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Department of the Treasury

Return of Private Foundation

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

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

OMB No 1545-0052

Interr	al Rev		be able to use a copy of this			J
For	alen	dar year 2010, or tax year beginning FEB			<u>JAN 31, 2011</u>	
G	heck	all that apply: Initial return Amended return	Initial return of a fo	ormer public charity	Final return Name change	
Name of foundation					A Employer identification	number
		ALAN B. MILLER FAMILY	FOUNDATION		23-2899896	
Nun	iber a	nd street (or P O box number if mail is not delivered to street		Room/suite	B Telephone number	
		57 CROSBY BROWN ROAD				
City	or to	own, state, and ZIP code			C if exemption application is p	ending, check here
		GLADWYNE, PA 19035-1	.512		D 1. Foreign organizations	s, check here
H C	heck	type of organization: X Section 501(c)(3) ex	kempt private foundation		Foreign organizations me check here and attach co	eting the 85% test, mputation
] Se	ction 4947(a)(1) nonexempt charitable trust	Other taxable private found	ation	 E If private foundation stat	
I Fa	ır ma	arket value of all assets at end of year J Account	ng method: X Cash	Accrual	under section 507(b)(1)	
(fr	om l	Part II, col. (c), line 16)	ther (specify)		F If the foundation is in a	60-month termination
	\$	9,983,303. (Part I, colu	mn (d) must be on cash	basis.)	under section 507(b)(1)	
Pa	rt'l	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received	0.		N/A	
	2	Check X if the foundation is not required to attach Sch. B		P. P. St. Jan.		
For calen G Check Name of Check Na	3	Interest on savings and temporary cash investments				
	4	Dividends and interest from securities	207,597.	207,597.		STATEMENT 1
	5a	Gross rents				
	Net rental income or (loss)	transfer and the second of the	FOR PARTIES AND 150		Landing of the Control of the Contro	
	Net gain or (loss) from sale of assets not on line 10	336,145.				
	Gross sales price for all assets on line 6a 336,633.		****		SANTARE TO SELECT TO SELEC	
	7	Capital gain net income (from Part IV, line 2)		336,145.	Maria La Saria	
	8	Net short-term capital gain				A CONTRACTOR OF THE CONTRACTOR
	9	Income modifications		19 45 A 195 F	ECEIVED	
	10a	Gross sales less returns and allowances	STAND STORY	<u> </u>		
	b	Less Cost of goods sold	PARA CONTRACTOR	S S		*
	C	Gross profit or (loss)		·	EP 19 2011 Q	
	11	Other income	540 540	540 540	or	
	12	Total. Add lines 1 through 11	543,742.	543,742)	SDEN, UT	
		Compensation of officers, directors, trustees, etc	0.	-0.		0.
1 - 1 1 1		Other employee salaries and wages				
H Check S Fair fund S Fair fun		Pension plans, employee benefits	}			
		Legal fees	F F00	0.		0
		Accounting fees STMT 2	5,500.		· · · · · · - · - · · · · · · · · · · ·	0.
		Other professional fees		 		
		Interest Taxes STMT 3	32,860.	2,360.		0.
		Taxes STMT 3 Depreciation and depletion	32,000.	2,300.		· · · · · · · · · · · · · · · · · · ·
		Occupancy			-	
		Travel, conferences, and meetings				
		Printing and publications				
ŲĘ gai		Other expenses STMT 4	180.	0.	<u> </u>	0.
	24	Total operating and administrative	130.	1	İ	
J.C.		expenses. Add lines 13 through 23	38,540.	2,360.		0.
÷.ö		Contributions, gifts, grants paid	287,150.			287,150.
-	!	Total expenses and disbursements.				
	-"	Add lines 24 and 25	325,690.	2,360.		287,150.
ن ق	27	Subtract line 26 from line 12:			· .	
		Excess of revenue over expenses and disbursements	218,052.			
		Net investment income (if negative, enter -0-)	220,000	541,382.		· · · · · · · · · · · · · · · · · · ·
		Adjusted net income (if negative, enter -0-)	<u> </u>		N/A	
0235		LHA For Paperwork Reduction Act Notice, see	the instructions.		<u> </u>	Form 990-PF (2010)

ALAN B. MILLER FAMILY FOUNDATION

23-2899896

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260,909.

287,150.

7

7 Add lines 5 and 6

See the Part VI instructions.

8 Enter qualifying distributions from Part XII, line 4

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

	990-PF (2010) ALAN B. MILLER FAMILY FOUNDATION rt.VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or		-2899 - see i			Page 4
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.	\$24	71.		,	3, 37,
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)					· (4
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1%	1			5,4	14.
	of Part I, line 27b		17.04.6		, , -	
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).	1 1	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	` '	•	
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2				0.
	Add lines 1 and 2	3			5,4	14.
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	· ·	_	<u>-, -</u>	0.
	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5			5,4	$\frac{3.0}{14.0}$
	Credits/Payments:	-	1, 1		<u>~</u>	
	2010 estimated tax payments and 2009 overpayment credited to 2010 [6a] 11,924		١.,	•		, , `
	Exempt foreign organizations - tax withheld at source 6b	Ť		' ا		**
	Tax paid with application for extension of time to file (Form 8868) 6c	7	'	4	,	`
	Backup withholding erroneously withheld 6d	٦,		-		
	Total credits and payments. Add lines 6a through 6d	7	,	´ 1	1,9	24.
	Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached	8			<u>+ 1 </u>	
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9				—
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	1		6,5	10.
	Enter the amount of line 10 to be: Credited to 2011 estimated tax	11			<u>, , , , , , , , , , , , , , , , , , , </u>	0.
	TVII-A Statements Regarding Activities					
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or interver	ie in		1 2/3	Yes	No
	any political campaign?			1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?			1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials publish	ed or		.	`	,
	distributed by the foundation in connection with the activities.				,	-
C	Did the foundation file Form 1120-POL for this year?			1c		X
	d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:					
	(1) On the foundation. ▶ \$ (2) On foundation managers. ▶ \$ 0	<u>•</u>		`		
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			-	.,,	,
	managers. ► \$ 0 .			•		
	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		X
	If "Yes," attach a detailed description of the activities.			}* ,		
	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		X_
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		_X
	If "Yes," has it filed a tax return on Form 990-T for this year?	N	1/A	4b		<u> </u>
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		X
	If "Yes," attach the statement required by General Instruction T.					
	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 sta remain in the governing instrument? 	te law		6	х	
7	Did the foundation have at least \$5,000 in assets at any time during the year?			7	X	
	If "Yes," complete Part II, col. (c), and Part XV.					
	Enter the states to which the foundation reports or with which it is registered (see instructions)					į
Ju	DE, PA					l
h .	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)					į
	of each state as required by General Instruction G? If "No," attach explanation			8b	X	
	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for ca	lendar		00	- 22	
	year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If "Yes," complete Part XIV	orrudi		9		Y
	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses			10		X
<u> </u>	Journal 100 Journa					

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Part VII-B Statements Regarding Activities for Which F	orm 4720 May Be F	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	1 4945(e))?	☐ Ye	s 🗶 No 🏻 🔀	/,	
(2) Influence the outcome of any specific public election (see section 4955); or		ectly,		<i>.</i> ' ,	
any voter registration drive?		Ye	s X No	· ·	
(3) Provide a grant to an individual for travel, study, or other similar purposes?	?	Ye	s X No		
(4) Provide a grant to an organization other than a charitable, etc., organization					
509(a)(1), (2), or (3), or section 4940(d)(2)?		☐ Ye	s X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f			İ	
the prevention of cruelty to children or animals?		Ye	s X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify unc	ter the excentions described (
section 53.4945 or in a current notice regarding disaster assistance (see instru			N/A	5 b	``
Organizations relying on a current notice regarding disaster assistance check h				<u> </u>	1.
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr		ined		}	ľ
		//A ☐ Y€	s No	- 1	
expenditure responsibility for the grant?		i/A	.5 110	′′	1
If "Yes," attach the statement required by Regulations section 53.4945				·	
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on		es X No	.	3. 1
a personal benefit contract?		Y €	1	C.	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal Denetit Contract?		-	6b	X
If "Yes" to 6b, file Form 8870.			s X No	'	7400
7a At any time during the tax year, was the foundation a party to a prohibited tax s		Ye		<u>, </u>	┼
b If "Yes," did the foundation receive any proceeds or have any net income attribu	itable to the transaction?			7b	<u></u>
Part VIII Information About Officers, Directors, Trusto	ees, Foundation Ma	inagers, Higni	y		
	componentian				
1 List all officers, directors, trustees, foundation managers and their		(c) Compensation	(d) Contributions to	(a) Ev	nanca
(a) Name and address	(b) Title, and average hours per week devoted	(If not paid,	(d) Contributions to employee benefit plans and deferred	(e) Ex accoun	t, other
(4)	to position	enter -0-)	compensation	allow	ances
					_
SEE STATEMENT 8	<u> </u>	0.	0.		<u>0.</u>
				İ	
				1	
		<u></u>	<u> </u>	<u> </u>	
2 Compensation of five highest-paid employees (other than those inc		enter "NONE."	I (-N		
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Ex accoun	pense it. other
(a) Name and address of each employee paid more than 400,000	devoted to position	(C) Compensation	compensation	allow	ances
NONE					
			:		
			ł	İ	
	1				
	1]	
	1			}	
T. I. I guerbar of other employees paid over \$50,000	<u> </u>	 	<u> </u>	<u> </u>	0
Total number of other employees paid over \$50,000	<u> </u>		Enro	990-PF	<u>_</u>
			rum	990-FF	(2010)

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Part VIII. Information About Officers, Directors, Trustees, Foundation M Paid Employees, and Contractors (continued)	anagers, Highly	
	(b) Type of service	(c) Compensation
NONE		
		
Total number of others recovering over \$50,000 for professional converse		
Part IX-A Summary of Direct Charitable Activities		<u>▶</u> 0
	nation such as the	
number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	idion oddii do iiio	Expenses
1 N/A		
2		
3		
		· · · · · · · · · · · · · · · · · · ·
4		
Part IX-B Summary of Program-Related Investments		
	12.	Amount
1 N/A		
0		·····
Part VIII Plaid Employees, and Contractors (continued)		
All other program-related investments. See instructions.		
3		
Total Add bear 1 through 2		

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign fou	ndation	s, see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
	Average monthly fair market value of securities	1a	7,476,978.
	Average of monthly cash balances	1b	1,910,505.
	Fair market value of all other assets	1c	
	Total (add lines 1a, b, and c)	1d	9,387,483.
	Reduction claimed for blockage or other factors reported on lines 1a and		
·	1c (attach detailed explanation) 1e 0.	i	
2	Acquisition indebtedness applicable to line 1 assets	1 2	0.
3	Subtract line 2 from line 1d	3	9,387,483.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	140,812.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	9,246,671.
6	Minimum investment return. Enter 5% of line 5	6	462,334.
	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part.)	nd certaii	
1	Mınımum investment return from Part X, line 6	1	462,334.
2a	Tax on investment income for 2010 from Part VI, line 5] - , - [
b	Income tax for 2010. (This does not include the tax from Part VI.)	(
C	Add lines 2a and 2b	2c	5,414.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	456,920.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	456,920.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	456,920.
P	art XIII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	1 1	
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	287,150. 0.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:	1 1	
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	287,150.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	5,414.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	281,736.
	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	(c) 2009	(d) 2010
1	Distributable amount for 2010 from Part XI,			, ,	
	line 7	`		, , , -	<u>456,920.</u>
2	Undistributed income, if any, as of the end of 2010				
а	Enter amount for 2009 only		·	366,280.	4 F. C.
b	Total for prior years:	, , , , , , , , , , , , , , , , , , ,		, , ,	
		* 1 XN	0.	, , , , , , ,	हे दे भूके में दे हैं है है है है है है
3	Excess distributions carryover, if any, to 2010:			" , , , , , , , , , , , , , , , , , , ,	
а	From 2005	, .		-	
b	From 2006	, , , , , , ,			
C	From 2007	4			Hair Sign bassons
d	1From 2008	3 ×	,	, , , , , , , , , , , , , , , , , , , ,	Compared to the state of the st
е	From 2009		7 7 4	· · · · · · · · · · · · · · · · · · ·	
	Total of lines 3a through e	0.	, ' 2 ^x	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	CAPACITATION OF THE STATE OF TH
4	Qualifying distributions for 2010 from		,,,		
	Part XII, line 4: ► \$ 287, 150.		•	207 150	
	Applied to 2009, but not more than line 2a		, , , , , , , , , , , , , , , , , , , ,	287,150.	The second of th
b	Applied to undistributed income of prior		^		
	years (Election required - see instructions)	· High application of the control of	0.	7 / 18 1	CALLES SANCE AND TO SANCE AND THE
C	Treated as distributions out of corpus	ا م			
	(Election required - see instructions)	0.			,
	Applied to 2010 distributable amount	0.		, , , , , , , , , , , , , , , , , , , ,	
	Remaining amount distributed out of corpus	0.	· · · · · · · · · · · · · · · · · · ·		n in the second of the second
5	Excess distributions carryover applied to 2010 (If an amount appears in column (d), the same amount	75		,	A STANSON A STAN
6	must be shown in column (a)) Enter the net total of each column as			· · · · ·	
	indicated below:	* - 2.5		•	
	Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.		·	1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1
b	Prior years' undistributed income. Subtract		0.	4	
	line 4b from line 2b	<u>(4) (5) (</u>	U •		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
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		0		
	assessed	3 xx 1	0.		2. 4. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2.
0	Subtract line 6c from line 6b. Taxable	Part 1	0.	,	
	amount - see instructions Undistributed income for 2009. Subtract line	s* •			
٠	4a from line 2a. Taxable amount - see instr.			79,130.	
f	Undistributed income for 2010. Subtract	· · · · · · · · · · · · · · · · · · ·			
·	lines 4d and 5 from line 1. This amount must				
	be distributed in 2011				456,920.
7	Amounts treated as distributions out of				
	corpus to satisfy requirements imposed by	i			
	section 170(b)(1)(F) or 4942(g)(3)	0.			
8	Excess distributions carryover from 2005				,
	not applied on line 5 or line 7	0.			
9	Excess distributions carryover to 2011.	•			
	Subtract lines 7 and 8 from line 6a	0.			, , , , , , , , , , , , , , , , , , ,
10	Analysis of line 9:				
	Excess from 2006				
t	Excess from 2007	1			
	Excess from 2008	1			
	1 Excess from 2009	-			
•	Excess from 2010	L		<u> </u>	Form 990-PF (2010)

	MILLER FAM				399896 Page 10
Part XIV Private Operating F			II-A, question 9)	N/A	
1 a If the foundation has received a ruling of					
foundation, and the ruling is effective fo			▶ └	· · · · · · · · · · · · · · · · · · ·	
b Check box to indicate whether the found		ng foundation described	•	4942(j)(3) or4	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	(1) 2000	Prior 3 years	(4) 2007	(a) Tatal
income from Part I or the minimum	(a) 2010	(b) 2009	(c) 2008	(d) 2007	(e) Total
investment return from Part X for					
each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities			-		
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c 3 Complete 3a, b, or c for the					
alternative test relied upon:					
a "Assets" alternative test - enter:			:		
(1) Value of all assets		 		-	
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter 2/3 of minimum investment return					
shown in Part X, line 6 for each year					
listed					
c "Support" alternative test - enter:					
(1) Total support other than gross					
investment income (interest, dividends, rents, payments on					
securities loans (section					
512(a)(5)), or royalties)	<u> </u>				
(2) Support from general public and 5 or more exempt					
organizations as provided in					
section 4942(j)(3)(B)(iii)			 		
(3) Largest amount of support from an exempt organization					
(4) Gross investment income			-		
Part XV Supplementary Info	ormation (Comple	ete this part only	if the foundation	n had \$5,000 or m	ore in assets
at any time during	the year-see the	instructions.)	·		
1 Information Regarding Foundation					
a List any managers of the foundation wh			ntributions received by the	e foundation before the cl	ose of any tax
year (but only if they have contributed i	note than 40,000). (See	section 507 (d)(2)-)			
NONE	400/	h	/or an aqually large part	on of the ownership of a	nartnarchia ar
 b List any managers of the foundation who other entity) of which the foundation has 			i (or an equally large port	ion of the ownership of a p	partnership or
NONE					
2 Information Regarding Contribut	tion, Grant, Gift, Loar	, Scholarship, etc., F	Programs:		
Check here ▶ ☐ If the foundation	only makes contributions	to preselected charitable	e organizations and does		
the foundation makes gifts, grants, etc.	(see instructions) to ind	ividuals or organizations	under other conditions, o	complete items 2a, b, c, ar	ıd d.
a The name, address, and telephone num	nber of the person to who	om applications should b	e addressed:		
ALAN B. MILLER					
57 CROSBY BROWN ROAL), GLADWYNE	<u>, PA 19035 </u>			
b The form in which applications should	be submitted and information	ation and materials they:	should include:		
NONE					
c Any submission deadlines: NONE					
d Any restrictions or limitations on award	ls, such as by geographic	cal areas, charitable field:	s, kınds of institutions, or	other factors:	
NONE					

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i, girt Ati				
3 Grants and Contributions Paid During the	Year or Approved for Future I	Payment		
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (nome or business)	or substantial contributor	recipient		
a Paid dunng the year				
			!	
				•
SEE STATEMENT 9				
Total			▶ 3a	287,150.
b Approved for future payment				
NONE				
NONE				
]		
Total			▶ 3b	0.

Analysis of Income-Producing Activities

nter gross amounts unless otherwise indicated.	Unrelate	d business income		ded by section 512, 513, or 514	(e)		
b c d e f g Fees and contracts from government agencies Membership dues and assessments Interest on savings and temporary cash investments Dividends and interest from securities Net rental income or (loss) from real estate: a Debt-financed property b Not debt-financed property Net rental income or (loss) from personal property Other investment income Gain or (loss) from sales of assets other than inventory Net income or (loss) from special events Gross profit or (loss) from sales of inventory Other revenue: a b c d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations.) art XVI-B Relationship of Activities	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income		
•	code		0000				
•	-						
	-						
_	-				- · · · - · · · · · · · · · · · · · · ·		
d	-						
			 				
f				·	··		
•			<u> </u>				
•			-				
-	1						
			1 1 1	207 507			
			14	207,597.	SELVER MENTAL CONTRACTOR		
· · ·			1: '/.		A Company		
			-				
			<u> </u>				
6 Net rental income or (loss) from personal							
property			ļ <u>.</u>				
7 Other investment income							
8 Gain or (loss) from sales of assets other			1.	006 445			
than inventory			18	336,145.			
			ļ <u>.</u>				
O Gross profit or (loss) from sales of inventory					-		
1 Other revenue:	•						
a	_		ļ				
b	-		-				
C	-		 				
d	-	 -	+				
e			\$	543,742.			
			8 . 3 . 7	13_			
				13	J4J,144.		
				1 D			
Part XVI-B Relationship of Activities	to the Acco	omplishment of Ex	kemp	t Purposes			
Line No. Explain below how each activity for which inc	come is reported i	n column (e) of Part XVI-A	\ contri	outed importantly to the accord	nplishment of		
the foundation's exempt purposes (other than	n by providing fu	nds for such purposes).					
				<u> </u>			
							
				·			
					<u> </u>		
		<u> </u>	_				
					<u> </u>		
				<u>. </u>			
23621					Form 990-PF (2010)		

Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of Yes No

the C	ode (other than section 501(c))(3) organizations) or in section 52	7, relating to political organiz	ations?			
a Trans	sfers from the reporting found	ation to a noncharitable exempt org	ganization of:				1 :-
(1)						1a(1)	X
	Other assets					1a(2)	X
	r transactions:	ble average areasystem				1b(1)	×
	Sales of assets to a noncharital	ncharitable exempt organization	•			1b(1)	X
	Purchases of assets from a not Rental of facilities, equipment,					1b(3)	X
	Reimbursement arrangements					1b(4)	$\frac{1}{x}$
	Loans or loan guarantees					1b(5)	X
		mbership or fundraising solicitatio	ns			1b(6)	X
		iling lists, other assets, or paid em				1c	Х
		"Yes," complete the following sche		ays show the fair ma	arket value of the good:	s, other assets	,
or se	rvices given by the reporting fo	oundation. If the foundation receive	ed less than fair market value	e in any transaction (or sharing arrangement	t, show in	
colu		other assets, or services received.					
a) Line no	(b) Amount involved	(c) Name of noncharitable	exempt organization	(d) Description	of transfers, transactions, a	nd sharing arrang	jernents
	<u> </u>	N/A_					
				 			
			<u></u>	 			
-							
							
-							
			······································				
				<u></u>			
2a Isth	e foundation directly or indirec	tly affiliated with, or related to, one	or more tax-exempt organiz	ations described			
ın se	ction 501(c) of the Code (othe	r than section 501(c)(3)) or in sect	tion 527? _			Yes	X No
b If Ye	es," complete the following sch		1		10		
	(a) Name of org	ganization	(b) Type of organization	(c) Description of relation	nsnip	
-	N/A						
		 					
	Under penalties of persury. I declar	e that I have examined this return, includ	ing accompanying schedules and	statements, and to the	best of my knowledge and	belief, it is true,	correct,
Sign	and complete Declaration of prepare	arer (other than taxpayer or (duciary) is b	ased on all information of which p	reparer has any knowle	dge		
Here	Meller	ムしんだけん	19/12/1	J N PR	ES/TREAS &	DIREC	
	Signature of officer or tri	ustee '	Date		tle		
-	Print/Type preparer's na			Date	Check If PTI	N	
				0/-/	self- employed		
Paid	LEE A. PRO	$_{ m OFY}$ (XM	ntury 1	7/7/11			
Prepa		FAIRMAN GROUP	LLC ///	<i></i>	Fırm's EIN ▶		
Use O							
		1 CASSATT ROAD,	SUITE 111				
		RWYN, PA 19312			Phone no. 610	<u>-889-7</u>	
			. 			Form 990-F	PF (2010)

FORM 990-PF DIVIDE	NDS AND	INTER	EST FROM	SECUE	RITIES	STATEMENT	1
SOURCE		GROSS	AMOUNT		ITAL GAINS IVIDENDS	COLUMN (A) AMOUNT	
VARIOUS - VANGUARD			207,597.		0.	207,597	7.
TOTAL TO FM 990-PF, PART I,	LN 4		207,597.		0.	207,597	7.
FORM 990-PF	AC	COUNTI	NG FEES			STATEMENT	2
DESCRIPTION	EXPE	A) INSES BOOKS	(B) NET INV MENT IN		(C) ADJUSTED NET INCOM		
THE FAIRMAN GROUP		5,500.		0.		(0.
TO FORM 990-PF, PG 1, LN 16	В	5,500.		0.			0.
FORM 990-PF		TAX	ES			STATEMENT	3
DESCRIPTION	EXPE	A) INSES BOOKS	(B) NET INV MENT IN		(C) ADJUSTED NET INCOM		
FOREIGN TAXES		2,360.	2	,360.		(0.
2009 EXTENSION PAYMENT PAID IN 2010 2010 ESTIMATED TAX PAYMENT	2	6,000. 4,500.		0. 0.			0. 0.
TO FORM 990-PF, PG 1, LN 18	3	2,860.	2	,360.			0.
FORM 990-PF	C	THER E	XPENSES			STATEMENT	4
DESCRIPTION	EXPE	A) INSES BOOKS	(B) NET INV MENT IN		(C) ADJUSTED NET INCOM		
MISCELLANEOUS EXPENSES		180.		0.		(0.
TO FORM 990-PF, PG 1, LN 23		180.		0.		(0.
		<u></u>					_

FORM 990-PF	CORPORATE STOCK		STATEMENT 5		
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE		
CARDINAL HEALTH, INC.	-	278,117.	278,117.		
MCKESSON HBOC INCOME UNIVERSAL HEALTH REALTY INC.		415,916. 1,526,700.	415,916. 1,526,700.		
UNIVERSAL HEALTH SERVICES INC.		0.	0.		
VANGUARD 500 INDEX FUND ADM		923,939.	923,939.		
VANGUARD INTERNATIONAL GROWTH		1,613,583.	1,613,583.		
VANGUARD MID-CAP INDEX FUND AD		735,350.	694,630. 86,196.		
VANGUARD SMALL-CAP INDEX FUND CAREFUSION CORP	ADM	694,630. 86,196.			
TOTAL TO FORM 990-PF, PART II,	LINE 10B	6,274,431.			
FORM 990-PF	CORPORATE BONDS		STATEMENT 6		
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE		
VANGUARD INTER-TERM BOND INDEX	ADM	1,579,525.	1,579,525.		
TOTAL TO FORM 990-PF, PART II,	LINE 10C	1,579,525.	1,579,525.		
FORM 990-PF	OTHER INVESTMENTS		STATEMENT 7		
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE		
VANGUARD EMERGING MARKETS ETF	FMV	314,737.	314,737.		
TOTAL TO FORM 990-PF, PART II,	LINE 13	314,737.	314,737.		

	ST OF OFFICERS, D D FOUNDATION MANA		STATI	EMENT 8
NAME AND ADDRESS	TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB	
ALAN B. MILLER 57 CROSBY BROWN ROAD GLADWYNE, PA 19035	PRES./TREAS. &	DIREC 0.	0.	0.
JILL S. MILLER 57 CROSBY BROWN ROAD GLADWYNE, PA 19035	SECRETARY & DI 0.00	RECTOR 0.	0.	0.
MARC D. MILLER 838 SUMMIT ROAD PENN VALLEY, PA 19072	DIRECTOR 0.00	0.	0.	0.
MARNI E. SPENCER 235 EAST ST. ANDREWS LANE DEERFIELD, IL 60015	DIRECTOR 0.00	0.	0.	0.
ABBY D. KING 2504 DELANCEY PLACE PHILADELPHIA, PA 19103	DIRECTOR 0.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE	6, PART VIII	0.	0.	0.

	AND CONTRIBUTIONS DURING THE YEAR	STATEMENT 9		
RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT		AMOUNT	
ARTHUR ASHE YOUTH TENNIS 4842 RIDGE AVENUE PHILADELPHIA, PA 19129	N/A CHARITABLE CONTRIBUTION	CHARITY	1,500.	
CHENEY CARDIOVASCULAR INSTITUTE 2150 PENNSYLVANIA AVENUE, NW, 4TH FLOOR WASHINGTON, DC 20037	N/A CHARITABLE CONTRIBUTION	CHARITY	5,000.	
COALITION TO SALUTE AMERICAN HEROES 2 CHURCH STREET, SUITE 101 OSSINING, NY 10562	N/A CHARITABLE CONTRIBUTION	CHARITY	5,325.	
FRIENDS OF YEMIN ORDE 12230 WILKINS AVE ROCKVILLE, MD 20852	N/A CHARITABLE CONTRIBUTION	CHARITY	25,000.	
HORATIO ALGER ASSOCIATION 900 CANAL CENTER PLAZA, SUITE 320 ALEXANDRIA, VA 22314	N/A CHARITABLE CONTRIBUTION	CHARITY	85,000.	
NATIONAL ORGANIZATION FOR HEARING RESEARCH FOUNDATION 225 HAVERFORD AVENUE, STE 1 NARBERTH, PA 19072	N/A CHARITABLE CONTRIBUTION	CHARITY	1,000.	
PALM BEACH COUNTRY CLUB FOUNDATION P.O. BOX 615 PALM BEACH, FL 33480	N/A CHARITABLE CONTRIBUTION	CHARITY	1,000.	
PARK EAST SYNAGOGUE 163 EAST 67TH STREET NEW YORK, NY 10065	N/A CHARITABLE CONTRIBUTION	CHARITY	1,000.	

ALAN B. MILLER FAMILY FOUNDATION	N		23-2899896
	M/A CHARITABLE CONTRIBUTION	CHARITY	1,000.
WILLIAM & MARY - HILLEL P.O. BOX 1693 WILLIAMSBURG, VA 23187	N/A CHARITABLE CONTRIBUTION	CHARITY	500.
WOUNDED WARRIOR PROJECT 7020 A.C. SKINNER PARKWAY, STE 100 JACKSONVILLE, FL 32256	N/A CHARITABLE CONTRIBUTION	CHARITY	21,075.
42 EAST 69TH STREET	N/A CHARITABLE CONTRIBUTION	CHARITY	1,000.
FOUNDATION	N/A CHARITABLE CONTRIBUTION	CHARITY	27,500.
164 E 68TH STREET	N/A CHARITABLE CONTRIBUTION	CHARITY	1,000.
HEREDITARY NEUROPATHY FOUNDATION 1751 2ND AVENUE, SUITE 103 NEW YORK, NY 10128		CHARITY	1,250.
LUSTGARTEN FOUNDATION FOR PANCREATIC CANCER RESEARCH 1111 STEWART AVENUE BETHPAGE, NY 11714	N/A CHARITABLE CONTRIBUTION	CHARITY	500.
NATIONAL MUSEUM OF AMERICAN JEWISH HISTORY 101 SOUTH INDEPENDENCE MALL EAST PHILADELPHIA, PA 19106	N/A CHARITABLE CONTRIBUTION	CHARITY	30,000.
WEST POINT FUND 698 MILLS ROAD WEST POINT , NY 10996	N/A CHARITABLE CONTRIBUTION	CHARITY	1,500.

ALAN B. MILLER FAMILY FOUNDATIO	N		23-2899896
FRIENDS OF OFANIM 308 EAST LANCASTER AVENUE ARDMORE, PA 19003	N/A CHARITABLE CONTRIBUTION	CHARITY	3,000.
DISABLED AMERICAN VETERANS 3725 ALEXANDRIA PIKE COLD SPRING, KY 41076	N/A CHARITABLE CONTRIBUTION	CHARITY	1,000.
U.S.O P.O. BOX 96322 WASHINGTON, DC 20090	N/A CHARITABLE CONTRIBUTION	CHARITY	250.
DAVID HOROWITZ FREEDOM CENTER P.O. BOX 55089 SHERMAN OAKS, CA 91499	N/A CHARITABLE CONTRIBUTION	CHARITY	5,000.
THOMAS JEFFERSON UNIVERSITY 925 CHESTNUT STREET, SUITE 110 PHILADELPHIA, PA 19107	N/A CHARITABLE CONTRIBUTION	CHARITY	12,500.
LOWER MERION POLICE PENSION ASSOCIATION 71 EAST LANCASTER AVENUE ARDMORE, PA 19003	N/A CHARITABLE CONTRIBUTION	CHARITY	100.
KIMMEL CENTER 260 SOUTH BROAD STREET PHILADELPHIA, PA 19102	N/A CHARITABLE CONTRIBUTION	CHARITY	20,000.
	N/A CHARITABLE CONTRIBUTION	CHARITY	150.
MACULA VISION RESEARCH FOUNDATION 1 TOWER BRIDGE, 100 FRONT ST., SUITE 300 WEST CONSHOHOCKEN, PA	N/A CHARITABLE CONTRIBUTION	CHARITY	20,000.
	N/A CHARITABLE CONTRIBUTION	CHARITY	15,000.
TOTAL TO FORM 990-PF, PART XV, LI	NE 3A		287,150.

Form **8868**

(Rev. January 2011)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return.

OMB No. 1545-1709

• If you	are filing for an Automatic 3-Month Extension, complete	te only Pa	art Land check this box			▶ 🗓
	are filing for an Additional (Not Automatic) 3-Month Ex				••• •••	. • •
	complete Part II unless you have already been granted a				8868.	
	nic filing (e-file). You can electronically file Form 8868 if y					corporation
	to file Form 990-T), or an additional (not automatic) 3-moi					
	to file any of the forms listed in Part I or Part II with the exc					
	al Benefit Contracts, which must be sent to the IRS in pap					
	w.irs.gov/efile and click on e-file for Charities & Nonprofits		(300 manachons). For more details on a	10 010011	onio ming or	
Part	Automatic 3-Month Extension of Time	Only su				
A corpo	ration required to file Form 990-T and requesting an autor	natic 6-mo	onth extension - check this box and com	plete		
Part I or	2				-	
	r corporations (including 1120-C filers), partnerships, REM come tax returns.	ICs, and t	rusts must use Form 7004 to request an	extensi	on of time	
Type or	Name of exempt organization			Emplo	yer identifica	ation number
print	ALAN B. MILLER FAMILY FOUNT	ϽΑͲΤΟΙ	N	23	-289989	96
File by the	Number street and room or suits as If a D O hoves					
due date f	57 CROSBY BROWN ROAD	oc mondo	tione.			
return Se		reign add	ress see instructions		•	
1130000101	GLADWYNE, PA 19035-1512	Jieigii add	1033, 300 113110010113.			
	GHADWING, IN 19033 1312					
Enter th	e Return code for the return that this application is for (file	e a separa	te application for each return)			04
Applica	ntion	Return	Application			Return
Is For		Code	Is For			Code
Form 99	90	01	Form 990-T (corporation)			07
Form 99	90-BL	02	Form 1041-A			08
Form 99	90-EZ	03	Form 4720			09
Form 99	90-PF	04	Form 5227			10
Form 99	90-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
Form 99	90-T (trust other than above)	06	Form 8870			12
	ALAN B. MILLER books are in the care of 57 CROSBY BROWN	N ROAL		35-1	512	
	phone No. ► 610-896-5120		FAX No. >			
	organization does not have an office or place of business					▶
	s is for a Group Return, enter the organization's four digit					
box 🕨					s the extensi	on is for.
1 1	request an automatic 3-month (6 months for a corporation	-				
-	SEPTEMBER 15, 2011 , to file the exemp	t organiza	tion return for the organization named a	bove. Ir	e extension	
is	for the organization's return for:					
	calendar year or					
•	X tax year beginning <u>FEB 1, 2010</u>	, an	d ending <u>JAN 31, 2011</u>		•	
2 If	the tax year entered in line 1 is for less than 12 months, concluding Deriod	heck reas	on: Initial return	l retum		
0- 11	Abia analysation is far F 000 Bt. 000 BT. 000 T.	0000	man the Acetation to the land and			
	this application is for Form 990-BL, 990-PF, 990-T, 4720, o	or 6069, e	nter the tentative tax, less any		•	11 024
_	onrefundable credits. See instructions.			_3a	\$	11,924.
	this application is for Form 990-PF, 990-T, 4720, or 6069,	-				11 004
_	stimated tax payments made. Include any prior year overp			3b	\$	11,924.
	alance due. Subtract line 3b from line 3a. Include your pa	•	•	20	œ.	_ 0.
	y using EFTPS (Electronic Federal Tax Payment System).				\$ Sor paymon	
<u>vautior</u>	. If you are going to make an electronic fund withdrawal w	viiii viis FO	Juli 0000, see rolli 6453-EU and Form	OO I A.E.C	, for payment	instructions.