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Form 990-PF

Department of the Treasury  
Internal Revenue Service

## Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation

Do not enter Social Security numbers on this form as it may be made public.

Information about Form 990-PF and its separate instructions is at [www.irs.gov/form990pf](http://www.irs.gov/form990pf).

OMB No 1545-0052

2013

Open to Public Inspection

For calendar year 2013 or tax year beginning

, and ending

Name of foundation

A Employer identification number

ABNER &amp; MILDRED LEVINE FAMILY FOUNDATION

13-6172502

Number and street (or P.O. box number if mail is not delivered to street address)

Room/suite

B Telephone number

(561)-498-1500

16858 RIVER BIRCH CIRCLE

City or town, state or province, country, and ZIP or foreign postal code

DELRAY BEACH, FL 33445

G Check all that apply:

☐

Initial return

☐

Initial return of a former public charity

☐

Final return

☐

Amended return

☐

Address change

☐

Name change

H Check type of organization:

☒

Section 501(c)(3) exempt private foundation

☐

Section 4947(a)(1) nonexempt charitable trust

☐

Other taxable private foundation

I Fair market value of all assets at end of year

J Accounting method:

☒

Cash

☐

Accrual

(from Part II, col. (c), line 16)

Other (specify)

\$ 2,417,227. (Part I, column (d) must be on cash basis.)

C If exemption application is pending, check here ☐D 1. Foreign organizations, check here ☐2. Foreign organizations meeting the 85% test, check here and attach computation ☐E If private foundation status was terminated under section 507(b)(1)(A), check here ☐F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ☐

## Part I Analysis of Revenue and Expenses

(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).)

(a) Revenue and expenses per books

(b) Net investment income

(c) Adjusted net income

(d) Disbursements for charitable purposes (cash basis only)

Revenue	1 Contributions, gifts, grants, etc., received	600,000.		N/A	
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments	137.	137.		STATEMENT 1
	4 Dividends and interest from securities				
	5a Gross rents	31,993.	31,993.		STATEMENT 2
	b Net rental income or (loss) -2,878.				STATEMENT 3
	6a Net gain or (loss) from sale of assets not on line 10				
	b Gross sales price for all assets on line 6a				
	7 Capital gain net income (from Part IV, line 2)		0.		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
Operating and Administrative Expenses	b Less Cost of goods sold				
	c Gross profit or (loss)				
	11 Other income				
	12 Total Add lines 1 through 11	632,130.	32,130.		
	13 Compensation of officers, directors, trustees, etc	0.	0.		0.
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees				
	b Accounting fees				
	c Other professional fees				
	17 Interest				
	18 Taxes	500.	0.		0.
	19 Depreciation and depletion				
	20 Occupancy				
	21 Travel, conferences and meetings				
	22 Printing and publications				
	23 Other expenses	42,373.	34,871.		0.
	24 Total operating and administrative expenses Add lines 13 through 23	42,873.	34,871.		0.
	25 Contributions, gifts, grants paid	247,963.			247,963.
	26 Total expenses and disbursements. Add lines 24 and 25	290,836.	34,871.		247,963.
	27 Subtract line 26 from line 12:				
	a Excess of revenue over expenses and disbursements	341,294.			
	b Net investment income (if negative, enter -0-)		0.		
	c Adjusted net income (if negative, enter -0-)			N/A	

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LHA For Paperwork Reduction Act Notice, see instructions

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SCANNED JUN 12 2014

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**Part II Balance Sheets** Attached schedules and amounts in the description column should be for end-of-year amounts only

		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
<b>Assets</b>	1 Cash - non-interest-bearing	976,580.	1,328,159.	1,328,159.
	2 Savings and temporary cash investments			
	3 Accounts receivable ▶			
	Less: allowance for doubtful accounts ▶			
	4 Pledges receivable ▶			
	Less: allowance for doubtful accounts ▶			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons			
	7 Other notes and loans receivable ▶			
	Less: allowance for doubtful accounts ▶			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments - U.S. and state government obligations			
	b Investments - corporate stock			
	c Investments - corporate bonds			
	11 Investments - land, buildings, and equipment: basis ▶			
Less: accumulated depreciation ▶				
12 Investments - mortgage loans				
13 Investments - other	STMT 6 217,495.	210,089.	210,089.	
14 Land, buildings, and equipment: basis ▶	875,000.			
Less: accumulated depreciation ▶	875,000.	875,000.	875,000.	
15 Other assets (describe ▶)	STATEMENT 7 ) 6,858.	3,979.	3,979.	
16 <b>Total assets</b> (to be completed by all filers - see the instructions. Also, see page 1, item 1)	2,075,933.	2,417,227.	2,417,227.	
<b>Liabilities</b>	17 Accounts payable and accrued expenses			
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable			
	22 Other liabilities (describe ▶)			
	23 <b>Total liabilities</b> (add lines 17 through 22)	0.	0.	
<b>Net Assets or Fund Balances</b>	Foundations that follow SFAS 117, check here ▶ <input type="checkbox"/>			
	and complete lines 24 through 26 and lines 30 and 31.			
	24 Unrestricted			
	25 Temporarily restricted			
	26 Permanently restricted			
	Foundations that do not follow SFAS 117, check here ▶ <input checked="" type="checkbox"/>			
	and complete lines 27 through 31.			
	27 Capital stock, trust principal, or current funds	0.	0.	
	28 Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
29 Retained earnings, accumulated income, endowment, or other funds	2,075,933.	2,417,227.		
30 <b>Total net assets or fund balances</b>	2,075,933.	2,417,227.		
31 <b>Total liabilities and net assets/fund balances</b>	2,075,933.	2,417,227.		

**Part III Analysis of Changes in Net Assets or Fund Balances**

1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	2,075,933.
2 Enter amount from Part I, line 27a	2	341,294.
3 Other increases not included in line 2 (itemize) ▶	3	0.
4 Add lines 1, 2, and 3	4	2,417,227.
5 Decreases not included in line 2 (itemize) ▶	5	0.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	2,417,227.

**Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a			
b	NONE		
c			
d			
e			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a			
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

(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	(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
a			
b			
c			
d			
e			

2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	2
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). If (loss), enter -0- in Part I, line 8	3

**Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income**

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

☐ Yes ☒ No

If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year; see the instructions before making any entries.

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2012	265,753.	1,597,741.	.166330
2011	320,321.	1,818,440.	.176152
2010	317,582.	1,767,709.	.179657
2009	81,721.	1,533,980.	.053274
2008	1,389,173.	2,355,060.	.589867

2 Total of line 1, column (d)	2 1.165280
3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3 .233056
4 Enter the net value of noncharitable-use assets for 2013 from Part X, line 5	4 1,553,230.
5 Multiply line 4 by line 3	5 361,990.
6 Enter 1% of net investment income (1% of Part I, line 27b)	6 0.
7 Add lines 5 and 6	7 361,990.
8 Enter qualifying distributions from Part XII, line 4	8 247,963.

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

**Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions)**

1a Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1. Date of ruling or determination letter: _____ (attach copy of letter if necessary-see instructions)			
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b		1	0.
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		2	0.
3 Add lines 1 and 2		3	0.
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	0.
6 Credits/Payments:			
a 2013 estimated tax payments and 2012 overpayment credited to 2013	6a	5,392.	
b Exempt foreign organizations - tax withheld at source	6b		
c Tax paid with application for extension of time to file (Form 8868)	6c		
d Backup withholding erroneously withheld	6d		
7 Total credits and payments. Add lines 6a through 6d	7	5,392.	
8 Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> 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	5,392.	
11 Enter the amount of line 10 to be: Credited to 2014 estimated tax <input type="checkbox"/> 5,392. Refunded <input type="checkbox"/>	11	0.	

**Part VII-A Statements Regarding Activities**

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		X
1b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)? 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		X
1c Did the foundation file Form 1120-POL for this year?		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. \$ 0. (2) On foundation managers. \$ 0.		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. \$ 0.		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities		X
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		X
b If "Yes," has it filed a tax return on Form 990-T for this year?		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T		X
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?		X
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	X	
8a Enter the states to which the foundation reports or with which it is registered (see instructions) <u>NY</u>		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? If "Yes," complete Part XIV		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	X	

N/A

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**Part VII-A Statements Regarding Activities** (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► <u>N/A</u>	13	X	
14	The books are in care of ► <u>LAWRENCE LEVINE</u> Telephone no. ► <u>561-498-1500</u> Located at ► <u>16858 RIVER BIRCH CIRCLE, DELRAY BEACH, FL</u> ZIP+4 ► <u>33445</u>			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the year	15		N/A
16	At any time during calendar year 2013, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of the foreign country ►	16	Yes	No
				X

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required**

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

		Yes	No
1a	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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2)	Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3)	Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(4)	Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(5)	Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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)? Organizations relying on a current notice regarding disaster assistance check here <u>N/A</u>	1b	
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 2013? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	1c	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)):		
a	At the end of tax year 2013, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2013? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years ►		
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions.) <u>N/A</u>	2b	
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. ►		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If "Yes," did it have excess business holdings in 2013 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 2013) <u>N/A</u>	3b	
4a	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 charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2013?	4b	X

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**Part VII-B** Statements Regarding Activities for Which Form 4720 May Be Required (continued)

5a During the year did the foundation pay or incur any amount to:

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?

☐ Yes ☒ No

(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?

☐ Yes ☒ No

(3) Provide a grant to an individual for travel, study, or other similar purposes?

☐ Yes ☒ No

(4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)?

☐ Yes ☒ No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?

☐ Yes ☒ No

b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?

N/A

Organizations relying on a current notice regarding disaster assistance check here

☒

c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?

N/A

☐ Yes ☐ No

If "Yes," attach the statement required by Regulations section 53.4945-5(d).

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?

☐ Yes ☒ No

b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

If "Yes" to 6b, file Form 8870.

6b

X

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?

☐ Yes ☒ No

b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?

N/A

7b

**Part VIII** Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation.

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
LAWRENCE LEVINE 16858 RIVER BIRCH CIRCLE DELRAY BEACH, FL 33445	PRESIDENT, DIRECTOR 2.00	0.	0.	0.
MILRED LEVINE 16858 RIVER BIRCH CIRCLE DELRAY BEACH, FL 33445	VICE-PRESIDENT, DIRECTOR 2.00	0.	0.	0.
MICHAEL LEVINE 16858 RIVER BIRCH CIRCLE DELRAY BEACH, FL 33445	SECRETARY, DIRECTOR 2.00	0.	0.	0.
ELLEN MILLER 16858 RIVER BIRCH CIRCLE DELRAY BEACH, FL 33445	TREASURER, DIRECTOR 2.00	0.	0.	0.

2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

Total number of other employees paid over \$50,000

0

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

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	44.
b	Average of monthly cash balances	1b	946,839.
c	Fair market value of all other assets	1c	630,000.
d	<b>Total</b> (add lines 1a, b, and c)	1d	1,576,883.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	0.
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	1,576,883.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	23,653.
5	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,553,230.
6	<b>Minimum investment return.</b> Enter 5% of line 5	6	77,662.

**Part XI****Distributable Amount** (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

1	Minimum investment return from Part X, line 6	1	77,662.
2a	Tax on investment income for 2013 from Part VI, line 5	2a	
b	Income tax for 2013. (This does not include the tax from Part VI.)	2b	
c	Add lines 2a and 2b	2c	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	77,662.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	77,662.
6	Deduction from distributable amount (see instructions)	6	0.
7	<b>Distributable amount as adjusted.</b> Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	77,662.

**Part XII****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	1a	247,963.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	247,963.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b	5	0.
6	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4	6	247,963.

**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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**Part XIII** Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2012	(c) 2012	(d) 2013
1 Distributable amount for 2013 from Part XI, line 7				77,662.
2 Undistributed income, if any, as of the end of 2013				
a Enter amount for 2012 only			0.	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2013:				
a From 2008	1,271,420.			
b From 2009	20,646.			
c From 2010	234,742.			
d From 2011	230,490.			
e From 2012	186,983.			
f Total of lines 3a through e	1,944,281.			
4 Qualifying distributions for 2013 from Part XII, line 4: ▶ \$	247,963.			
a Applied to 2012, but not more than line 2a			0.	
b Applied to undistributed income of prior years (Election required - see instructions)		0.		
c Treated as distributions out of corpus (Election required - see instructions)	0.			
d Applied to 2013 distributable amount				77,662.
e Remaining amount distributed out of corpus	170,301.			
5 Excess distributions carryover applied to 2013 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	2,114,582.			
b Prior years' undistributed income. Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable amount - see instructions		0.		
e Undistributed income for 2012. Subtract line 4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2013. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2014				0.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2008 not applied on line 5 or line 7	1,271,420.			
9 Excess distributions carryover to 2014. Subtract lines 7 and 8 from line 6a	843,162.			
10 Analysis of line 9:				
a Excess from 2009	20,646.			
b Excess from 2010	234,742.			
c Excess from 2011	230,490.			
d Excess from 2012	186,983.			
e Excess from 2013	170,301.			

N/A

- ▶

☐ 4942(j)(3) or ☐ 4942(j)(5)

- (4) Gross investment income

[illegible]

2013.03030 ABNER & MILDRED LEVINE FAMI 713 1

**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)				
a Paid during the year				
A CHICKEN FOR SHABBOS PO BOX 41074 ISRAEL, ISRAEL 11598			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	54,000.
ANTI DEFAMATION LEAGUE 605 THIRD AVE NEW YORK, NY 10158			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	1,200.
ADLER APHASIA CENTER 60 WEST HUNTER AVE MAYWOOD, NJ 07607			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	500.
AMERICAN CANCER SOCIETY 7280 WEST PALMETTO PARK ROAD OKLAHOMA CITY, OK 33433			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	60.
AMERICAN HEART ASSOC PO BOX 22718 DALLAS, TX 73123			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	2,500.
Total SEE CONTINUATION SHEET(S)			► 3a	247,963.
b Approved for future payment				
NONE				
Total			► 3b	0.



## Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

- |  |                     |
|--|---------------------|
| <p><b>1</b> Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?</p> <p><b>a</b> Transfers from the reporting foundation to a noncharitable exempt organization of:</p> <p>(1) Cash</p> <p>(2) Other assets</p> <p><b>b</b> Other transactions:</p> <p>(1) Sales of assets to a noncharitable exempt organization</p> <p>(2) Purchases of assets from a noncharitable exempt organization</p> <p>(3) Rental of facilities, equipment, or other assets</p> <p>(4) Reimbursement arrangements</p> <p>(5) Loans or loan guarantees</p> <p>(6) Performance of services or membership or fundraising solicitations</p> <p><b>c</b> Sharing of facilities, equipment, mailing lists, other assets, or paid employees</p> <p><b>d</b> If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.</p> | <p><b>Yes</b></p>   |
|  | <p><b>1a(1)</b></p> |
|  | <p><b>1a(2)</b></p> |
|  | <p><b>1b(1)</b></p> |
|  | <p><b>1b(2)</b></p> |
|  | <p><b>1b(3)</b></p> |
|  | <p><b>1b(4)</b></p> |
|  | <p><b>1b(5)</b></p> |
|  | <p><b>1b(6)</b></p> |
|  | <p><b>1c</b></p>    |

[illegible]

- 2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No

- b** If "Yes," complete the following schedule.

(a) Name of organization	(b) Type of organization	(c) Description of relationship
N/A		

**Sign  
Here**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Signature of officer or trustee

Date \_\_\_\_\_

PRESIDENT

Title

May the IRS discuss this return with the preparer shown below (see instr. 7)?

☒ Yes ☐ No

**Paid  
Preparer  
Use Only**

Print/Type preparer's name

STEVEN R. TUBBS

Preparer's signature

Date	
------	--

Check ☐ if  
self-employed

PTIN

Firm's name ► **TUBBS & BARTNICK, P.L.**

Firm's EIN ► 65-0385759

Firm's address ► 2101 NW CORPORATE BLVD. SUITE 317  
BOCA RATON, FL 33431

Phone no. 561-361-0330

Form **990-PF** (2013)

**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.  
▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and  
its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No 1545-0047

**2013**

Name of the organization

**ABNER & MILDRED LEVINE FAMILY FOUNDATION**

Employer identification number

**13-6172502**

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

☒

501(c)(3) exempt private foundation

☐

4947(a)(1) nonexempt charitable trust treated as a private foundation

☐

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.**Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.**General Rule**

- ☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

**Special Rules**

- ☐ For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- ☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- ☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions of \$5,000 or more during the year. ▶ \$ \_\_\_\_\_

**Caution.** An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2013)

Name of organization

Employer identification number

**ABNER & MILDRED LEVINE FAMILY FOUNDATION****13-6172502****Part I Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>1</u>	<u>MILDRED LEVINE</u> <u>16858 RIVER BIRCH CIRCLE</u> <u>DELRAY BEACH, FL 33445</u>	\$ <u>100,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>2</u>	<u>LEVINE CHARITABLE LEAD TRUST, J.P.</u> <u>MORGAN TRUSTEE</u> <u>10 SOUTH DEARBORN STREET, MAIL CODE</u> <u>IL1-0884</u> <u>CHICAGO, IL 60603</u>	\$ <u>500,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)



Employer identification number

13-6172502

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

[illegible]

Name of organization

Employer identification number

ABNER &amp; MILDRED LEVINE FAMILY FOUNDATION

13-6172502

**Part III**

*Exclusively* religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations that total more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once) ▶ \$

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
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee

## FORM 990-PF INTEREST ON SAVINGS AND TEMPORARY CASH INVESTMENTS STATEMENT 1

SOURCE	(A) REVENUE PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME
INTEREST INCOME	92.	92.	
LEMTAG SCHEDULE K-1 EIN # 65-0439942	45.	45.	
TOTAL TO PART I, LINE 3	137.	137.	

## FORM 990-PF RENTAL INCOME STATEMENT 2

KIND AND LOCATION OF PROPERTY	ACTIVITY NUMBER	GROSS RENTAL INCOME
SCARSDALE APARTMENT	1	31,993.
TOTAL TO FORM 990-PF, PART I, LINE 5A		31,993.

## FORM 990-PF RENTAL EXPENSES STATEMENT 3

DESCRIPTION	ACTIVITY NUMBER	AMOUNT	TOTAL
MAINTENANCE EXPENSE (INCLUDES REAL ESTATE TAXES)		29,712.	
MORTGAGE INTEREST PAID		5,159.	
- SUBTOTAL -	1		34,871.
TOTAL RENTAL EXPENSES			34,871.
NET RENTAL INCOME TO FORM 990-PF, PART I, LINE 5B			-2,878.

FORM 990-PF	TAXES			STATEMENT	4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
NEW YORK STATE DEPT OF LAW	500.	0.		0.	
TO FORM 990-PF, PG 1, LN 18	500.	0.		0.	

FORM 990-PF	OTHER EXPENSES			STATEMENT	5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
OFFICE EXPENSE	31.	0.		0.	
BANK CHARGES	19.	0.		0.	
LOSS FROM PARTNERSHIP EIN# 13-3061318	146.	0.		0.	
LOSS FROM PARTNERSHIP EIN# 65-0439942	7,306.	0.		0.	
MAINTENANCE EXPENSE (INCLUDES REAL ESTATE TAXES)	29,712.	29,712.		0.	
MORTGAGE INTEREST PAID	5,159.	5,159.		0.	
TO FORM 990-PF, PG 1, LN 23	42,373.	34,871.		0.	

FORM 990-PF	OTHER INVESTMENTS		STATEMENT	6
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE	
INVESTMENT IN PARTNERSHIPS	COST	210,089.	210,089.	
TOTAL TO FORM 990-PF, PART II, LINE 13		210,089.	210,089.	

FORM 990-PF	OTHER ASSETS		STATEMENT	7
DESCRIPTION	BEGINNING OF YR BOOK VALUE	END OF YEAR BOOK VALUE	FAIR MARKET VALUE	
DUE TO/FROM MANAGEMENT COMPANY	6,858.	3,979.	3,979.	
TO FORM 990-PF, PART II, LINE 15	6,858.	3,979.	3,979.	

FORM 990-PF	LIST OF SUBSTANTIAL CONTRIBUTORS PART VII-A, LINE 10	STATEMENT	8
-------------	---	-----------	---

NAME OF CONTRIBUTOR	ADDRESS
MILDRED LEVINE	16858 RIVER BIRCH CIRCLE DELRAY BEACH, FL 33435
LEVINE CHARITABLE LEAD TRUST, J.P. MORGAN TRUSTEE	10 SOUTH DEARBORN STREET, MAIL CODE IL1-0884 CHICAGO, IL 60603

**Part XV . Supplementary Information**

**3 Grants and Contributions Paid During the Year (Continuation)**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
B'NAI TORAH 6261 SW 18TH ST BOCA RATON, FL 33433			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	5,100.
B'NAI TORAH 6261 SW 18TH ST BOCA RATON, FL 33433			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	36.
B'NAI TORAH 6261 SW 18TH ST BOCA RATON, FL 33433			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	5,000.
BOCA RATON RATON LACROSSE BOOSTER CLUB 12811 GLADES ROAD BOCA RATON, FL 33498			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	1,000.
CARE PO BOX 7039 MERRIFIELD, VA 22116			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	50.
CHILDRENS NATIONAL MEDICAL CENTER MEMORIAL 111 MICHIGAN AVE NW WASHINGTON, DC 20010			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	108.
EDWARD AND ROSE BERNMAN HILLEL 777 GLADES ROAD BOCA RATON, FL 33431			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	540.
EVERETT JEWISH LIFE CENTER 777 GLADES ROAD BOCA RATON, FL 33431			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	108.
FL HIGHWAY PATROL PO BOX 181089 TALLAHASSEE, FL 32318			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	20.
GURWIN JEWISH HEALTHCARE FOUNDATION 68 HAPPAUGE ROAD COMMACK, NY 11725			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	180.
Total from continuation sheets				189,703.

**Part XV . Supplementary Information****3 Grants and Contributions Paid During the Year (Continuation)**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
HADASSAH 777 GLADES ROAD BOCA RATON, FL 33431			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	1,000.
HIAS 333 SEVENTH AVENUE NEW YORK, NY 10001			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	108.
HILLEL BROWARD 777 GLADES ROAD BOCA RATON, FL 33431			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	200.
HILLEL BROWARD 777 GLADES ROAD BOCA RATON, FL 33431			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	36,000.
HILLEL BROWARD 777 GLADES ROAD BOCA RATON, FL 33431			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	1,080.
HOSPICE BY THE SEA 1531 W PALMETTO PARK ROAD BOCA RATON, FL 33486			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	108.
JARC 21160 95TH AVE SOUTH BOCA RATON, FL 33428			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	2,700.
JEWISH FEDERATION OF SPBC 9901 DONNA KLEIN BLVD BOCA RATON, FL 33428			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	18,000.
JEWISH FEDERATION OF SPBC 9901 DONNA KLEIN BLVD BOCA RATON, FL 33428			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	36,000.
JEWISH THEOLOGICAL SEMINARY 3080 BROADWAY NEW YORK, NY 10027			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	1,200.
Total from continuation sheets				

**Part XV Supplementary Information****3 Grants and Contributions Paid During the Year (Continuation)**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
LEON & LEONA BRAUSER MAIMONIDES ACADEMY 5300SW 40TH AVE FORT LAUDERDALE, FL 33314			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	100.
MACULAR DEGENERATION RESEARCH 22512 GATEWAY CENTER DRIVE CLARKSBURG, MD 20871			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	54.
MAZON 10495 SANTA MONICA BOULEVARD LOS ANGELES, CA 90025			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	50.
MEMORIAL SLOAN KETTERING CANCER CENTER 1275 YORK AVENUE NEW YORK, NY 10065			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	18.
PLAY FOR PINK 175 E 74TH STREET NEW YORK, NY 10021			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	20.
SANDLER CENTER 201 MARKET STREET VIRGINIA BEACH, VA 23462			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	1,080.
SOUP KITCHEN 321 AVENUE N BROOKLYN, NY 11230			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	180.
SOUP KITCHEN 321 AVE N BROOKLYN, NY 11230			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	360.
SPBC JEWISH FEDERATION 9901 DONNA KLEIN BLVD BOCA RATON, FL 33428			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	135.
SPBC JEWISH FEDERATION 9901 DONNA KLEIN BLVD BOCA RATON, FL 33428			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	100.
Total from continuation sheets				



**Part XV. Supplementary Information****3 Grants and Contributions Paid During the Year (Continuation)**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
STARLIGHT CHILDRENS FUND 2049 CENTUARY PARK EAST LOS ANGELES, CA 90067			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	2,500.
THE AVE N JEWISH CENTER 321 AVE N BROOKLYN, NY 11230			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	18.
UM SYLVESTER CANCER CENTER 1475 NW 12TH AVENUE MIAMI, FL 33136			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	100.
ACLU - WV FOUNDATION PO BOX 3952 CHARLESTON, WV 25339			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	200.
ALDERSON HOSPITALITY HOUSE 203 HIGH STREET ALDERSON, WV 24910			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	100.
ALVIN DILEY DANCE FDN 405 WEST 55TH STREET NEW YORK, NY 10019			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	1,250.
AM JEWISH WORLD SERVICES 45 WEST 36TH STREET NEW YORK, NY 10018			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	200.
APPL MT ADVOCATE PO BOX 507 LEWISBURG, WV 24901			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	100.
APPL S FOLKLIFE CENTER 1201 LOCUST AVENUE FAIRMONT, WV 26554			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	50.
BETH JACOB SYN 10 HARRISON AVENUE MONTPELIER, VT 05602			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	1,800.
Total from continuation sheets				

**Part XV. Supplementary Information****3 Grants and Contributions Paid During the Year (Continuation)**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
BIRTHRIGHT ISRAEL FUND 33 E 33RD STREET 7TH FLOOR NEW YORK, NY 10016			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	100.
BLUEFIELD STATE UNIVERSITY 219 ROCK ST. BLUEFIELD, WV 24901			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	1,000.
BARRE OPERA HOUSE 6 N MAIN STREET BARRE, VT 05641			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	75.
CARNEGIE HALL WV 105 CHURCH STREET LEWISBURG, WV 24901			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	2,500.
CATAMOUNT TRAIL 1 MILL STREET BURLINGTON, VT 05401			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	50.
COMMUNITIES IN SCHOOLS GRNBR PO BOX 1188 LEWISBURG, WV 24901			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	100.
CONCORD UNIVERSITY PO BOX 1000 ATHENS, WV 24712			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	1,000.
CONG B'NAI YISRAEL 2 BANKSVILLE ROAD ARMOK, NY 10504			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	1,800.
CONG B'NAI YISRAEL 2 BANKSVILLE ROAD ARMOK, NY 10504			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	1,950.
CONS LAW FDN 62 SUMMER ST. BOSTON, MA 02110			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	2,000.
Total from continuation sheets				

**Part XV Supplementary Information**

**3 Grants and Contributions Paid During the Year (Continuation)**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
DOTTYWOOD INC. 412 EDGAR AVE RONCEVERTE, WV 24970			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	300.
EARTH ISLAND INST. 2150 ALLSTON WAY BERKELEY, CA 94704			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	500.
FAIRNESS WV 303 WASHINGTON STREET WEST CHARLESTON, WV 25305			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	100.
FAMILY REFUGE CENTER 213 S. JEFFERSON ST LEWISBURG, WV 24901			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	50.
FAMILY REFUGE CENTER 213 S. JEFFERSON ST LEWISBURG, WV 24901			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	100.
FINCA 1101 14TH STREET NW WASHINGTON, DC 20005			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	200.
FRIENDS & LOAVES GRNBR 122 N COURT STREET LEWISBURG, WV 24901			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	100.
GREEN COOP AM 1612 K STREET NW SUITE 600 WASHINGTON, DC 20006			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	50.
GREENBRIAR COUNTY LIBRARY 152 ROBERT MCCORMICK DRIVE LEWISBURG, WV 24901			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	600.
GREENBRIAR EAST HIGH SCHOOL ONE SPARTAN LANE LEWISBURG, WV 24901			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	100.
<b>Total from continuation sheets</b>				

**Part XV Supplementary Information****3 Grants and Contributions Paid During the Year (Continuation)**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
GREENBRIAR RIVER WATERSHED ASSOCIATION PO BOX 1419 LEWISBURG, WV 24901			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	100.
GREENBRIAR VALLEY CHORALE 113 E WASHINGTON ST. LEWISBURG, WV 24901			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	50.
GREENBRIAR VALLEY RESTORATION PO BOX 484 LEWISBURG, WV 24901			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	100.
GREENBRIAR VALLEY THEATRE 113 E WASHINGTON ST. LEWISBURG, WV 24901			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	1,000.
HEARTWOOD DANCE CTR RT 1 BOX 61 BIG BEND, WV 26136			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	50.
HINTON AREA FOUNDATION PO BOX 217 HINTON, WV 25951			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	100.
HINTON AREA FOUNDATION PO BOX 217 HINTON, WV 25951			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	100.
HOSPICE CARE 401 BOWLING AVENUE NASHVILLE, TN 37205			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	100.
INT'L RESCUE COMM 122 EAST 42ND STREET NEW YORK, NY 10168			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	1,500.
KYLE & GRIFFEN PLITNICK FOUNDATION FUND 171 MAIN ST WHITE PLAINS, NY 10601			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	250.
Total from continuation sheets				

**Part XV . Supplementary Information**

**3 Grants and Contributions Paid During the Year (Continuation)**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
LOAVES & FISHES 207 TEMPLE ST HINTON, WV 25951			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	200.
LOAVES & FISHES 207 TEMPLE ST HINTON, WV 25951			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	250.
MARSHALL UNIVERSITY ONE JOHN MARSHALL WAY HUNTINGTON, WV 25951			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	1,000.
MONTPELIER SERVICE CENTER 39 MAIN STREET MONTPELIER, VT 05602			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	250.
MUSIC MAKER RELIEF FDN PO BOX 1358 HILLSBOROUGH, NC 27278			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	100.
NATIONAL COMM FOR NEW RIVER PO BOX 1480 WEST JEFFERSON, NC 28694			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	50.
NE PIANO TEACHERS ASSOCIATION 441 VINE STREET, SUITE 3100 CINCINNATI, OH 45202			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	50.
PEOPLES WELLNESS CLINIC 553 N MAIN ST. #5 BARRE, VT 05641			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	500.
THE PLENTY 220 LORAX LANE #5 PITTSBORO, NC 27312			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	200.
THE PLENTY 220 LORAX LANE #5 PITTSBORO, NC 27312			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	100.
Total from continuation sheets				

**Part XV. Supplementary Information**

**3 Grants and Contributions Paid During the Year (Continuation)**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
REACHH 411 TEMPLE ST. HINTON, WV 25951			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	5,000.
SPBC JEWISH FEDERATION 9901 DONNA KLEIN BLVD BOCA RATON, FL 33428			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	36,000.
SUMMERS CTY BOARD OF EDUCATION 110 MAIN ST HINTON, WV 25951			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	300.
SUMMERS CTY LIBRARY 201 TEMPLE STREET HINTON, WV 25951			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	50.
THREE RIVERS AVIAN CENTER HC 74 BOX 279 BROOKS, WV 25951			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	50.
TRILLIUM COLLECTIVE LTD 115 N COURT ST LEWISBURG, WV 24901			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	100.
TRILLIUM COLLECTIVE LTD 115 N COURT ST LEWISBURG, WV 24901			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	500.
U OF CHARLESTON/BECKLEY 609 SOUTH KANAWHA ST BECKLEY, WV 25801			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	1,000.
U OF CHARLESTON/BECKLEY 609 SOUTH KANAWHA ST BECKLEY, WV 25801			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	1,000.
UNITED WAY GRN MTN 963 PAINE TURNPIKE MONTPELIER, VT 05602			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	2,000.
Total from continuation sheets				

**Part XV Supplementary Information****3 Grants and Contributions Paid During the Year (Continuation)**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
VA PUBLIC RADIO WVTF PO BOX 2737 ROANOKE, VA 24001			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	100.
VT FOOD BANK 33 PARKER ROAD BARRE, VT 05641			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	1,200.
VTIRG EDUCATION FUND 1101 16TH STREET NW, SUITE 400 WASHINGTON, DC 20036			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	250.
WAXMAN CANCER RESEARCH FOUNDATION 420 LEXINGTON AVE NEW YORK, NY 10170			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	6,000.
WV CITIZEN ACTION 1500 DIXIE ST CHARLESTON, WV 25387			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	100.
WV CITIZEN ACTION 1500 DIXIE ST CHARLESTON, WV 25387			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	50.
WV FREE 1114 QUARRIER STREET CHARLESTON, WV 25301			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	50.
WV PUBLIC BROADCASTING 600 CAPITOL STREET CHARLESTON, WV 25301			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	125.
WV PUBLIC BROADCASTING 600 CAPITOL STREET CHARLESTON, WV 25301			TO FURTHER THE CHARITABLE FUNCTION OF THE FOUNDATION	150.
Total from continuation sheets				

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

OMB No 1545-1709

► File a separate application for each return.

► Information about Form 8868 and its instructions is at [www.irs.gov/form8868](http://www.irs.gov/form8868).

- If you are filing for an **Automatic 3-Month Extension**, complete only Part I and check this box ☒ **X**
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only Part II (on page 2 of this form).

**Do not complete Part II unless** you have already been granted an automatic 3-month extension on a previously filed Form 8868

**Electronic filing (e-file).** You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit [www.irs.gov/efile](http://www.irs.gov/efile) and click on **e-file for Charities & Nonprofits**

## Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete

Part I only ☐

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Type or print	Name of exempt organization or other filer, see instructions	Enter filer's identifying number
File by the due date for filing your return. See instructions	<b>ABNER &amp; MILDRED LEVINE FAMILY FOUNDATION</b>	Employer identification number (EIN) or <b>13-6172502</b>
	Number, street, and room or suite no. If a P.O. box, see instructions. <b>16858 RIVER BIRCH CIRCLE</b>	Social security number (SSN)
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. <b>DELRAY BEACH, FL 33445</b>	

Enter the Return code for the return that this application is for (file a separate application for each return)

**0 4**

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

### ABNER LEVINE

- The books are in the care of ► **16858 RIVER BIRCH CIRCLE - DELRAY BEACH, FL 33445**  
Telephone No ► **561-498-1500** Fax No ►

- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) \_\_\_\_\_ If this is for the whole group, check this box ☐ If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for

- 1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until **AUGUST 15, 2014**, to file the exempt organization return for the organization named above. The extension is for the organization's return for  
► ☒ calendar year **2013** or  
► ☐ tax year beginning \_\_\_\_\_, and ending \_\_\_\_\_

- 2 If the tax year entered in line 1 is for less than 12 months, check reason. ☐ Initial return ☐ Final return  
☐ Change in accounting period

3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	0.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	5,392.
c <b>Balance due.</b> Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	0.

**Caution.** If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.