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

2012

OMB No. 1545-0052

	Internal	nent of t Revenu	the Treasury ue Service	Note. The fo	undation n	nay be able to use a copy of the	s return to satisfy state rep	orting requirements.		
•	For ca	lenda	ar year 2012, or				, and ending	,		
	mrin	TEM	PERT FAMII	V FOIRIDATE	ON			A Employer identification 14-1808971		
		e the instructions)								
			VIEW AVENU D, CT 0690							
			•					C If exemption applicati	on is pending, check here.	
	- 0			The deal reduces		Indial salus of a form	nor public charity	, ,,		
	G Ch	теск а	all that apply:	Initial return	}	Initial return of a forr	ner public charity	D 1 Foreign organizations,	, check here ▶	
				Address cha	nge	Name change			meeting the 85% test, check	
	H (Check	type of organiz			1(c)(3) exempt private t	oundation	here and attach computation		
		∏S∉	ection 4947(a)(1)) nonexempt cha	aritable	trust Other taxable			status was terminated	
	I	air ma	rket value of all ass	ets at end of year	J Acc	counting method XC	ash Accrual	under section 507(b)(1)(A), check here	
	>		Part II, column (c), lir		(Part I	Other (specify) , column (d) must be oi	ระยะ คระยะ >		a 60-month termination (1)(B), check here	
	Part	<u> </u>	nalysis of R	, 038.	(Farti	1			1	
	er, and	<u>, </u>	xpenses (The	e total of amoun	ts ın	(a) Revenue and expenses per books (b) Net investment		it (C) Adjusted net	t (d) Disbursements for charitable	
		С	olumns (b), (c), arıly equal the a	and (d) may no	t neces-	expenses per books	income	11.001110	purposes (cash	
			ariiy equal ille a see instructions)		iii (a)				basis only)	
,		T 1		, grants, etc, received		25,000.				
		2		foundn is not req to a vings and tempo		C TO THE TANK OF	的 安康 發起	(為) 權 (權) ()		
		3	cash investme						A Marine Anna Anna Anna Anna Anna Anna Anna An	
		4		erest from securities		10,393.	10,39	3. 10,39		
ത		_	a Gross rents b Net rental income		•••		2 1 2 2 4 1 2 4 1 4 3 4 3 4 3 4 3 4 3 4 3 4 3 4 3 4 3			
2013	R	1	or (loss)		n line 10	E 41 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2				
eo	E		b Gross sales price f		,000.			2017		
87	V E N U E	7	assets on line 6a Capital gain net in	come (from Part IV, I				a a tribute policy and to	the little the little	
		8	Net short-term	n capital gain .			Sample of			
MAY		10	Income modifi a Gross sales less returns and	ications . I	• • • • • • •		h in the same			
		1	allowances							
SCANNED			b Less: Cost of goods sold				广西 华第,增	· 神· 神· · · · · · · · · · · · · · · · ·		
Z			c Gross profit/(loss		_			1.+4		
Z		11	Other income	•		1 522				
8		12	Total. Add line	SEE STATEM	ENI I	1,532. 36,925.	10,39	3. 10,39	3. 2. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3.	
Ŵ		13		officers, directors, trus	tees, etc .	0.	10,33	3. 10,33	9.1 3.2 7	
		14	Other employee sa	alaries and wages .						
			Pension plans		efits					
	A	16	 a Legal fees (attach b Accounting fees (attach 		 Ст 2	1 000				
	Đ M I		c Other prof fees (a		. 312	1,800.				
	O N	17	Interest							
	O P E R A T	18	Taxes (attach schedule)	(see instrs). SEE.	STM3	127.				
	RRAA	19	Depreciation (attach (attach			<u> </u>	RECEIVED		
	1 1	20	sch) and depli Occupancy						10	
	N V	21	Travel, confer		tıngs	751.	181	2012	N N	
	A E N X D P	1	Printing and p				21	WAT ZW CUIS	i i i	
	Ė	123		es (attach sched SEE STATEM		6,725.		C 3036118 8 550	<u> </u>	
	N S		Total operation	and administ	rative	0,723.		Captin, UT		
	E S	1 -	expenses, Ado	d lines 13 throug	ıh 23	9,403.				
			Contributions, gift			27,700.	<u> </u>		27,700.	
		26	Total expense Add lines 24 a	nd 25	ments.	37,103.		0.	0. 27,700.	
		27	Subtract line 2	26 from line 12:		, ,				
			a Excess of rev and disburser	enue over exper	nses	-178.				
					er -0-1	-176.	10,39	3.		
	b Net investment income (if negative, enter -0-). C Adjusted net income (if negative, enter -0-).					. =,1		10,39		
•	BAA			ction Act Notice				TEEA0504L 12/23/12	Form 990-PF (2012)	

Other increases not included in line 2 (itemize) . Add lines 1, 2, and 3 4 179,689 Decreases not included in line 2 (itemize) 5 5 6 179,689. 6

Par		osses for Tax on Investmen					
	(a) List and describe 2-story brick warehouse	the kind(s) of property sold (e.g., ree; or common stock, 200 shares ML	eal estate, C Company)	(b) How acqu P — Purcha D — Donati	se	(C) Date acquired (month, day, year)	(d) Date sold (month, day, year)
1 a	ROYAL FOCUS TRUST I	NC.		P		10/14/03	11/15/12
b	CORTS BOEING CO			P		4/14/04	3/12/12
						<u> </u>	
e	(e) Gross sales price	(f) Depreciation allowed	(g) Cost or other bas	ie I		(h) Gain or	(loss)
	(e) Gross sales price	(or allowable)	plus expense of sal	e		(e) plus (f) m	
a	25,000.		2	5,000.			0.
- t				5,000.			0.
C	:						
C							
е							
		ng gain in column (h) and owned by	y the foundation on 12/31/69 (k) Excess of column		n:	(i) Gains (Coli ain minus column (l	
	(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	over column (j), if a			in -0-) or Losses (fr	
a							0.
				<u> </u>			0.
e				,			
2	Capital gain net income or (net	capital loss). If gain, also If (loss), en	enter in Part I, line 7 ter -0- in Part I, line 7		2		0.
3	Net short-term capital gain or (loss) as defined in sections 1222(5)	and (6):				
	If gain, also enter in Part I, line	8, column (c) (see instructions). If	(loss), enter -0-		3		0.
Par	toVal Qualification Under	Section 4940(e) for Reduce	d Tax on Net Investme	ent Incon	ne	L	
Was	es,' the foundation does not qual	tion 4942 tax on the distributable ar ify under section 4940(e). Do not con each column for each year; see the	mplete this part			···· Yes	No
	(a)	(b)	(c)	g any entre		(d)	
	Base period years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of noncharitable-use ass	sets	(colu	Distribution imn (b) divided	
	2011						
	2010						
	2009						
	2008						
	2007		<u> </u>				_
2	Total of line 1, column (d)				2		
3		e 5-year base period – divide the to has been in existence if less than !			3		
4	Enter the net value of nonchari	table-use assets for 2012 from Part	X, line 5		4		
5	Multiply line 4 by line 3				5	·	
6	Enter 1% of net investment inc	ome (1% of Part I, line 27b)			6		
7							
		•		f			····
8	, , ,	om Part XII, line 4		_			
	If line 8 is equal to or greater the Part VI instructions.	nan line 7, check the box in Part VI,	line 1b, and complete that	part using a	a 1%	tax rate. See t	ne

Forn	990-PF (2012) THE LEMPERT FAMILY FOUNDATION	L4-1808	971	Page 4
Pai	tyling Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 –	see instru	ictions)	
18	Exempt operating foundations described in section 4940(d)(2), check here			200
	Date of ruling or determination letter: (attach copy of letter if necessary — see instrs)			
ŀ	Domestic foundations that meet the section 4940(e) requirements in Part V,	1		208.
	check here . ► and enter 1% of Part I, line 27b			
•	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, column (b)		To the second second	C 10 10 10 10 10 10 10 10 10 10 10 10 10
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable			•
	foundations only Others enter -0-)	. 2		0.
3	Add lines 1 and 2	. 3		208.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0			0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5		208.
6	Credits/Payments: 2012 estimated tax pmts and 2011 overpayment credited to 2012			
			4.53	
	Exempt foreign organizations — tax withheld at source			
	Backup withholding erroneously withheld			The Colombia
	Total credits and payments. Add lines 6a through 6d	7		0.
8	Enter any penalty for underpayment of estimated tax. Check here	8		
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	▶ 9		208.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	- 1 - 1 -		
11	Enter the amount of line 10 to be: Credited to 2013 estimated tax	► 11 h		
	tyli As Statements Regarding Activities			
2-2-3 1			7 Y	res No
1 8	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did participate or intervene in any political campaign?		1 a	X
	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see 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 materials published or distributed by the foundation in connection with the activities.			
	Did the foundation file Form 1120-POL for this year?		1 c	X
•	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			
	(1) On the foundation \$\begin{align*} \\$ 0. (2) On foundation managers\\$ Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on			
•	foundation managers > \$ 0.		\$1	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2	Х
	If 'Yes,' attach a detailed description of the activities.		8-27/17	14 M
2	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles			
3	of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the change:	s	. 3	X
4 a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		. 4a	X
t	olf 'Yes,' has it filed a tax return on Form 990-T for this year?		4b	N/A
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5	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 that conflict with the state law remain in the governing instrument?	:t 	6	X
7	Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV			x
	Enter the states to which the foundation reports or with which it is registered (see instructions)			
	NY	-	_	
t	of the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If 'No,' attach explanation		8ь	X
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3 for calendar year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If 'Yes,' com	3) or 4942(plete Part	j)(5) XIV9	X
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their name and addresses.		10	х
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	m 990-PF (2012) THE LEMPERT FAMILY FOUNDATION	14-180897	1	Р	age
Ŗā	The Statements Regarding Activities (continued)		, ,		
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes', attach schedule (see instructions)		11		х
	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person advisory privileges? If 'Yes,' attach statement (see instructions).		12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption website address	application?	13	X	
14	The books are in care of ► NORBERT LEMPERT Telephone in	10.			
	Located at > 16 FAIRVIEW AVENUE, STAMFORD, CT ZIP + 4 >	06902			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here		Ņ/Ā	_ _	\Box
	and enter the amount of tax-exempt interest received or accrued during the year	► 15			N/I
16	At any time during calendar year 2012, did the foundation have an interest in or a signature or other authority ov bank, securities, or other financial account in a foreign country?	er a	16	Yes	No X
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If 'Yes,' enter the name of the foreign country ►				
Pa	itaVII:BM Statements Regarding Activities for Which Form 4720 May Be Required				
<u> </u>	File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.			Yes	No
1	a During the year did the foundation (either directly or indirectly):				
•	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes X No			25.4
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	Yes X No		3.5	
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	→	, i.e.	Ť.	S
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?				
	(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)?	Yes X No			
	(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)	Yes X No			
	b If any answer is 'Yes' to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?.		1 b	N	/A
	Organizations relying on a current notice regarding disaster assistance check here	▶ ∐		75.4	
	c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2012?		1 c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):				
		Yes X No		, EQ	
	If 'Yes,' list the years 20 , 20 , 20 , 20				1
	b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a) all years listed, answer 'No' and attach statement — see instructions.)	(2) to	2 b	N	/A
	c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years he 20, 20, 20, 20	re.			
3	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?.	Yes X No			
	b If 'Yes,' did it have excess business holdings in 2012 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2012.)		3 b	N	/A
4	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4 a		Х
	b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2012?				X

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PartiVILB Statements Regarding Activit		า 4720 May Be Req	uired (continued)		
5 a During the year did the foundation pay or incu					in the second
(1) Carry on propaganda, or otherwise attemp	ot to influence legislatio	n (section 4945(e))?	Yes X	No No	
(2) Influence the outcome of any specific pub on, directly or indirectly, any voter registra(3) Provide a grant to an individual for travel,	lic election (see section ation drive?	1 4955); or to carry	Yes X	No .	
			Yes X	No .	,
(4) Provide a grant to an organization other the in section 509(a)(1), (2), or (3), or section	4940(d)(2)? (see instri	uctions)	Yes X	No No	
(5) Provide for any purpose other than religio educational purposes, or for the prevention	n of cruelty to children	or animals?		No No	
b If any answer is 'Yes' to 5a(1)-(5), did any of described in Regulations section 53.4945 or in (see instructions)?				5 b	N/A
Organizations relying on a current notice rega	rding disaster assistant	ce check here	▶ [_		
c If the answer is 'Yes' to question 5a(4), does tax because it maintained expenditure respon	sibility for the grant?		N/A. Yes]No	
If 'Yes,' attach the statement required by Reg				1, 4	
				No Sil	Real Asset
b Did the foundation, during the year, pay prem <i>If 'Yes' to 6b, file Form 8870</i> .			_	6 b	X
7a At any time during the tax year, was the found					. The state
b if 'Yes,' did the foundation receive any procee					
Partiville Information About Officers, D and Contractors				Employees	i ,
1 List all officers, directors, trustees, foundation				T	
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation		e account, llowances
NORBERT LEMPERT	PRESIDENT	0.	0.		0 .
16_FAIRVIEW_AVESTAMFORD, CT 06902	0				
NOREEN LEMPERT	DIRECTOR	0.	0.	 	0 .
16 FAIRVIEW AVENUE STAMFORD, CT 06902	0	.			
EDITH LEMPERT	DIRECTOR	0.	0.		0.
102-40 67TH DR. FOREST HILLS, NY 11375	0				
2 Compensation of five highest-paid employees (of	ther than those included				
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d)Contributions to employee benefit plans and deferred compensation	(e) Expense other al	e account, lowances
NONE					
		_ ,			
	;				
	!				
				ļ	
Total number of other employees paid over \$50,000	TEEA0306L 1		· · · · · · · · · · · · · · · · · · ·	Form 990 -	0 PF (2012)

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Form 990-PF (2012) THE LEMPERT FAMILY FOUNDATION [Partiville Information About Officers, Directors, Trustees, Foundation Managers, Higher and Contractors (continued)	14-1808971 Page 7 ghly Paid Employees,
3. Five highest-paid independent contractors for professional services (see instructions). If none, ente	r'NONE.'
(a) Name and address of each person paid more than \$50,000 (b) Type of serv	
NONE	
Total number of others receiving over \$50,000 for professional services	0
Partux: A Summary of Direct Charitable Activities	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number organizations and other beneficianes served, conferences convened, research papers produced, etc.	r of Expenses
1 N/A	
2	
3	
"	
4	
Partixes Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1	
<u>N/A</u>	
2	
All albert accounts colored in restaurate Control and	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3	
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Form 990-PF (2012) THE LEMPERT FAMILY FOUNDATION 14-1808971 F

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

b Average of monthly cash balances	0. 145,038. 2,176. 142,862. 7,143.
c Fair market value of all other assets (see instructions)	0. 145,038. 2,176. 142,862.
d Total (add lines 1a, b, and c)	0. 145,038. 2,176. 142,862.
d Total (add lines 1a, b, and c)	0. 145,038. 2,176. 142,862.
e Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	2,176. 42,862.
(attach detailed explanation)	2,176. 42,862.
2 Acquisition indebtedness applicable to line 1 assets	2,176. 42,862.
	2,176. 142,862.
	42,862.
4 Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions)	
5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	7,143.
6 Minimum investment return. Enter 5% of line 5 6	
6 Minimum investment return. Enter 5% of line 5	ns
and certain foreign organizations check here ► 🗓 and do not complete this part.)	
1 Minimum investment return from Part X, line 6	
2 a Tax on investment income for 2012 from Part VI, line 5 2a	_
b Income tax for 2012. (This does not include the tax from Part VI.)	
c Add lines 2a and 2b 2c	
3 Distributable amount before adjustments. Subtract line 2c from line 1	
4 Recoveries of amounts treated as qualifying distributions	
5 Add lines 3 and 4	
6 Deduction from distributable amount (see instructions)	
7 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	
	<u></u>
PartXIII Qualifying Distributions (see instructions)	
1 Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes:	
a Expenses, contributions, gifts, etc — total from Part I, column (d), line 26	27,700.
b Program-related investments — total from Part IX-B	
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:	
a Suitability test (prior IRS approval required)	
b Cash distribution test (attach the required schedule)	
4 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	27,700.
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 instructions)	
6 Adjusted qualifying distributions. Subtract line 5 from line 4 6	27,700.
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 4940(e) reduction of tax in those years.	

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	(a)	N/A (b)	(c)	(d)
`	Corpus	Years prior to 2011	(c) 2011	2012
1 Distributable amount for 2012 from Part XI, line 7				
2 Undistributed income, if any, as of the end of 2012:	<u></u>			
a Enter amount for 2011 only				
b Total for prior years: 20 , 20 , 20				
3 Excess distributions carryover, if any, to 2012:				
a From 2007				
b From 2008				
c From 2009				
d From 2010			,	
<u> </u>		1		
f Total of lines 3a through e	 	<u></u>		
XII, line 4: > \$				
a Applied to 2011, but not more than line 2a				
a Applied to 2011, but not more than line 2a			<u> </u>	
b Applied to undistributed income of prior years (Election required — see instructions)	<u> </u>		<u> </u>	
c Treated as distributions out of corpus (Election required – see instructions)				٠,
d Applied to 2012 distributable amount			,	
e Remaining amount distributed out of corpus.	<u></u>	<u> </u>		
5 Excess distributions carryover applied to 2012				
(If an amount appears in column (d), the		<u> </u>	<u> </u>	
same amount must be shown in column (a).)	i <u>t</u>			
	•			
6 Enter the net total of each column as indicated below:	i Še	•		* * * * * * * *
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5			, -	
·			<u> </u>	
b Prior years' undistributed income. Subtract line 4b from line 2b			, ,	
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed.				
d Subtract line 6c from line 6b. Taxable amount — see instructions				
e Undistributed income for 2011. Subtract line 4a from line 2a. Taxable amount — see instructions	*			
f Undistributed income for 2012. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2013				
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions).				
(
8 Excess distributions carryover from 2007 not applied on line 5 or line 7 (see instructions).				
9 Excess distributions carryover to 2013. Subtract lines 7 and 8 from line 6a				
10 Analysis of line 9.			1	
a Excess from 2008				
b Excess from 2009			1	
c Excess from 2010				
d Excess from 2011		!		
e Excess from 2012		1	•	

requests for funds. If the foundation makes gifts, grants, etc (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.
a The name, address, and telephone number or e-mail of the person to whom applications should be addressed:
SEE STATEMENT 6
b The form in which applications should be submitted and information and materials they should include:
SEE STATEMENT FOR LINE 2A
c Any submission deadlines:
SEE STATEMENT FOR LINE 2A
d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:
SEE STATEMENT FOR LINE 2A

a Paid during the year SEE STATEMENT 7	tal	Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Total	TATEMENT 7		substantial contributor	recipient		
Total	tal	a Paid during the year	substantial contributor	recipient	CONTIDUCTOR	
Total	tal					
Total > 3a 27,7 b Approved for future payment	tal					
Total	proved for future payment					07.700
a Approved for future payment	proved for future payment	Total	· · · · · · · · · · · · · · · · · · ·		≥ 3a	27,700.
Total						

Form 990-PF (2012)

Part XVI-A Analysis of Income-Producing Activities

BAA

						<u> </u>
Enter gross	amounts unless otherwise indicated.		ed business income	 	by section 512, 513, or 514	(e)
•		(a) Business code	(b) Amount	(c) Exclu- sion	(d) Amount	Related or exempt function income (See instructions.)
1 Progra	am service revenue:	- 0000		code		(500
a				ļ	<u></u>	
ь				-		
<u></u>		<u> </u>				
<u>"</u>				 		<u> </u>
,——						
a Fees	and contracts from government agencies					·
_	ership dues and assessments				- -	· <u>····</u>
	on savings and temporary cash investments				·	
4 Divide	ends and interest from securities					10,393.
5 Net re	ental income or (loss) from real estate:	3/46 Mg				
	financed property					
	ebt-financed property					
	tal income or (loss) from personal property.			ļ		
	investment income					1,532.
	(loss) from sales of assets other than inventory					· · · · · · · · · · · · · · · · · · ·
	come or (loss) from special events				<u></u>	
	profit or (loss) from sales of inventory revenue:	Section 400		AHY:X		
a	revenue.	* NO. 46 POSHINGS		2.4.4.4	CONTRACTOR NAMED OF STREET	
ъ́—						
c					.	
d						
e						
12 Subto	tal. Add columns (b), (d), and (e)					11,925.
					13	11,925.
(See works	heet in line 13 instructions to verify calculation	ns.)				
Part XVI	Relationship of Activities to the	Accompl	ishment of Exemp	t Purpe	oses	
			- 4- 4 1 (-) - 4 - 5)	A	h. to the
Line No. ▼	Explain below how each activity for which in accomplishment of the foundation's exempt	purposes (o	orted in column (e) of r ther than by providing f	unds for	such purposes). (See i	nstructions.)
N/A						
11/ A			···			
			·· ·····			
						<u></u>
		_				
,						
			, 			
					_,,	
			 			
			· ·			
			· · · · · · · · · · · · · · · · · · ·	-		
		- 0 - 0				-

TEEA0502L 12/23/12

Form 990-PF (2012) THE LEMPERT FAMILY FOUNDATION 14-1808971 [Partixivil Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

•						:	Yes No
describ	organization directly ed in section 501(c) of to political organizat	of the Code (ot	ngage in any of the following wher than section 501(c)(3) org	vith any other organiz anizations) or in secti	ation on 527,		
•	,		a noncharitable exempt organ	zation of:			
(1) Cas	sh					1 a (1)	X
(2) Oth	er assets					1 a (2)	X
b Other to	ransactions.						
• •			npt organization			1 b (1)	<u> </u>
			ble exempt organization			1 b (2)	X_
		•	assets			1 b (3)	X_
• •	•					1 b (4)	<u> X</u>
• •	•					1 b (5)	X
, ,			p or fundraising solicitations.			1 b (6)	<u> X</u>
c Sharing	of facilities, equipme	ent, mailing list	ts, other assets, or paid emplo	oyees	• • • • • • • • • • • • • • • • • • • •	1c	X
any trar	nsaction or sharing a	rrangement, sh	complete the following schedu he reporting foundation. If the fo low in column (d) the value of	the goods, other asse	ets, or services receive	ed	
(a) Line no.	(b) Amount involved	(c) Name of	noncharitable exempt organization	(d) Description of	transfers, transactions, and	sharing arrang	gements
N/A				<u> </u>			
							
				ļ			
							
							
				 			·
		 					
		ļ					
							
		ļ					
							
				+			
		 		-			
		<u> </u>		. <u>L</u>	·		
describe	undation directly or inc ed in section 501(c) o complete the followi	of the Code (ot	with, or related to, one or more her than section 501(c)(3)) or	tax-exempt organization tax-extion 527?	ns 	Yes	X No
) Name of organization		(b) Type of organizatio	n T	(c) Description of rel	ationshin	
N/A	y Harris of organization	-	(b) Type of organization		(c) 2000 i piloti o i i ci	ationsinp	
/ 44							

Under	penalties of perjury, I declare	e that I have examir	ned this return, including accompanying	schedules and statements, ar	nd to the best of my knowledg	e and belief, it	ıs true,
correct	, and complete. Declaration	of preparer (other th	nan taxpayer) is based on all information	of which preparer has any k	nowledge		
Sign		4	1 1 1	0	_	May the IR this return	with the
Here	WSAU	<u> </u>		17	<u> </u>	_ (see ipstru	
Signa	<u> </u>	\	Date	Title		X\y	res No
	Print/Type preparer's nam		Preparer's signature	Date /	Check X If	PTIN	
Paid		OLAN	TAMOTHE COL	$\pm N$ $ 5/19/2$	o/3 self-employed	P01463	341
Preparer		OLAN, MAU			Firm's EIN ► 22-6	211088	
Use Only	_==	4 NAUTILU					
	<u>M</u> _	<u>ANAHAWKIN</u>	, NJ 08050-2490		Phone no. (609) 978-8	
ВАА						Form 990-I	PF (2012)

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

2012

Name of the organization		Employer identification number
THE LEMPERT FAMILY FOUNDATION		14-1808971
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 foundation
	527 political organization	·
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a p	rivate foundation
	501(c)(3) taxable private foundation	
Check if your organization is covered by the Ge	neral Rule or a Special Rule	
, , , , , , , , , , , , , , , , , , , ,	•	- Sanaral Bula. San materiations
Note. Only a section 501(c)(7), (8), or (10) orga	inization can check boxes for both the General Rule and	a Special Rule. See instructions.
General Rule		
X For an organization filing Form 990, 990-EZ, or contributor. (Complete Parts I and II.)	990-PF that received, during the year, \$5,000 or more (in mo	oney or property) from any one
contributor. (Complete Farts Failu II.)		
Special Rules		
509(a)(1) and 170(b)(1)(A)(vi) and received	orm 990 or 990-EZ that met the 33-1/3% support test of t from any one contributor, during the year, a contribution VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I	of the greater of (1) \$5,000 or
	n filing Form 990 or 990-EZ that received from any one contri	
total contributions of more than \$1,000 for the prevention of cruelty to children or anim	use exclusively for religious, charitable, scientific, literary,	or educational purposes, or
	n filing Form 990 or 990-EZ that received from any one contri	hutor, during the year
contributions for use exclusively for religious, c	haritable, etc. purposes, but these contributions did not total t	o more than \$1,000.
If this box is checked, enter here the total control	ibutions that were received during the year for an exclusively ss the General Rule applies to this organization because it re-	religious, charitable, etc, ceived nonexclusively
	,000 or more during the year	
Caution: An organization that is not covered by the General F	tule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, he box on line H of its Form 990-EZ or on Part I, line 2, of its Form 9	or 990-PF) but it must 90-PF, to certify that it does not
meet the filing requirements of Schedule B (For	rm 990, 990-EZ, or 990-PF).	20-11, to certify that it does not
BAA For Paperwork Reduction Act Notice, see	the Instructions for Form 990, 990EZ. Schedule E	(Form 990, 990-EZ, or 990-PF) (2012)
or 990-PF.		(com coo, cor <u>—</u> , cr cor · ·) (20 · 2)

Schedule	B (Form 990, 990-EZ, or 990-PF) (2012)	Page	1 of 1 of Part 1
Name of org	EMPERT FAMILY FOUNDATION	- ' - '	808971
	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed		
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	NORBERT LEMPERT		Person X Payroli
	16 FAIRVIEW AVENUE	\$25,000.	ı · · ·
	STAMFORD, CT 06902		(Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash Complete Part II if there is
(a) Number	(b) Name, address, and ZIP + 4	(c) Total	à noncash contribution.) (d) Type of contribution
		contributions	Person Payroll Oncash Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	· 	\$	Person Payroll Noncash Complete Part II if there is a noncash contribution.
BAA	TEEA0702L 11/30/12	Schedule B (Form 99	0, 990-EZ, or 990-PF) (2012)

of Part II

Name of organization

THE LEMPERT FAMILY FOUNDATION

Employer Identification number

14-1808971

Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
N/A			
		\$\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date receive
		\$\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date receive
		\$\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date receive
			:
		\$\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date receive
		\$\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

٦a	a	е

to

of Part III

Name of organization

Employer identification number

THE LEMPERT FAMILY FOUNDATION	14-1808971
Partille Exclusively religious, charitable, etc,	individual contributions to section 501(c)(7), (8) or (10)

N/A

	Use duplicate copies of Part III if additional	space is needed.		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	· -	(d) Description of how gift is held
	N/A			
			· · · · · · · · · · · · · · · · · · ·	
	Transferee's name, addres	(e) Transfer of gift ss, and ZIP + 4	Rela	itionship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
•	Transferee's name, addres	(e) Transfer of gift ss, and ZIP + 4	Rela	ationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
	Transferee's name, addres	(e) Transfer of gift s, and ZIP + 4	Rela	tionship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
	· · · · · · · · · · · · · · · · · · ·			
	Transferee's name, addres	(e) Transfer of gift s, and ZIP + 4	Rela	tionship of transferor to transferee
1		!		

CLIENT LEMPERT THE LEMPERT FAMILY FO 5/10/13 STATEMENT 1 FORM 990-PF, PART I, LINE 11 OTHER INCOME	(A)	(B) NET	14-1808971 02:52PM
STATEMENT 1 FORM 990-PF. PART I. LINE 11	EVENUE I	(B) NET	02:52PN
FORM 990-PF. PART I. LINE 11	EVENUE I	(B) NET	
	EVENUE I	(B) NET	
		NVESTMENT	(C) ADJUSTED NET INCOME
OTHER INVESTMENT INCOME \$ TOTAL \$	1,532. 1,532.\$	0.\$	0.
STATEMENT 2 FORM 990-PF, PART I, LINE 16B ACCOUNTING FEES			
(A) EXPENSES PER BOOKS TAX PREPARATON \$ 1,800. \$ 1,800. \$	(B) NET INVESTMENT INCOME 0.	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES \$ 0.
STATEMENT 3 FORM 990-PF, PART I, LINE 18 TAXES		. 10	
(A)	(B) NET INVESTMENT INCOME 0.	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES \$ 0.
STATEMENT 4 FORM 990-PF, PART I, LINE 23 OTHER EXPENSES			
CONTRACT LABOR \$ 2,622. DUES 85. FEES 150. MEALS AND ENTERTAINMENT 308.	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
OTHER EXPENSES 3,200. WEB SITE DEVELOPMENT 360. TOTAL \$ 6,725.	0.	\$ 0.	\$ 0.

20	~
/	

FEDERAL STATEMENTS

PAGE 2

CLIENT LEMPERT

THE LEMPERT FAMILY FOUNDATION

14-1808971

5/10/13

02:52PM

STATEMENT 5 FORM 990-PF, PART II, LINE 14 LAND, BUILDINGS, AND EQUIPMENT

CATEGORY		BASIS	ACCUM. DEPREC.	BOOK VALUE	FAIR MARKET VALUE
MACHINERY AND EQUIPMENT	OTAL §	4,355. 4,355.	\$ 4,355. \$ 4,355.	\$ 0. \$ 0.	\$ 0. \$ 0.

STATEMENT 6 FORM 990-PF, PART XV, LINE 2A-D APPLICATION SUBMISSION INFORMATION

NAME OF GRANT PROGRAM:

NAME:

LEMPERT FAMILY FOUNDATION NORBERT LEMPERT

CARE OF:

STREET ADDRESS: CITY, STATE, ZIP CODE:

16 FAIRVIEW AVE STAMFORD, CT 06902

TELEPHONE:

E-MAIL ADDRESS:

ALL REQUESTS SHOULD BE IN WRITING.

FORM AND CONTENT: SUBMISSION DEADLINES: RESTRICTIONS ON AWARDS:

STATEMENT 7 FORM 990-PF, PART XV, LINE 3A RECIPIENT PAID DURING THE YEAR

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	. <u>-</u>	AMOUNT
SAVE THE CHILDREN 54 WILTON ROAD WESTPORT, CT 06880,			DONATION TO SUPPORT IMPOVERISHED CHILDREN	\$	5,000.
AMNESTY INTERNATIONAL 322 8TH AVENUE NEW YORK, NY 10001-4808,			DONATIONS TO SUPPORT REFUGEES		2,500.
INT'L RESCUE COMMITTEE 122 EAST 42ND STREET NEW YORK, NY 10168			DONATION TO HELP SUPPORT REFUGEES IN THE KOSOVO CRISIS		7,500.
AMHERST COLLEGE ANNUAL FUND AMHERST COLLEGE AMHERST, MA 01002					2,500.
HIAS EUROPE AND THE MIDDLE EAST					5,000.

PAGE 3 2012· **FEDERAL STATEMENTS CLIENT LEMPERT** 14-1808971 THE LEMPERT FAMILY FOUNDATION 5/10/13 02:52PM STATEMENT 7 (CONTINUED) FORM 990-PF, PART XV, LINE 3A RECIPIENT PAID DURING THE YEAR FOUND-PURPOSE OF DONEE ATION NAME AND ADDRESS RELATIONSHIP STATUS GRANT AMOUNT HACKLEY SCHOOL \$ 5,000. 200. AMERICAN CANCER SOCIETY 27,700. TOTAL \$