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

OMB No 1545-0052 2010

int	emal Re	venue Service	Note. The foundation	on may b	e able to use a copy of t				ng requirements	<u> </u>	
<u>F</u>	or cal	endar year 2010,	or tax year begi	nning		01 , 2010,				11/30	0, 2011
G	Chec	ck all that apply	Initial retur	n	Initial return o	of a former p	ublic char	rity	<u>į                                    </u>	Final retui	rn
			Amended r	eturn	Addres	s change		Na	me change		
Na	ame of	f foundation						Α	Employer identific	ation number	•
E	DWA	RD AND JAMI	LEVY FOUNDA	İ	20-3975643						
N	umber	and street (or P O b	ox number if mail is no	ite E	e B Telephone number (see page 10 of the instructions)						
С	/o i	JAMI SALTZMA	N-LEVY	Ì							
1	1209	NW 51ST ST	REET		(	) –					
c	ty or t	own, state, and ZIP	code					- 10	If exemption applicat		<b>▶</b>
	•							۱,	pending, check here  1 Foreign organization		. ▶∐
С	ORA	L SPRINGS, F	'L 33076						2 Foreign organizati	·	
_		<del></del>		on 501(	c)(3) exempt private f	oundation			85% test check he	ere and attach	<b>~</b> $\Box$
Ϊ	$\overline{}$	ection 4947(a)(1) no		-	Other taxable pri		tion	- 1	computation		
		market value of a			unting method X Ca		rual	E	If private foundation		
•		ear (from Part II, co			than (anacifu)		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		under section 507(b)		
			42,505.		column (d) must be on	cash hasis )		F	If the foundation is a under section 507(b)		. [
		Analysis of Rev		<del>1````</del>	Goranni (a) made 20 on	oden baeie )		ļ	dide: sector 307(b)	(d) Disbui	
	aiti	total of amounts in	columns (b), (c), and	d (d)	(a) Revenue and	(b) Net investment		(c)	Adjusted net	for cha	
_		may not necessari	y equal the amounts ge 11 of the instruct	s in	expenses per books	incom	ne l	ıncome		purpo	
	Ι.				30,000.					(cash ba	sis only)
	1		foundation is not requ	uired to	30,000.						
	2	Check  attac	h Sch B		2.		2.			ATCH	7
	3	Interest on savings an			13,772.	1	3,772.			ATCH	
	4	Dividends and inter			15,112.	<u> </u>	.5,112.			AICH	
<i>(</i> 0	5 a	Gross rents	• • • • • • • • •		-2 , 4			-	······································	~	<u>t</u>
လ	b	Net rental income or (	loss)		3,288.		i ir		`	<del></del> -	
≫s		Net gain or (loss) from Gross sales price for a			3,200.	in the second		28 6	· · · · · · · · · · · · · · · · · · ·	<u> </u>	· · · · · · · · · · · · · · · · · · ·
CANNEL	"	assets on line 6a	. 104	<u>,701</u> .			4 4 4			*	
$\mathbb{Z}_{2}$	7	Capital gain net inc	come (from Part IV,	line 2) .			3,288.		*		, {
<u> </u>	8	Net short-term cap	•		` ` ` ` ` ^	#					<u>``</u> ` ;
	9	Income modificatio Gross sales less return			\$ · · · · · · · · · · · · · · · · · · ·	, , , , , ,	- A T		SECFIVE	$D_{-}$	
SEP	10 a	and allowances · · ·						-	7202	181	
70	1	Less Cost of goods so			*		• (	<del></del>	orp 1 2 70	101	
<del></del>	c	Gross profit or (loss				<u> </u>			SEP 1 2 21	1/2 /2	
တ	11	Other income (atta			47,062	ļ	7 062			IK	
20	12	Total. Add lines 1 t			47,062		17,062.	<u> </u>	OGDEN.	11 J	<del></del>
2	13	Compensation of office			0.			<del> </del>	- المسلم		
ø:	14	Other employee sa	•								
S	15	Pension plans, em				ļ		ļ			
Del	16a	Legal fees (attach s Accounting fees (a	schedule)		5,650	ļ	E CEO	-			
Onerating and Administrative Expenses	b	Accounting fees (a	ittach schedule) ATC	. н. з		<b>!</b>	5,650.		0.		0
<u>.</u>	C	Other professional			2,072	1	2,072.	1		ļ. <u> </u>	
į	17	Interest		٠		ļ ···		<u> </u>			
· ·	18	Taxes (attach schedul	e) (see page 14 of the ins	structions)	82	<u> </u>	82.	<u> </u>			
	19	Depreciation (attac	ch schedule) and de	epletion .						<u> </u>	. ,
4	20	Occupancy						1	· · · · · ·		
2	21	Travel, conference	s, and meetings					ļ			
7	22	Printing and public	ations								
<u>.</u>	23	Other expenses (a	ttach schedule)					ļ			
<u>.</u>	24	Total operating ar	nd administrative ex	xpenses.				1			
٩	2	Add lines 13 throu	gh 23		7,804		7,804.		0.		0
C	25	Contributions, gifts	_		33,400						33,400
	26	Total expenses and dist			41,204		7,804.		0.		33,400
-	27	Subtract line 26 fr									
	1	Excess of revenue over		nents	5,858	4					(
	1	Net investment in					9,258				
		Adjusted net inco									,

For Paperwork Reduction Act Notice, see page 30 of the instructions.

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\*ATCH 4 JSA \*\* ATCH 5

Form 990-PF (2010)

K375 (RB)

PAGE 1

20-3975643 Form 990-RF (2010) Page 2

Do-	AΠ	Attached schedules and amounts in the	Beginning of year	En	d of	year		
Par	U III	Balance Sheets description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	$\neg \Gamma$	(c) Fa	ır Market Val	lue
1	1 C	Cash - non-interest-bearing	6,102.	6,82	7.			827.
1		Savings and temporary cash investments [	11,304.	7,12	2.		7,	122.
:	3 /2	Accounts receivable						_
	L	.ess allowance for doubtful accounts						
4		Pledges receivable						
1	L	ess: allowance for doubtful accounts						
1 :		Grants receivable						
1.		Receivables due from officers, directors, trustees, and other						
	d	disqualified persons (attach schedule) (see page 15 of the instructions)						
;	7 (	Other notes and loans receivable (attach schedule)						
		ess allowance for doubtful accounts						
<u>,</u>		nventories for sale or use						
ssets		Prepaid expenses and deferred charges						
Y 1		nvestments - U S and state government obligations (attach schedule)						
		nvestments - corporate stock (attach schedule) ATCH 6	415,260.	424,53	0.		428,	556
		nvestments - corporate bonds (attach schedule)		·				
1	1	Investments - land, buildings,						
	j	and equipment basis  Less accumulated depreciation  (attach schedule)						
1	2 i	nvestments - mortgage loans						
1	3 1	Invastments other (attach echodule)			$\top$			
1	4 1	Land, buildings, and						
	į	equipment basis Less accumulated depreciation (attach schedule)						
1	5 (	Other assets (describe						
1		Total assets (to be completed by all filers - see the						
		instructions Also, see page 1, item l)		438,47	9.		442,	505
1	7 /	Accounts payable and accrued expenses						<u>;</u>
1		Grants payable						}
g 1	9 1	Deferred revenue						
₫ 2		Loans from officers, directors, trustees, and other disqualified persons					13.00 Byte	34
Liabilities	1 1	Mortgages and other notes payable (attach schedule)						į
<b>□</b>  2	2	Other liabilities (describe  )					· , , ? * '	- }
						.4		
_ 2	3	Total liabilities (add lines 17 through 22)			0.	,		`;
		Foundations that follow SFAS 117, check here 🕨 🔃					***	
		and complete lines 24 through 26 and lines 30 and 31.				*	<b>(*</b>	, m.j.c
89 2	4	Unrestricted					•	;
E 2	5	Temporarily restricted				*		ì
8 2	6	Permanently restricted						į
Fund Balances		Foundations that do not follow SFAS 117,					• '	1
Ī		check here and complete lines 27 through 31. $\blacktriangleright X$	400 000					:
0 2	?7	Capital stock, trust principal, or current funds	432,666.	438,47	9.			
wı		Paid-in or capital surplus, or land, bldg , and equipment fund	<u> </u>	· · · · · · · · · · · · · · · · · · ·			,	í
SS		Retained earnings, accumulated income, endowment, or other funds	0.		0.		₹	1 1
# 3		Total net assets or fund balances (see page 17 of the	430 665	400 :-	,		,	
ž		instructions)	432,666.	438,47	9.		*	
3		Total liabilities and net assets/fund balances (see page 17	436 555	455	,			
4		of the instructions)	432,666.	438,47	9.			
		Analysis of Changes in Net Assets or Fund	· · · · · · · · · · · · · · · · · · ·	<del></del>			<del></del>	
		net assets or fund balances at beginning of year - Part					400	~~~
		of-year figure reported on prior year's return)			1			666
2 E	Enter	amount from Part I, line 27a			2		5,	,858
3 (	Othe	r increases not included in line 2 (itemize)			3			
4 <i>F</i>	Add I	ines 1, 2, and 3 eases not included in line 2 (itemize)  ATTACH			4		438,	,524
					5		430	45
6 7	<b>Total</b>	net assets or fund balances at end of year (line 4 minus	line 5) - Part II, column (b	), line 30	6		438,	,479

Part IV Capital Gains	and Losses for Tax on Inve	estment Income			
• • • • • • • • • • • • • • • • • • • •	d describe the kind(s) of property sold (e brick warehouse, or common stock, 200 s	- ·	(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
a SEE PART IV SCH			D DONIGION		
b					
С					
d					
е					
(e) Gross sales pnce	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) mini	
a				<del> </del>	
b					
С					<del> </del>
<u>d</u>			<del> </del>		<del></del>
e Occupation and a feet and a		d by the foundation on 10/04/60	<u> </u>		
Complete only for assets	showing gain in column (h) and owner			Gains (Col (h) g (k), but not less	
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	001	Losses (from co	
		gy, a say	<u> </u>		
<u>a</u> h	· · · · · · · · · · · · · · · · · · ·		<del>                                     </del>		
<u>b</u>				·····	
d d			1	. <u></u>	
e					
	( If	gain, also enter in Part I, line 7			
Capital gain net income o		(loss), enter -0- in Part I, line 7	2		3,288.
Net short-term capital gai	n or (loss) as defined in sections 12		'		
	I, line 8, column (c) (see pages 13				
If (loss) enter_0 in Dort I	line 8	· ·	3		
ii (1033), eliter -0- III Falt I,	, III IC O, ,	<u> </u>	1 0		
Part V Qualification For optional use by domest	Under Section 4940(e) for Re	duced Tax on Net Investment		ome )	
Part V Qualification For optional use by domest f section 4940(d)(2) applies Was the foundation liable fo	Under Section 4940(e) for Recic private foundations subject to the section 4942 tax on the distributions.	duced Tax on Net Investment e section 4940(a) tax on net inves outable amount of any year in the	tment inco	_	Yes X N
Part V Qualification For optional use by domest f section 4940(d)(2) applies Was the foundation liable fo f "Yes," the foundation does	Under Section 4940(e) for Recall to private foundations subject to the section 4942 tax on the distribution of qualify under section 4940(e)	duced Tax on Net Investment e section 4940(a) tax on net inves  outable amount of any year in the Do not complete this part	tment inco	od?	
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Part V Qualification For optional use by domest  f section 4940(d)(2) applies  Was the foundation liable fo f "Yes," the foundation does 1 Enter the appropriate an (a) Base period years Calendar year (or tax year beginning in)  2009 2008 2007 2006 2005  7 Total of line 1, column (of Average distribution ration number of years the foundation  4 Enter the net value of no	Under Section 4940(e) for Recic private foundations subject to the section 4942 tax on the distrikts not qualify under section 4940(e) nount in each column for each year (b)  Adjusted qualifying distributions  33,226.  37,427.  26,052.  25,909.  0.  d) of for the 5-year base period - dividing dation has been in existence if less	duced Tax on Net Investment e section 4940(a) tax on net invest  putable amount of any year in the Do not complete this part r, see page 18 of the instructions (c) Net value of nonchantable-use assets 427,749. 402,506. 489,904. 509,374. 386,836.  e the total on line 2 by 5, or by the s than 5 years  om Part X, line 5	base periodopefore mal	king any entries (d) Distribution	ratio (c)) 0.077676 0.092985 0.053178 0.050864 0.000000 0.274703 0.054941 459,260.
Part V Qualification For optional use by domest f section 4940(d)(2) applies Was the foundation liable fo f "Yes," the foundation does 1 Enter the appropriate an (a) Base penod years Calendar year (or tax year beginning in) 2009 2008 2007 2006 2005  7 Total of line 1, column (of Average distribution ration number of years the foundation fully line 4 by line 3	Under Section 4940(e) for Recic private foundations subject to the section 4942 tax on the district on the section 4942 tax on the district on the qualify under section 4940(e) hount in each column for each year (b)  Adjusted qualifying distributions  33,226.  37,427.  26,052.  25,909.  0.  d)  of or the 5-year base period - dividing a distribution has been in existence if less concharitable-use assets for 2010 from	duced Tax on Net Investment e section 4940(a) tax on net invest  putable amount of any year in the Do not complete this part r, see page 18 of the instructions in (c) Net value of nonchantable-use assets 427,749. 402,506. 489,904. 509,374. 386,836.  e the total on line 2 by 5, or by the sthan 5 years  om Part X, line 5	base periodopefore mai	king any entries (d) Distribution	ratio (c)) 0.077676 0.092985 0.053178 0.050864 0.000000 0.274703 0.054941 459,260. 25,232.
Part V Qualification For optional use by domest f section 4940(d)(2) applies Was the foundation liable fo f "Yes," the foundation does 1 Enter the appropriate an (a) Base penod years Calendar year (or tax year beginning in) 2009 2008 2007 2006 2005  2 Total of line 1, column (of Average distribution ration number of years the foundation of the foundati	Under Section 4940(e) for Recic private foundations subject to the section 4942 tax on the distribution of the section 4942 tax on the distribution of the section 4940(e) mount in each column for each year (b)  Adjusted qualifying distributions 33, 226. 37, 427. 26, 052. 25, 909. 0.  d)	duced Tax on Net Investment e section 4940(a) tax on net invest  putable amount of any year in the Do not complete this part r, see page 18 of the instructions in (c) Net value of nonchantable-use assets 427,749. 402,506. 489,904. 509,374. 386,836.  e the total on line 2 by 5, or by the sthan 5 years  om Part X, line 5	base periodopefore mai	king any entries (d) Distribution	ratio (c)) 0.077676 0.092985 0.053178 0.050864 0.000000 0.274703 0.054941 459,260.
Part V Qualification For optional use by domest f section 4940(d)(2) applies Was the foundation liable fo f "Yes," the foundation does 1 Enter the appropriate an (a) Base penod years Calendar year (or tax year beginning in) 2009 2008 2007 2006 2005  Total of line 1, column (of Average distribution ration number of years the foundation does Enter the net value of not Multiply line 4 by line 3 Enter 1% of net investm	Under Section 4940(e) for Recic private foundations subject to the section 4942 tax on the distrikts not qualify under section 4940(e) nount in each column for each year (b)  Adjusted qualifying distributions  33,226.  37,427.  26,052.  25,909.  0.  d) of for the 5-year base period - dividing distribution has been in existence if less on charitable-use assets for 2010 from the column for each year base period - dividing distributions.	duced Tax on Net Investment e section 4940(a) tax on net invest  putable amount of any year in the Do not complete this part r, see page 18 of the instructions I  (c) Net value of nonchantable-use assets  427,749.  402,506.  489,904.  509,374.  386,836.  e the total on line 2 by 5, or by the s than 5 years  om Part X, line 5	base periodefore males.	king any entries (d) Distribution	ratio (c)) 0.077676 0.092985 0.053178 0.050864 0.000000 0.274703 0.054941 459,260. 25,232.
Part V Qualification (For optional use by domest If section 4940(d)(2) applies Was the foundation liable fo If "Yes," the foundation does 1 Enter the appropriate an (a) Base penod years Calendar year (or tax year beginning in) 2009 2008 2007 2006 2005  2 Total of line 1, column (of 3 Average distribution ration number of years the foundation of the fou	Under Section 4940(e) for Recic private foundations subject to the section 4942 tax on the district on the section 4942 tax on the district on the qualify under section 4940(e) hount in each column for each year (b)  Adjusted qualifying distributions  33,226.  37,427.  26,052.  25,909.  0.  d)  of or the 5-year base period - dividing a distribution has been in existence if less concharitable-use assets for 2010 from	duced Tax on Net Investment e section 4940(a) tax on net invest  putable amount of any year in the Do not complete this part r, see page 18 of the instructions I  (c) Net value of nonchantable-use assets  427,749.  402,506.  489,904.  509,374.  386,836.  e the total on line 2 by 5, or by the s than 5 years  om Part X, line 5	base periodefore males.	king any entries (d) Distribution	0.077676 0.077676 0.092985 0.053178 0.050864 0.000000 0.274703 0.054941 459,260. 25,232.
Part V Qualification (For optional use by domest If section 4940(d)(2) applies Was the foundation liable fo If "Yes," the foundation does 1 Enter the appropriate an (a) Base penod years Calendar year (or tax year beginning in) 2009 2008 2007 2006 2005  2 Total of line 1, column (of a Average distribution ration number of years the foundation of years the foundation of the secondary of the secon	Under Section 4940(e) for Recic private foundations subject to the section 4942 tax on the distrikts not qualify under section 4940(e) nount in each column for each year (b)  Adjusted qualifying distributions  33,226.  37,427.  26,052.  25,909.  of for the 5-year base period - dividendation has been in existence if less on charitable-use assets for 2010 from the foundation (1% of Part I, line 27b).	duced Tax on Net Investment e section 4940(a) tax on net invest  outable amount of any year in the Do not complete this part r, see page 18 of the instructions I  (c) Net value of nonchantable-use assets  427, 749.  402, 506.  489, 904.  509, 374.  386, 836.  e the total on line 2 by 5, or by the s than 5 years  om Part X, line 5	base periode base	king any entries (d) Distribution	70 (c)) 0.077676 0.092985 0.053178 0.050864 0.000000 0.274703 0.054941 459,260. 25,232. 93.
Part V Qualification (For optional use by domest If section 4940(d)(2) applies Was the foundation liable fo If "Yes," the foundation does 1 Enter the appropriate an (a) Base penod years Calendar year (or tax year beginning in) 2009 2008 2007 2006 2005  2 Total of line 1, column (of 3 Average distribution ration number of years the foundation of years the foundation of the period of the perio	Under Section 4940(e) for Recic private foundations subject to the section 4942 tax on the distrikts not qualify under section 4940(e) nount in each column for each year (b)  Adjusted qualifying distributions  33,226.  37,427.  26,052.  25,909.  0.  d) of for the 5-year base period - dividing distribution has been in existence if less on charitable-use assets for 2010 from the column for each year base period - dividing distributions.	duced Tax on Net Investment e section 4940(a) tax on net invest  outable amount of any year in the Do not complete this part r, see page 18 of the instructions I  (c) Net value of nonchantable-use assets  427, 749.  402, 506.  489, 904.  509, 374.  386, 836.  e the total on line 2 by 5, or by the s than 5 years  om Part X, line 5	base periode p	king any entries (d) Distribution (col (b) divided b	70 (c)) 0.077676 0.092985 0.053178 0.050864 0.000000 0.274703 0.054941 459,260. 25,232. 93. 25,325.

<u>Par</u>	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	page 18 of	the ins	tructio	ns)
1 a	Exempt operating foundations described in section 4940(d)(2), check here				
	Date of ruling or determination letter (attach copy of ruling letter if necessary - see instructions)				
	Domestic foundations that meet the section 4940(e) requirements in Part V, check	1			93.
	here X and enter 1% of Part I, line 27b				1
С	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-)	2			<del></del>
3	Add lines 1 and 2	3			93.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4			0.
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0	5			93.
6	Credits/Payments.				
а	2010 estimated tax payments and 2009 overpayment credited to 2010 6a 89.				,
	Exempt foreign organizations-tax withheld at source	İ			į.
С	Tax paid with application for extension of time to file (Form 8868) 6c 300.				;
d	· · · · · · · · · · · · · · · · · · ·				
7	Total credits and payments. Add lines 6a through 6d	7		3	89.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10		2	96.
11	Enter the amount of line 10 to be Credited to 2011 estimated tax ▶ 296. Refunded ▶	11			
Par	t VII-A Statements Regarding Activities				
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did	ıt		Yes	No
	participate or intervene in any political campaign?		. 1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 1	9			
	of the 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 materia	is	,	ş	
	published or distributed by the foundation in connection with the activities		اسست		
С	Did the foundation file Form 1120-POL for this year?		. 1c		
d				,	
	(1) On the foundation >\$ (2) On foundation managers >\$		- ;	14.	
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax important	sed	1.	V (5	
	on foundation managers > \$			ļ	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		. 2	ļ <u> </u>	Х
	If "Yes," attach a detailed description of the activities				
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, article				
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			<u> </u>	X
4 a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		. 4a	<b> </b>	X
b	If "Yes," has it filed a tax return on Form 990-T for this year?		. 4b		v
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		. 5	<u> </u>	X
	If "Yes," attach the statement required by General Instruction T				
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either				, ,
	By language in the governing instrument, or				
	By state legislation that effectively amends the governing instrument so that no mandatory directions				ļ
	conflict with the state law remain in the governing instrument?		- 6_	X	<u> </u>
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	d Part XV	7	X	-
8 a		the			
	instructions) DE, FL,				37,
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney	ey General			/
	(or designate) of each state as required by General Instruction G? If "No," attach explanation		. <u>8b</u>	X	<del> </del>
9	is the foundation claiming status as a private operating foundation within the meaning of section 49				<u> </u>
	4942(j)(5) for calendar year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV	on page			١,,
	27)? If "Yes," complete Part XIV		. 9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule li	•			l ,
	names and addresses	<u> </u>	. 10	<u>L</u>	X

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art	VII-A Statements Regarding Activities (continued)			
1 A	at any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	•	11		X
•	of the foundation acquire a direct or indirect interest in any applicable insurance contract before			
	August 17, 2008?	12		X
	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	-	X	
	N/A			
7 .	The books are in care of ► JAMI SALTZMAN-LEVY  Located at ►11209 NW 51ST STREET CORAL SPRINGS, FL  ZIP+4 ► 33076			
5 5	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		▶	П
	and enter the amount of tax-exempt interest received or accrued during the year		-	_
	At any time during calendar year 2010, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		X
	See page 20 of the instructions for exceptions and filing requirements for Form TD F 90-22 1 If "Yes," enter			
	he name of the foreign country			: ;
	VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
			Yes	No
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	ļ		
	During the year did the foundation (either directly or indirectly)  1) Figure in the sale or exchange, or leaving of property with a disqualified person?  Yes X No	ļ		. {
	1) Engage in the sale of exchange, or leasing of property with a disqualified person?			
(	2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?		,	
	disquaimed person	ĺ		
	3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disquaimed person?	Ì		
(	(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)?	1 -		
(	(6) Agree to pay money or property to a government official? (Exception, Check "No" if the	1	-	
	foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, it terminating within 30 days / · · · · · · · · · · · · · · · · · ·	1.7.4.3	135	
	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	سسديث		
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see page 22 of the instructions)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here		1 .	,
	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?	. <u>1c</u>		<del> </del>
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private	1. 0		
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))	6.2	1 2 2	ŀ
	At the end of tax year 2010, did the foundation have any undistributed income (lines 6d and  6e. Part XIII) for tax year(s) heginning before 2010?	٠,٠,٠	· [ ;	1
	oo, Fait Ally for tax jourte, asgiring solote 2010			1
	If "Yes," list the years			1
	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			ļ
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to	-	-	·
	all years listed, answer "No" and attach statement - see page 22 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		٠.	
	<b>&gt;</b>			
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			1
	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 if the	ļ		
	foundation had excess business holdings in 2010 )	. 3b	<del> </del>	
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	. 4a		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its		_	<del> </del>
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2010? .			X
		Form 9	90-PF	(2010

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art VII-B Statements Regarding Activities for	r Which Form 47	20 May Be Requi	red (continued)		
<ul> <li>5a During the year did the foundation pay or incur any amount (1) Carry on propaganda, or otherwise attempt to influent (2) Influence the outcome of any specific public election directly or indirectly, any voter registration drive?</li> <li>(3) Provide a grant to an individual for travel, study, or oth (4) Provide a grant to an organization other than a charm section 509(a)(1), (2), or (3), or section 4940(d)(2)? (5) Provide for any purpose other than religious, charital</li> </ul>	nt to  ce legislation (section (see section 4955), of the similar purposes? table, etc., organization see page 22 of the insole, scientific, literary, and	4945(e))? to carry on,  n described in tructions)	Yes X N Yes X N Yes X N Yes X N	0	
purposes, or for the prevention of cruelty to children of bif any answer is "Yes" to 5a(1)-(5), did any of the trans Regulations section 53 4945 or in a current notice regard Organizations relying on a current notice regarding disast c. If the answer is "Yes" to question 5a(4), does the foundable because it maintained expenditure responsibility for the g.	actions fail to qualify ing disaster assistanc er assistance check h ation claim exemption f	under the exceptions e (see page 22 of the i ere	described in instructions)?	5 b	
If "Yes," attach the statement required by Regulations sec on a personal benefit contract?b Did the foundation, during the year, pay premiums, directly the foundation, during the year, pay premiums, directly the foundation, during the year, pay premiums, directly the foundation, during the year, pay premiums, directly the foundation of the year, pay premiums, directly the foundation of the year, pay premiums, directly the year, pay pay pay pay pay pay pay pay pay pay	tion 53 4945-5(d) firectly or indirectly, to	pay premiums	Yes XN		a adams for the Manager
If "Yes" to 6b, file Form 8870  7 a At any time during the tax year, was the foundation a pa b If "Yes," did the foundation receive any proceeds or have  Part VIII Information About Officers, Directors	e any net income attri	outable to the transaction	n? <u></u>	7b	
and Contractors					
1 List all officers, directors, trustees, foundation m (a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (lf not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Exper	ise account, llowances
ATTACHMENT 8		0.	0		
2 Compensation of five highest-paid employees (o	ther than those inc	luded on line 1 - se	e page 23 of the in	structions)	
If none, enter "NONE."		т	(d) Contributions to		
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	employee benefit plans and deferred compensation		nse account, illowances
NONE	1				
NONE				-	
NUNE	-				
NUNE					

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Part VIII	Information About Officers, Directors, Trustees, Foundation Manager and Contractors (continued)	s, Highly Paid Employ	ees,
3 Five hi	ghest-paid independent contractors for professional services (see page 23 c	of the instructions). If no	ne, enter "NONE."
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		<del></del>	
<del></del>	· <del></del>		
<b>-</b>			
Total number	er of others receiving over \$50,000 for professional services	<u> ▶</u>	NONE_
Don't IV A	Commence of Direct Charitable Activities		
Part IX-A	Summary of Direct Charitable Activities		
List the foun	dation's four largest direct charitable activities during the tax year. Include relevant statistical inform	ation such as the number of	_
	and other beneficianes served, conferences convened, research papers produced, etc		Expenses
1 N/A			
'- <u></u>		<b></b>	
~			
2			
3			
4			
			l.
			İ
Part IX-B	Summary of Program-Related Investments (see page 24 of the instruc	ctions)	
	two largest program-related investments made by the foundation during the tax year on lines 1 and 2		Amount
1 NONE	, , , , , , , , , , , , , , , , , , , ,		
'_====			
2			
			<u> </u>
•	gram-related investments. See page 24 of the instructions		
3 NONE			
Total. Add	ines 1 through 3		

Pa	Minimum Investment Return (All domestic foundations must complete this part. Foreign see page 24 of the instructions.)	gn foundation	S,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.		
	purposes		
а	Average monthly fair market value of securities	1a	437,674.
b		1b	28,580.
С	Fair market value of all other assets (see page 25 of the instructions)	1c	0.
d	Total (add lines 1a, b, and c)	1d	466,254.
е			•
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Outstand has Office the 4d	3	466,254.
4	Cash deemed held for charitable activities Enter 1 1/2 % of line 3 (for greater amount, see page 25 of		·
		4	6,994.
5	the instructions)  Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	459,260.
6	Minimum investment return. Enter 5% of line 5	6	22,963.
Pa	art XI Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) priv foundations and certain foreign organizations check here ▶ ☐ and do not complete this	ate operating	
1	Minimum investment return from Part X, line 6	1	22,963.
2 a	Tax on investment income for 2010 from Part VI, line 5 2a 93	. 30	
b		7	
С		2c	93.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	22,870.
4	Recoveries of amounts treated as qualifying distributions		
5			22,870.
6	Add lines 3 and 4  Deduction from distributable amount (see page 25 of the instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1 · · · · · · · · · · · · · · · · · ·	.   7	22,870.
P	art XII Qualifying Distributions (see page 25 of the instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes	-	
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	33,400.
b			0.
2	Program-related investments - total from Part IX-B  Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	0.
3	Amounts set aside for specific charitable projects that satisfy the	Ĩ	
а		1 4 1	0.
b			0.
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	33,400.
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)	l _ k	93.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	33,307.
•	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when c	alculating whe	ther the foundation
	qualifies for the section 4940(e) reduction of tax in those years		

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_	1 990-PF (2010)			975643	Page 9
Pa	rt XIII Undistributed Income (see page	e 26 of the instructio	ns)		
1	Distributable amount for 2010 from Part XI,	(a) Corpus	(b) Years prior to 2009	(c) 2009	(d) 2010 22,870.
2 a	Undistributed income, if any, as of the end of 2010 Enter amount for 2009 only				22,670.
ь 3	Total for pnor years 20 08 20 07 20 06 Excess distributions carryover, if any, to 2010				
a b c	From 2005				
e	From 2009				
f 4	Total of lines 3a through e	13,449.			
а	Applied to 2009, but not more than line 2a		,		
b	Applied to undistributed income of prior years (Election required - see page 26 of the instructions)			-	-
С	Treated as distributions out of corpus (Election required - see page 26 of the instructions)				- ,
d	Applied to 2010 distributable amount	· 4		83° , 1 - 1 - 3 , 5 -	22,870.
е	Remaining amount distributed out of corpus	10,530.	₹\$2.5 <u>6</u> 5 ₹ <b>\$</b> {	19 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	111
5	Excess distributions carryover applied to 2010 (If an amount appears in column (d), the same amount must be shown in column (a))				
6	Enter the net total of each column as indicated below:	And to the second contract of the second			
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	23,979.			
þ	Prior years' undistributed income Subtract line 4b from line 2b				
С	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.				
d	Subtract line 6c from line 6b Taxable amount - see page 27 of the instructions				
е	Undistributed income for 2009 Subtract line 4a from line 2a Taxable amount - see page 27 of the instructions				
f	Undistributed income for 2010 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2011.				
7	Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see page 27 of the instructions)				
8	Excess distributions carryover from 2005 not applied on line 5 or line 7 (see page 27 of the instructions)		, , ,		
9	Excess distributions carryover to 2011.	02 070			
	Subtract lines 7 and 8 from line 6a	23,979.	<u> </u>		
10	Analysis of line 9	, ş	* * * * * * * * * * * * * * * * * * * *		
a	Excess from 2006		, ,		
b	Excess from 2007		* ·	•	
C	Excess from 2008 1, 462.				
d	Excess from 2009 11,987.				· · · · · · · · · · · · · · · · · · ·
e	Excess from 2010 10,530.	,		,	, , <u>, , , , , , , , , , , , , , , , , </u>

Form 990-PF (2010)

d Any restrictions or lin

factors

Any submission deadlines

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

Form 990-PF (2010)

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

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment										
Recipient	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 (home or business)	or substantial contributor	recipient	CONTIDUION							
a Paid during the year										
ATTACHMENT 9										
			:							
			,							
		}								
	ļ									
		ļ								
Total			▶ 3a	33,400.						
<b>b</b> Approved for future payment										
		1								
Total										
<u> </u>										

er gross a	amounts unless otherwise indicated	Unrela	ted business income	Excluded by	section 512, 513, or 514	(e) Related or exempt function income
` D	service revenue.	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See page 28 of the instructions)
_						
				-		
	<del></del>					
						<del></del>
· —				<del></del>		
	and contracts from government agencies					
	ship dues and assessments					
	n savings and temporary cash investments	<u> </u>		14	13,774.	
	Is and interest from securities					-
	al income or (loss) from real estate			-		
	-financed property					
	debt-financed property					
	I income or (loss) from personal property					
	vestment income	F		18	3,288.	
•	loss) from sales of assets other than inventory			10	3,200.	
	ome or (loss) from special events					
Fross pr	rofit or (loss) from sales of inventory					
ther re	venue a					
·						
; <u> </u>						
i						
,						
Subtotal	Add columns (b), (d), and (e)	L	<u> </u>	χ ,	17,062.	
						17.0
Total. Ad e worksl irt XVI-	dd line 12, columns (b), (d), and (e) heet in line 13 instructions on page 29  -B Relationship of Activities	to verify calc	culations.)	xempt Purp		17,06
Total. Ad e worksl	dd line 12, columns (b), (d), and (e) heet in line 13 instructions on page 29	to verify calcos to the Ac	complishment of E	Exempt Purp	ooses e) of Part XVI-A contrib	17,06
Fotal. And works!  rt XVI- me No.  ▼	dd line 12, columns (b), (d), and (e) heet in line 13 instructions on page 29  Relationship of Activities  Explain below how each activity accomplishment of the foundations.	to verify calcos to the Ac	complishment of E	Exempt Purp	ooses e) of Part XVI-A contrib	17,0
Total. And works!  rt XVI- me No.	dd line 12, columns (b), (d), and (e) heet in line 13 instructions on page 29  Relationship of Activities  Explain below how each activit accomplishment of the foundationstructions )	to verify calcos to the Ac	complishment of E	Exempt Purp	ooses e) of Part XVI-A contrib	17,00
Fotal. And works!  rt XVI- me No.  ▼	dd line 12, columns (b), (d), and (e) heet in line 13 instructions on page 29  Relationship of Activities  Explain below how each activit accomplishment of the foundationstructions )	to verify calcos to the Ac	complishment of E	Exempt Purp	ooses e) of Part XVI-A contrib	17,00
rotal. And works!  rt XVI- ne No.  ▼	dd line 12, columns (b), (d), and (e) heet in line 13 instructions on page 29  Relationship of Activities  Explain below how each activit accomplishment of the foundationstructions )	to verify calcos to the Ac	complishment of E	Exempt Purp	ooses e) of Part XVI-A contrib	17,00
rotal. And works!  rt XVI- ne No.  ▼	dd line 12, columns (b), (d), and (e) heet in line 13 instructions on page 29  Relationship of Activities  Explain below how each activit accomplishment of the foundationstructions )	to verify calcos to the Ac	complishment of E	Exempt Purp	ooses e) of Part XVI-A contrib	17,00
rotal. And works!  rt XVI- ne No.  ▼	dd line 12, columns (b), (d), and (e) heet in line 13 instructions on page 29  Relationship of Activities  Explain below how each activit accomplishment of the foundationstructions )	to verify calcos to the Ac	complishment of E	Exempt Purp	ooses e) of Part XVI-A contrib	17,00
Total. Ac worksl rt XVI- ne No. ▼	dd line 12, columns (b), (d), and (e) heet in line 13 instructions on page 29  Relationship of Activities  Explain below how each activit accomplishment of the foundationstructions )	to verify calcos to the Ac	complishment of E	Exempt Purp	ooses e) of Part XVI-A contrib	17,00
otal. Ac worksl rt XVI- se No.	dd line 12, columns (b), (d), and (e) heet in line 13 instructions on page 29  Relationship of Activities  Explain below how each activit accomplishment of the foundationstructions )	to verify calcos to the Ac	complishment of E	Exempt Purp	ooses e) of Part XVI-A contrib	17,00
otal. Ac worksl rt XVI- se No.	dd line 12, columns (b), (d), and (e) heet in line 13 instructions on page 29  Relationship of Activities  Explain below how each activit accomplishment of the foundationstructions )	to verify calcos to the Ac	complishment of E	Exempt Purp	ooses e) of Part XVI-A contrib	17,0
otal. Ac worksl rt XVI- e No.	dd line 12, columns (b), (d), and (e) heet in line 13 instructions on page 29  Relationship of Activities  Explain below how each activit accomplishment of the foundationstructions )	to verify calcos to the Ac	complishment of E	Exempt Purp	ooses e) of Part XVI-A contrib	17,0
otal. Adworks worksl rt XVI- e No.	dd line 12, columns (b), (d), and (e) heet in line 13 instructions on page 29  Relationship of Activities  Explain below how each activit accomplishment of the foundationstructions )	to verify calcos to the Ac	complishment of E	Exempt Purp	ooses e) of Part XVI-A contrib	17,0
otal. Ac worksl rt XVI- e No.	dd line 12, columns (b), (d), and (e) heet in line 13 instructions on page 29  Relationship of Activities  Explain below how each activit accomplishment of the foundationstructions )	to verify calcos to the Ac	complishment of E	Exempt Purp	ooses e) of Part XVI-A contrib	17,00
rotal. And works!  rt XVI- ne No.  ▼	dd line 12, columns (b), (d), and (e) heet in line 13 instructions on page 29  Relationship of Activities  Explain below how each activit accomplishment of the foundationstructions )	to verify calcos to the Ac	complishment of E	Exempt Purp	ooses e) of Part XVI-A contrib	17,0
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rotal. And works! rt XVI- ne No. ▼	dd line 12, columns (b), (d), and (e) heet in line 13 instructions on page 29  Relationship of Activities  Explain below how each activit accomplishment of the foundationstructions )	to verify calcos to the Ac	complishment of E	Exempt Purp	ooses e) of Part XVI-A contrib	17,0
rotal. And works! rt XVI- ne No. ▼	dd line 12, columns (b), (d), and (e) heet in line 13 instructions on page 29  Relationship of Activities  Explain below how each activit accomplishment of the foundationstructions )	to verify calcos to the Ac	complishment of E	Exempt Purp	ooses e) of Part XVI-A contrib	17,00
Total. Ac worksl rt XVI- ne No. ▼	dd line 12, columns (b), (d), and (e) heet in line 13 instructions on page 29  Relationship of Activities  Explain below how each activit accomplishment of the foundationstructions )	to verify calcos to the Ac	complishment of E	Exempt Purp	ooses e) of Part XVI-A contrib	17,0
Fotal. And works!  rt XVI- me No.  ▼	dd line 12, columns (b), (d), and (e) heet in line 13 instructions on page 29  Relationship of Activities  Explain below how each activit accomplishment of the foundationstructions )	to verify calcos to the Ac	complishment of E	Exempt Purp	ooses e) of Part XVI-A contrib	17,0
Fotal. And works!  rt XVI- me No.  ▼	dd line 12, columns (b), (d), and (e) heet in line 13 instructions on page 29  Relationship of Activities  Explain below how each activit accomplishment of the foundationstructions )	to verify calcos to the Ac	complishment of E	Exempt Purp	ooses e) of Part XVI-A contrib	17,0
Fotal. And works!  rt XVI- me No.  ▼	dd line 12, columns (b), (d), and (e) heet in line 13 instructions on page 29  Relationship of Activities  Explain below how each activit accomplishment of the foundationstructions )	to verify calcos to the Ac	complishment of E	Exempt Purp	ooses e) of Part XVI-A contrib	17,0
Total. And works! Int XVI- The No.	dd line 12, columns (b), (d), and (e) heet in line 13 instructions on page 29  Relationship of Activities  Explain below how each activit accomplishment of the foundationstructions )	to verify calcos to the Ac	complishment of E	Exempt Purp	ooses e) of Part XVI-A contrib	17,00
Total. And works!  rt XVI- me No.	dd line 12, columns (b), (d), and (e) heet in line 13 instructions on page 29  Relationship of Activities  Explain below how each activit accomplishment of the foundationstructions )	to verify calcos to the Ac	complishment of E	Exempt Purp	ooses e) of Part XVI-A contrib	17,00
Total. And works! Int XVI- The No.	dd line 12, columns (b), (d), and (e) heet in line 13 instructions on page 29  Relationship of Activities  Explain below how each activit accomplishment of the foundationstructions )	to verify calcos to the Ac	complishment of E	Exempt Purp	ooses e) of Part XVI-A contrib	17,00
Total. Ace works! Irt XVI. ne No.	dd line 12, columns (b), (d), and (e) heet in line 13 instructions on page 29  Relationship of Activities  Explain below how each activit accomplishment of the foundationstructions )	to verify calcos to the Ac	complishment of E	Exempt Purp	ooses e) of Part XVI-A contrib	17,00

Form 990-PF (20	010)				2	20-3975643		Pa	ge <b>13</b>
Part XVII			ansfers To a	nd Transac	ctions	and Relationships With	Noncl	narit	able
	on 501(c) of the C					iny other organization describe section 527, relating to political		Yes	No
a Transfer	s from the reporting f	oundation to a nor	ncharitable exempt o	organization of.					
(1) Cash	١						. 1a(1)		X
(2) Othe	er assets						. 1a(2)		X
b Other tra							4544		X
									X
							1 1		X
									Х
									X
									Х
c Sharing	of facilities, equipmen	nt, mailing lists, oth	ner assets, or paid e	mployees			. 1c	<u> </u>	<u> </u>
						Column (b) should always sh			
						If the foundation received le			
						of the goods, other assets,			
(a) Line no	(b) Amount involved N/A	(c) Name of n	onchantable exempt o	organization	N/A	scription of transfers, transactions, and	maning arra	ingeme	
-	N/A	<del></del>			11711	-			
		-							
		<u> </u>							
		<u> </u>		- · · · · · · · · · · · · · · · · · · ·					
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-		+			-	· · ·			
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	foundation directly ed in section 501(c) o					nore tax-exempt organizations		es [	X No
	" complete the follows	•		(-),					
	(a) Name of organizati		(b) Type	of organization		(c) Description of rela	tionship		
								_	
				· · · -					
Sign Unde	er penalties of perjury, I	declare that I have complete Declaration	examined this return, of preparer (other tha	including accom n taxpayer or fidu	ipanying so ciary) is bas	chedules and statements, and to the b sed on all information of which prepare	est of my has any ki	knowle nowled	dge and ge
Here L	/ June Al	Izman-l	LLUX	<u> </u>	15112	Presiden	! 		
_	ignature of officer or trus		U	Date		Title			
5	Print/Type preparer	's name	Preparer's sig	nature	1	Date Check	PTIN		
Paid	RONALD J. BE	CKMAN	X/C.A)	1/51/h		8/30/2015 self-employ		1793	345
Preparer	1 11111 0 1101110			.c.		Firm's EIN ▶ 23	-2628	118	
Use Only	1			ITE 3300					
	P	HILADELPHIA	A, PA		1	9103   Phone no 215	-665-		
							Form 9	90-PI	F (2010

## Schedule B

Department of the Treasury Internal Revenue Service

**Schedule of Contributors** 

OMB No 1545-0047

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

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

Name of the organization		Employer identification number
EDWARD AND JAMI LEVY FO	OUNDATION	20-3975643
Organization type (check one)		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)( ) (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private for	undation
[	527 political organization	
Form 990-PF [	X 501(c)(3) exempt private foundation	
]	4947(a)(1) nonexempt charitable trust treated as a private foundate	ation
(	501(c)(3) taxable private foundation	
Note. Only a section 501(c)(7), (8 instructions	red by the <b>General Rule</b> or a <b>Special Rule.</b> ), or (10) organization can check boxes for both the General Rule and a	Special Rule. See
General Rule		
	g Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 contributor. Complete Parts I and II	or more (in money or
Special Rules		
sections 509(a)(1) and	organization filing Form 990 or 990-EZ that met the 331/3% support to 170(b)(1)(A)(vi), and received from any one contributor, during the year (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 99	ar, a contribution of the
the year, aggregate cor	(8), or (10) organization filing Form 990 or 990-EZ that received from atributions of more than \$1,000 for use <i>exclusively</i> for religious, charita or the prevention of cruelty to children or animals. Complete Parts I, II, a	ble, scientific, literary, or
the year, contributions to aggregate to more than year for an exclusively reapplies to this organization.	(8), or (10) organization filing Form 990 or 990-EZ that received from or use <i>exclusively</i> for religious, charitable, etc., purposes, but these constants of the second \$1,000. If this box is checked, enter here the total contributions that deligious, charitable, etc., purpose. Do not complete any of the parts unlition because it received nonexclusively religious, charitable, etc., continuous contributions.	ontributions did not were received during the ess the <b>General Rule</b> ributions of \$5,000 or more
Caution. An organization that is n	ot covered by the General Rule and/or the Special Rules does not file	Schedule B (Form 990,
	nswer "No" on Part IV, line 2 of its Form 990, or check the box on line fy that it does not meet the filing requirements of Schedule B (Form 99	
For Paperwork Reduction Act Notice, se	e the Instructions for Form 990, 990-EZ, or 990-PF. Schedul	e B (Form 990, 990-EZ, or 990-PF) (20

Name of organization EDWARD AND JAMI LEVY FOUNDATION

Employer identification number 20-3975643

Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1-	EDWARD & JAMI LEVY  11209 NW 51ST STREET  CORAL SPRINGS, FL 33076	\$30,000.	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 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 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)

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NA CONTRACTOR OF THE CONTRACTO	EXPENSES INVESTMENT		2. 2
		DESCRIPTION	INTEREST INCOME

TOTAL

PAGE 17

8/24/2012

87737M K375

ATTACHMENT 1

SECURITIES	
FROM	
INTEREST	
AND	
DIVIDENDS	
ı	
. PART	
990PE	
FORM	

NET INVESTMENT INCOME	13,772.	13,772.
REVENUE AND EXPENSES PER BOOKS	13,772.	13,772.
		TOTAL
DESCRIPTION	DIVIDEND INCOME	

## FORM 990PF, PART I - ACCOUNTING FEES

CHARITABLE <u>PURPOSES</u>		0
ADJUSTED NET INCOME	-	0.
NET INVESTMENT INCOME	5,650.	5,650.
REVENUE AND EXPENSES PER BOOKS	5,650.	5,650.
		TOTALS
DESCRIPTION	ACCOUNTING FEES	

# FORM 990PF, PART I - OTHER PROFESSIONAL FEES

	NET	INVESTMENT	INCOME	1,847.	225.	2,072.
REVENUE	AND	EXPENSES	PER BOOKS	1,847.	225.	2,072.
			DESCRIPTION	INVESTMENT ADVISORY FEES	OTHER PROFESSIONAL FEES	TOTALS

K375 (RB)

- TAXES PART I FORM 990PF,

	82.	
INCOME	PER BOOKS	
INVESTME	EXPENSES	
NET	AND	
	KHANDE.	

DESCRIPTION

FOREIGN TAX

ENI

82.

TOTALS

82.

ATTACHMENT 5

- CORPORATE STOCK PART II FORM 990PF,

DESCRIPTION

FIDELITY INVESTMENTS

BOOK VALUE ENDING

ENDING

424,530.

428,556.

TOTALS

424,530.

428,556.

PAGE 22

FORM 990PF, PART III - OTHER DECREASES IN NET WORTH OR FUND BALANCES

DESCRIPTION

AMOUNT

OTHER DECREASE IN FUND BALANCE

45.

TOTAL

45.

· ·	
ထ	$\ $
ATTACHMENT	

FORM 990PE, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES	CERS, DIRECTORS, AND TRUSTEES		ATTACH	ATTACHMENT 8
NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
JAMI SALTZMAN-LEVY C/O JAMI SALTZMAN-LEVY 11209 NW 51ST STREET CORAL SPRINGS, FL 33076	PRESIDENT/TREASURER	.0	.0	.0
EDWARD LEVY C/O JAMI SALTZMAN-LEVY 11209 NW 51ST STREET CORAL SPRINGS, FL 33076	VICE PRESIDENT	.0	.0	.0
	GRAND TOTALS	• 0	0.	0

ω

## FORM 990PE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE XEAR

	AMOUNT	2,500.	5,000.	2,500.	10,000.	7,500.	2,500.
	PURPOSE OF GRANT OR CONTRIBUTION	RELIGIOUS PURPOSES	CHARITABLE PURPOSES	PARKINSON'S DISEASE RESEARCH	RELIGIOUS PURPOSES	RELIGIOUS PURPOSES	EDUCATIONAL PURPOSES
RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR	FOUNDATION STATUS OF RECIPIENT	NONE IRC 501(C)(3)	NONE IRC 501(C)(3)	NONE IRC 501(C)(3)	NONE IRC 501(C)(3)	NONE IRC 501(C)(3)	NONE IRC 501(C)(3)
	RECIPIENT NAME AND ADDRESS	OLD YORK ROAD TEMPLE BETH AM 971 OLD YORK ROAD ABINGTON, PA 19001	ALBERT EINSTEIN HEALTHCARE NETWORK 5501 OLD YORK ROAD PHILADELPHIA, PA 19141	MICHAEL J FOX FOUNDATION GRAND CENTRAL STATION, PO BOX 4777 NEW YORK, NY 10163	JEWISH FEDERATION OF BROWARD COUNTY 5890 SOUTH PINE ISLAND ROAD DAVIE, FL 33328	JEWISH NATIONAL FUND 42 EAST 69TH STREET NEW YORK, NY 10021	TULANE UNIVERSITY 3439 PRYTANIA STREET, SUITE 200 NEW ORLEANS, LA 70115

V 10-8.3

9:33:35 AM

87737M K375 8/24/2012

20-3975643

FORM 990PE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR

FOUNDATION STATUS OF RECIPIENT

PURPOSE OF GRANT OR CONTRIBUTION

EDUCATIONAL PURPOSES

3,400.

AMOUNT

ATTACHMENT 9 (CONT'D)

150 SOUTH WARNER ROAD SUITE 156

AAMGA UNIVERSITY

KING OF PRUSSIA, PA 19406

RECIPIENT NAME AND ADDRESS

IRC 501(C)(3)

NONE

TOTAL CONTRIBUTIONS PAID

33,400.

PAGE 26 ATTACHMENT 9

K375 (RB)

V 10-8.3

9:33:35 AM

87737M K375 8/24/2012

## SCHEDULE D (Form 1041)

**Capital Gains and Losses** 

Schedule D (Form 1041) (also for Form 5227 or Form 990-T, if applicable).

▶ Attach to Form 1041, Form 5227, or Form 990-T. See the Instructions for

OMB No 1545-0092

Internal Revenue Service Name of estate or trust

Department of the Treasury

EDWARD AND JAMI LEVY FOUNDATION

Employer identification number

20-3975643 Note: Form 5227 filers need to complete only Parts I and II Short-Term Capital Gains and Losses - Assets Held One Year or Less (f) Gain or (loss) for (a) Description of property (b) Date acquired (c) Date sold (e) Cost or other basis the entire year Subtract (e) from (d) (d) Sales price (Example 100 shares 7% preferred of "Z" Co) (mo, day, yr) (mo, day, yr) (see instructions) 1a b Enter the short-term gain or (loss), if any, from Schedule D-1, line 1b 128. 1b Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824 2 2 Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts 3 Short-term capital loss carryover Enter the amount, if any, from line 9 of the 2009 Capital Loss 4 Net short-term gain or (loss). Combine lines 1a through 4 in column (f) Enter here and on line 13, 128. Long-Term Capital Gains and Losses - Assets Held More Than One Year (f) Gain or (loss) for (e) Cost or other basis (a) Description of property (Example 100 shares 7% preferred of "Z" Co ) (b) Date acquired (c) Date sold (d) Sales price the entire year (mo , day, yr ) (mo, day, yr) (see instructions) Subtract (e) from (d) 6a 2,963. **b** Enter the long-term gain or (loss), if any, from Schedule D-1, line 6b 6 b Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824 7 Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts 8 197. 9 Gain from Form 4797, Part I 10 10 Long-term capital loss carryover Enter the amount, if any, from line 14 of the 2009 Capital Loss 11 Net long-term gain or (loss). Combine lines 6a through 11 in column (f) Enter here and on line 14a, 3,160. column (3) on the back.

For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

Schedule D (Form 1041) 2010

	: . ule D (Form 1041) 2010				Page 2
Par		(1) Benefic		(2) Estate's or trust's	(3) Total
13	Net short-term gain or (loss)	, , , , , ,	,		128.
14	Net long-term gain or (loss):				
		1			3,160.
	Total for year				
	======================================	-			3,288.
	Total net gain or (loss). Combine lines 13 and 14a	T Part I Inc.	4a) If lines	14a and 15 column	·
to Pa	rt V, and <b>do not</b> complete Part IV If line 15, column (3), is a net loss, complete Part IV	and the Capital	Loss Cam	vover Worksheet, as i	necessary
Par	t IV Capital Loss Limitation				
16	Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, Part I, I				,
a	The loss on line 15, column (3) or b \$3,000			16 (	elete the Capital Lace
Canv	i: If the loss on line 15, column (3), is more than \$3,000, <b>or</b> if Form 1041, page 1, iii <b>over Worksheet</b> on page 7 of the instructions to figure your capital loss carryover	ne 22 (or Form	990-1, III	e 34), is a loss, comp	oiete tile Capital Dos
Par			•		
	n 1041 filers. Complete this part only if both lines 14a and 15 in column (	2) are gains	or an am	ount is entered in	Part I or Part II and
	e is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is more that		o. a a		
	tion: Skip this part and complete the worksheet on page 8 of the instructions				
	ther line 14b, col (2) or line 14c, col. (2) is more than zero, or				
<ul> <li>B</li> </ul>	oth Form 1041, line 2b(1), and Form 4952, line 4g are more than zero				
	n 990-T trusts. Complete this part only if both lines 14a and 15 are gain				
	orm 990-T, and Form 990-T, line 34, is more than zero. Skip this part and	d complete t	he works	heet on page 8 of	f the instructions if
eithe	er line 14b, col (2) or line 14c, col (2) is more than zero				
17	Enter taxable income from Form 1041, line 22 (or Form 990-T, line 34)	. 17			
18	Enter the smaller of line 14a or 15 in column (2)			ž,*	
	but not less than zero	'		, ,	
19	Enter the estate's or trust's qualified dividends	7, 1		*(.25	
	from Form 1041, line 2b(2) (or enter the qualified				
	dividends included in income in Part I of Form 990-T) 19			أعمر	
20	Add lines 18 and 19				
21	If the estate or trust is filing Form 4952, enter the				
- '	amount from line 4g, otherwise, enter -0 > 21			* 3	
22	Subtract line 21 from line 20. If zero or less, enter -0-	22			
23	Subtract line 22 from line 17 If zero or less, enter -0-	23			
23	Subtract line 22 from line 17 in zero of less, enter -0-	23			
24	Enter the smaller of the amount on line 17 or \$2,300	24			
24	Is the amount on line 23 equal to or more than the amount on line 24?	24			
25	Yes. Skip lines 25 and 26, go to line 27 and check the "No" box				
		25		•	
20	No. Enter the amount from line 23	· · · <del></del>		<del></del> 1	
26	Subtract line 25 from line 24	20		<del></del>	
27	Are the amounts on lines 22 and 26 the same?	107			
	Yes. Skip lines 27 thru 30; go to line 31 No. Enter the smaller of line 17 or line 22	27		· · · · · · · · · · · · · · · · · · ·	
28	Enter the amount from line 26 (If line 26 is blank, enter -0-)	28			
		1			
29	Subtract line 28 from line 27	29			
30	Multiply line 29 by 15% ( 15)				
31	Figure the tax on the amount on line 23 Use the 2010 Tax Rate Sc				
	(see the Schedule Ginstructions in the instructions for Form 1041)			31	<u>.</u>
32	Add lines 30 and 31				
33	Figure the tax on the amount on line 17 Use the 2010 Tax Rate Sc				
	(see the Schedule Ginstructions in the instructions for Form 1041)			33	

Schedule D (Form 1041) 2010

Tax on all taxable income. Enter the smaller of line 32 or line 33 here and on Form 1041, Schedule

## **SCHEDULE D-1** (Form 1041)

**Continuation Sheet for Schedule D** (Form 1041)

► See instructions for Schedule D (Form 1041). ▶ Attach to Schedule D to list additional transactions for lines 1a and 6a. OMB No 1545-0092

Department of the Treasury Internal Revenue Service Name of estate or trust

EDWARD AND JAMI LEVY FOUNDATION

Employer identification number 20-3975643

EDWARD AND JAMI LEVY FOUND	ATION			20-3975643	
Part I Short-Term Capital Gains an	d Losses - Asset	s Held One Year	or Less		
(a) Description of property (Example 100 sh 7% preferred of "Z" Co)	(b) Date acquired (mo , day, yr )	(c) Date sold (mo , day, yr )	(d) Sales pnce (see page 4 of the instructions)	(e) Cost or other basis (see page 4 of the instructions)	(f) Gain or (loss) Subtract (e) from (d)
a 295.567 SHS KEELEY SMALL CAP VALUE	01/12/2010	12/31/2010	7,380.	7,252.	128
				_	
	<del> </del>				
	1 ,			<u> </u>	

For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

Schedule D-1 (Form 1041) 2010

1b Total. Combine the amounts in column (f) Enter here and on Schedule D, line 1b . . . . .

128.

Page 2

Name of estate or trust as shown on Form 1041 Do not enter name and employer identification number if shown on the other side

Employer identification number

(a) Description of property (Example 100 sh 7% preferred of "Z" Co )	(b) Date acquired (mo , day, yr )	(c) Date sold (mo , day, yr )	(d) Sales price (see page 4 of the instructions)	(e) Cost or other basis (see page 4 of the instructions)	(f) Gain or (loss) Subtract (e) from (d
208 SHS ISHARES BARCLAYS	VARIOUS	03/30/2011	21,869.	20,906.	96
217.628 SHS CALAMOS GROWTH CL A	09/19/2008	12/31/2010	11,617.	10,000.	1,61
488 SHS ISHARES TR RUSSELL	03/13/2000	12/31/2010	11,017.	10,000.	1,01
1000 VALUE	VARIOUS	12/31/2010	31,648.	32,931.	-1,28
269 SHS ISHARES TR RUSSELL 1000 GROWTH	01/31/2006	12/31/2010	15,395.	14,017.	1,37
664.566 SHWS KEELEY SMALL					
CAP VALUE	VARIOUS	12/31/2010	16,595.	16,307.	28
<u> </u>					
	<u> </u>				
	<u> </u>				L

JSA 0F1222 1 000 Schedule D-1 (Form 1041) 2010

EDWARD AND JAMI LEVY FOUNDATION FORM 990-PF - PART IV

Kind of Property		INS AND LOSSES FOR TAX ON INVEST  Description					Date acquired	Date sold
price less allo	eciation wed/ wable	Cost or other basis	FMV as of 12/31/69	Adj basis as of 12/31/69	Excess of FMV over adj basis		Gain or (loss)	
		TOTAL CAPIT	AL GAIN DI	STRIBUTIONS			197.	
21,869.		208 SHS ISH PROPERTY TY 20,906.				Р	VARIOUS	03/30/201
		295.567 SHS		MALL CAP VAL	UE	Р	01/12/2010	12/31/201
7,380.		7,252. 217.628 SHS	S CALAMOS (	GROWTH CL A		P	128. 09/19/2008	12/31/203
11,617.		PROPERTY TY	YPE: SECUR	ITIES			1,617.	
31,648.		488 SHS ISH PROPERTY T' 32,931.		JSSELL 1000 ITIES	VALUE	P	VARIOUS -1,283.	12/31/20
15 205		PROPERTY T		JSSELL 1000 ITIES	GROWTH	P		12/31/20
15,395.		I		SMALL CAP VA	LUE	P	1,378. VARIOUS	12/31/20
16,595.		PROPERTY T	YPE: SECUR	ITIES			288.	
TAL GAIN(LOSS)			• • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •		3,288.	

Department of the Treasury

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

OMB No 1545-1709

temal Revenue	Service File a	separate ap	plication for each return.			
If you are	filing for an Automatic 3-Month Extension,	complete o	nly Part I and check th	is box	<u>▶ X</u>	
If you are	filing for an Additional (Not Automatic) 3-M	onth Exten	sion, complete only Pa	art II (on page 2 of this form)		
o not comp	lete Part II unless you have already been gra	inted an aut	omatic 3-month extens	sion on a previously filed Form 8868	į.	
	tion (- Ele). Very seen also transpolly file Form	0000 4 400	u mood o 2			
	ling (e-file). You can electronically file Form					
	n required to file Form 990-T), or an addition uest an extension of time to file any of the					
	Fransfers Associated With Certain Persona					
	For more details on the electronic filing of the					
	tomatic 3-Month Extension of Time. Or			<del></del>		
	n required to file Form 990-T and requesting		<del></del>			
•	, , ,	-		•	<b>.</b> $\Box$	
Part Fonly			· · · · · · · · · · · · · · · · · · ·	5-m-70044	🏲 🔛	
	porations (including 1120-C filers), partnersh	nips, REIVIIC	s, and trusts must use i	•		
o file income	e tax returns.		<del></del>	Enter filer's identifying number, see		
Гуре ог	Name of exempt organization or other filer, see in	nstructions		Employer identification number (	(EIN) or	
orint						
	EDWARD AND JAMI LEVY FOUNDAT		<u> </u>	X 20-3975643	<del></del>	
ile by the ue date for	Number, street, and room or suite no. If a P.O. bo	ox, see instruc	ctions.	Social security number (SSN)		
ling your	C/O JAMI SALTZMAN-LEVY			<u>                                     </u>		
etum See nstructions	City, town or post office, state, and ZIP code Fo	r a foreign ad	dress, see instructions			
istrucuons	CORAL SPRINGS, FL 33076					
nter the Re	turn code for the return that this application	is for (file a	separate application for	or each return)	. 04	
Application		Return	Application		Return	
s For		Code	ls For		Code	
orm 990		01	Form 990-T (corpora	tion)	07	
orm 990-BL		02	Form 1041-A	poradon) (		
orm 990-E2	······································	01	Form 4720	, 0		
orm 990-E2	<del></del>	04	Form 5227			
		<del> </del>		Form 6069		
	(sec 401(a) or 408(a) trust)	05			11	
-orm 990-1	(trust other than above)	06	Form 8870		12	
	INST CAIMENAN	TOWN				
ine book	s are in the care of   JAMI SALTZMAN	- LEVI	·			
Telephone		<del></del> -	FAX No ▶		( <del></del>	
	anization does not have an office or place of				▶ 📖	
	or a Group Return, enter the organization's fo	_		· · · <del></del>	ns is	
or the whole	e group, check this box ▶ 🔛	If it is for pa	art of the group, check	this box ▶ and att	.ach	
a list with the	e names and EINs of all members the extens	sion is for				
1 I reque	est an automatic 3-month (6 months for a co	rporation re	equired to file Form 99	0-T) extension of time		
until	07/15 , 20_12 , to file the	exempt or	ganization return for th	e organization named above. The e	xtension is	
for the	organization's return for					
▶□	calendar year 20 or					
► X	tax year beginning 12/	01 . 201	0 , and ending	11/30 . 20 11		
٠ ـ	, , , , , , , , , , , , , , , , , , , ,			,,,		
2 If the ta	ax year entered in line 1 is for less than 12 r	months che	ck reason Initial	return Final return		
	change in accounting period					
	mange in accounting period					
3a If this	application is for Form 990-BL, 990-PF, 9	200_T 4720	or 6069 enter the	tentative tax less any		
		25U-1, 4/2U	o, or occo, enter the	· · · · · · · · · · · · · · · · · · ·	389.	
	undable credits. See instructions	4700	- 6060	3a \$	309.	
	application is for Form 990-PF, 990-T		•		0.0	
	ted tax payments made Include any prior ye				89.	
	e due. Subtract line 3b from line 3a Include		nent with this form, if re			
	onic Federal Tax Payment System) See instr			3c \$	300.	
-	you are going to make an electronic fund	withdrawa	I with this Form 8868	s, see Form 8453-EO and Form 8	879-EO for	
payment ins	tructions					

orm 8868 <b>\</b> Re	ev 1-2012)			•	Page 2	
	e filing for an Additional (Not Automatic) 3-Mo	nth Extens	sion, complete only Part II	and check this box	▶ X	
•	complete Part II if you have already been gran					
	e filing for an Automatic 3-Month Extension, c					
Part II	Additional (Not Automatic) 3-Month Ex	tension o	f Time. Only file the origin	nal (no copies needed).		
			En	ter filer's identifying number, see	instructions	
	Name of exempt organization or other filer, see in	structions		Employer identification number (EIN) or		
ype or						
rint	EDWARD AND JAMI LEVY FOUNDAT	X 20-3975643				
	Number, street, and room or suite no. If a P.O. box	Social security number (SSN)				
ile by the ue date for	C/O JAMI SALTZMAN-LEVY					
ling your	City, town or post office, state, and ZIP code For	a foreign ad	dress, see instructions			
etum See nstructions	CORAL SPRINGS, FL 33076					
	Return code for the return that this application	is for (file a	separate application for ea	ch return)	. 0 4	
pplication			Application	,	Return	
s For		Code	is For		Code	
orm 990		01	,	*		
orm 990-E		02	Form 1041-A		08	
orm 990-E		01	Form 4720	·	09	
Form 990-F		04	Form 5227		10	
		05	Form 6069		11	
	T (sec_401(a) or 408(a) trust) T (trust other than above)	06	Form 8870		12	
	not complete Part II if you were not already			sion on a previously filed For	<del></del>	
	oks are in the care of ► JAMI SALTZMAN-		in automatic o-month exten	islanding previously made of		
			FAX No ▶			
•	one No >			na boy	_	
	ganization does not have an office or place of				nis is	
IT THIS IS	for a Group Return, enter the organization's fo	it it in for n	art of the group, shock this	box   and at		
	ole group, check this box		art of the group, check this i	box Dand at	lacii a	
	e names and EINs of all members the extension		1	0/15 , 20 12	<del></del>	
4 I requ	uest an additional 3-month extension of time u	Intii			20.11	
	calendar year, or other tax year beginn				20 11	
	e tax year entered in line 5 is for less than 12 n	nonths, che	eck reason. Initial re	turn Final return		
	Change in accounting period in detail why you need the extension AN Al	מסדייד מס	AL TIME IS NEEDED	TN ORDER TO EILE		
	omplete And Accurate tax returns		AD TIME IS NOBBED	IN ONDER TO TIBE		
A CC	OMPLETE AND ACCORATE TAX RETURN	<u> </u>				
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0 - 15 46.	a application in for Form 000 BL 000 BF 0	OD T 472	O or 6060 onter the ten	tative tay less any		
	is application is for Form 990-BL, 990-PF, 9	90°1, 472	o, or ocos, enter the ten	1 1	89.	
	efundable credits. See instructions application is for Form 990-PF, 990-T,	4720 -	v 6060 enter any refun	8a \$		
	nated tax payments made include any p	rior year	overpayment allowed as	F	89.	
	unt paid previously with Form 8868		and the Alice English of the second	8b \$		
	nce Due. Subtract line 8b from line 8a Include		ment with this form, if requi	· I I	0	
(Elec	ctronic Federal Tax Payment System) See instr		und ha namminded for P	8c \$	0.	
	•		ust be completed for F	•		
	ties of perjury, I declare that I have examined this form		ccompanying schedules and stater	nents, and to the best of my knowle	dge and belief,	
IL IS True, COTT	rect, and complete, and that I am authorized to prepare this I	IOI III			/ ,	
	116 1 1/12/1		- AA	~ ~ ~ ~ ~ //	7/16	
Signature >	1/1/1/1/1/1/m		Title V	Date > //		
				Form 886	8 (Rev 1-2012)	