CHARITABLE

**FOUNDATION** 

Name of Stock	End of Year Book Value	End of Year Fair Market Value
1000 B OF A PFD 7.25% SER J	21,170	24,720
400 BECKMAN COULTER	27,951	30,092
700 EXXON	47,853	51,184
2000 GE	31,596	36,580
400 IBM	76,312	88,056
500 PRUDENTAIL FINANCIAL 5% PFD	12,590	13,745
500 TRAVELERS	49,553	55,710
800 WALGREENS	28,896	31,168
1500 STAPLES	30,720	34,155
1500 MORGAN STANLEY	41,134	40,815
2000 LOEWS	44,176	50,160
400 DEERE	22,751	33,220
500 COSTCO	29,653	36,105
2000 BNY MELLON	57,032	60,400
2000 ABB LTD	38,797	44,900

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TY 2010 Investments Governo Obligations Schedule	ment		
Name:	THE STANLEY AND FOUNDATION	ROBERTA BOGEN CHARITA	ABLE
EIN:	94-3457573		
JS Government Securities - End of Year Book Value:	2	22,129	
JS Government Securities - End of Year Fair Market Value:	2	22,333	
State & Local Government Securities - End of Year Book Value:		0	

0

**State & Local Government Securities - End of Year Fair** 

**Market Value:** 

#### **TY 2010 Other Expenses Schedule**

Name: THE STANLEY AND ROBERTA BOGEN CHARITABLE

**FOUNDATION** 

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
NYS FEE	100	0		0



#### **TY 2010 Substantial Contributors Schedule**

Name: THE STANLEY AND ROBERTA BOGEN CHARITABLE

**FOUNDATION** 

Name	Address	
	C/O GRAF REPETTI - 1114 6TH AVE NEW YORK, NY 10036	

#### **TY 2010 Taxes Schedule**

Name: THE STANLEY AND ROBERTA BOGEN CHARITABLE

**FOUNDATION** 

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FEDERAL EXCISE TAX	4,686	0		0
TAX WITHHELD	137	0		0