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. Go to www.irs gov/Form990PF for instructions and the latest information

2019

Open to Public Inspection

Internal R	levenue Service			O	pen to rubile inspection ,
For cal	endar year 2019 or tax year beginning	, 2019	, and ending	,	
אר ז א	& VICKI LEVINE FAMILY FOUND	וא∩דידעו		A Employer identification n 84-3356444	umber
3701	NE 30TH AVE	ATION		B Telephone number (see in	structions)
	THOUSE POINT, FL 33064			(954) 234-76	554
				C If exemption application i	s pending, check here 🕨 🗍 (
C Ch	eck all that apply XI Initial return	Initial return of a form	mer public charity	1	
G Che	eck all that apply XInitial return E	Amended return	ner public charity	D 1 Foreign organizations, ch	eck here
	Address change	Name change		2 Foreign organizations me	
H Che		(c)(3) exempt private f	oundation/)2	here and attach computat	tion • 📗
11 0110	Section 4947(a)(1) nonexempt charitable t			E If private foundation state	us was terminated
I Fair		counting method X C		under section 507(b)(1)(i	A), check here
		Other (specify)		F If the foundation is in a 6	60-month termination
► \$		column (d), must be on a	cash basis)	under section 507(b)(1)(B), check here
Part I					(d) Disbursements
-	Expenses (The total of amounts in	(a) Revenue and expenses per books	(b) Net investmei	nt (c) Adjusted net income	for charitable
	columns (b), (c), and (d) may not necessarily equal the amounts in				purposes (cash basis only)
	column (a) (see instructions))				
	1 Contributions, gifts, grants, etc., received (attach schedule)	997,194.			
	2 Check Lifthe foundation is not required to attach Sch B	<u> </u>			
	3 Interest on savings and temporary cash investments				- I
t	4 Dividends and interest from securities	8,665.	8,66	55. 8,665	
	5 a Gross rents				1
	b Net rental income or (loss)			1	
a)	6 a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all				
ž	assets on line 6a				
Revenue	7 Capital gain net income (from Part IV, line 2) 8 Net short term capital gain	F	RECEIV		
Ş	9 Income modifications		RECEIV		
L-1	10 a Gross sales less returns and	222	y I	1 OS	i i
	allowances b Less Cost of	20		020 Ö	1
	goods sold				
	C Gross profit or (loss) (attach schedule)		OGDEN.		
	11 Other income (attach schedule)	L	OODLIV,		!
	12 Total Add lines 1 through 11	1,005,859.	8,66	55. 8,665	 -
-	13 Compensation of officers, directors, trustees, etc	0.	0,00	0,003	
88	14 Olher employee salaries and wages.				
penses	15 Pension plans employee benefits				
8	16a Legal fees (attach schedule)				
Ã	b Accounting fees (attach sch)				
Š	c Other professional fees (attach sch)				
Æ	17 Interest 18 Taxes (attach schedule)(see instrs)				
Ħ	19 Depreciation (attach				<u> </u>
٠ <u>٣</u>	schedule) and depletion				<u>'</u>
<u>'E</u>	20 Occupancy				
Ad	21 Travel conferences, and meetings				
Þ	22 Printing and publications 23 Other expenses (attach schedule)				-
ਬ	SEE STATEMENT 1	1,282.	1,28	32. 1,282	.
Operating and Administrative Ex	24 Total operating and administrative				
哥	expenses Add lines 13 through 23	1,282.	1,28	32. 1,282	
Þ	25 Contributions, gifts, grants paid.				
Ö	26 Total expenses and disbursements Add lines 24 and 25	1,282.	1,28	32. 1,282	0.
	27 Subtract line 26 from line 12	1,202.	1,20	1,202	
	a Excess of revenue over expenses		İ		. 1
	and disbursements	1,004,577.			
	b Net investment income (if negative enter 0)		7,38	33.	
	C Adjusted not income (if negative enter 0.)	t .	1	j / XX X	1

Par	H	Balance Sheets	column should be for end of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	<u> </u>	(c) Fair Market Value
	1	Cash - non-interest	`	(a) Book Value	(b) Book Valu	=	(C) Fall Market Value
	2		ary cash investments		7,3	83	7,383.
	3	Accounts receivable	- I		- 1,5	03.	
		Less allowance for		*			
	4	Pledges receivable	·				
		Less allowance for	doubtful accounts •				
	5	Grants receivable					
	6	Receivables due from offi	cers, directors, trustees, and other				
		disqualified persons (atta	ch schedule) (see instructions)				
	7	Other notes and loans red		_ / 1941		•-	
		Less allowance for					
	8	Inventories for sale	· ·				
	9		nd deferred charges				
Assets		obligations (attach s	·				
As	į.	nvestments — corporate	· · · · · · · · · · · · · · · · · · ·				
•	l	: Investments — corporate					
	11	Investments — land equipment basis					•
		Less accumulated depred (attach schedule)	enation •				
	12	Investments - mort					·
	13	Investments - othe	· · · · · · · · · · · · · · · · · · ·		1,042,2	38.	1,042,238.
	14	Land, buildings, and				\longrightarrow	•
		Less accumulated depred (attach schedule)	ciation •			1	
		Other assets (descr					
	16	Total assets (to be see the instructions	completed by all filers – Also, see page 1, item I)	0.	1,049,6	21.	1,049,621.
	17	· •	nd accrued expenses				
	18	Grants payable					
<u>.8</u>	19	Deferred revenue	stars trustees 8 other description accord		 		<u>_</u>
Ξ	20	•	ctors, trustees, & other disqualified persons spayable (attach schedule)			-	<u> !</u>
Liabilities	22	Other liabilities (des	, , ,				
		·		_	- 4		<u> </u>
	23	<u>`</u>	I lines 17 through 22)	0.		0.	
SS		and complete lines	llow FASB ASC 958, check here ► 24, 25, 29, and 30.				
Net Assets or Fund Balance	24	Net assets without of	donor restrictions				
8	25	Net assets with don	or restrictions				;
Fun			not follow FASB ASC 958, check here ►X				
o L	26	and complete lines Capital stock, trust i	principal, or current funds		1,049,6	21	j
SS	27	•	, or land, bldg , and equipment fund		1,010,0		1
SS	28	Retained earnings, accum	iulated income, endowment, or other funds				
۲۷	29		fund balances (see instructions)	0.	1,049,6	21.	1
ž	30	Total liabilities and (see instructions)	net assets/fund balances	0.	1,049,6	21	
Par	 -		iges in Net Assets or Fund Balance		1,049,0	21.	I
ٽٽن 1			alances at beginning of year — Part II, colu		aree with		
1	end-	of-year figure reporte	d on prior year's return)	(a), mic 25 (mast a	g. 20 mm	1	0.
2		r amount from Part I,				2	1,004,577.
3			ine 2 (itemize) SEE STATEMENT 3			3	45,044.
4		lines 1, 2, and 3	(demina)			4	1,049,621.
5		ases not included in line 2	alances at end of year (line 4 minus line 5)	— Part II column (h) I		5 6	1 040 621
6	rota	i net assets or fund b	diances at end of year (line 4 minus line 5)	- rait ii, columiii (b), l	1110 27	0	1,049,621.

	Losses for Tax on Investment the kind(s) of property sold (for example varehouse, or common stock, 200 shs	e, real estate,	(b) How acquired P — Purchase D — Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr
1a N/A					
			-		
<u>c</u>					
<u>d</u>					
e	(f) Depreciation allowed	(a) Cost or other ba	le le	(h) Gain or	(loss)
(e) Gross sales price	(or allowable)	plus expense of sa		((e) plus (f) m	
a		 			
b					
С					
d					
е		·			
Complete only for assets shown	ng gain in column (h) and owned by the	foundation on 12/31/69		(I) Gains (Col	
(ı) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any		jain minus col (k), b an -0-) or Losses (fr	
a					
b					
c .					
d					
<u>e</u>		antar in Dark I. lina 7.		1	
2 Capital gain net income or (n		enter in Part I, line 7 er -0- in Part I, line 7	- 2		
3 Net short-term capital gain or	(loss) as defined in sections 1222(5)	_	<u> </u>		
	ne 8, column (c) See instructions If i				
in Part I, line 8	ne 8, column (c) See instructions in	(loss), enter -o-	_ 3		
Part V Qualification Under	er Section 4940(e) for Reduced	Tax on Net Investn	nent Income		
f 'Yes,' the foundation doesn't qua	ection 4942 tax on the distributable ar lify under section 4940(e) Do not con	nplete this part		Yes	☐ No
1 Enter the appropriate amount in	n each column for each year, see the ins	tructions 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 as	sets	(d) Distribution (col (b) divided	
2018					
2017					
2016					
2016					
2015					
· · · · · · · · · · · · · · · · · · ·					
2015 2014			2		
2015 2014 2 Total of line 1, column (d)	S year base period — divide the total or	a line 2 by 5.0, or by the	2		
2015 2014 2 Total of line 1, column (d) 3 Average distribution ratio for the	e 5-year base period — divide the total or on has been in existence if less than	n line 2 by 5 0, or by the 5 years	2		
2015 2014 2 Total of line 1, column (d) 3 Average distribution ratio for the number of years the foundation	e 5-year base period — divide the total or on has been in existence if less than a aritable-use assets for 2019 from Part	5 years			
2015 2014 2 Total of line 1, column (d) 3 Average distribution ratio for the number of years the foundation	on has been in existence if less than	5 years	3		
2015 2014 2 Total of line 1, column (d) 3 Average distribution ratio for the number of years the foundation 4 Enter the net value of nonchar 5 Multiply line 4 by line 3	on has been in existence if less than	5 years	3		
2015 2014 2 Total of line 1, column (d) 3 Average distribution ratio for the number of years the foundation 4 Enter the net value of nonchar 5 Multiply line 4 by line 3	on has been in existence if less than baritable-use assets for 2019 from Part	5 years	3 4 5		
2015 2014 2 Total of line 1, column (d) 3 Average distribution ratio for the number of years the foundation 4 Enter the net value of nonchar 5 Multiply line 4 by line 3 6 Enter 1% of net investment in 7 Add lines 5 and 6 8 Enter qualifying distributions	on has been in existence if less than saritable-use assets for 2019 from Part	5 years X, line 5	3 4 5 6 7		

 and addresses
 SEE STATEMENT 4
 10 | X |

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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 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If 'Yes,' complete Part XIV.

Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names

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rar	t 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	Yes	No 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		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address N/A			ı
14		4) 234	-765	4
	Located at > 3701 NE 30TH AVE LIGHTHOUSE POINT FL ZIP + 4 > 33064			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — check here.	N/A	↓	\Box
	and enter the amount of tax-exempt interest received or accrued during the year			N/A
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a		Yes	No
10	bank, securities, or other financial account in a foreign country?	16		Х
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If 'Yes,' enter the name of the foreign country.			
Par	t 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
1 a	During the year, did the foundation (either directly or indirectly)		ŀ	
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes XN	0		'
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? Yes X N	,	٠,	
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X N			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X N	.		
	(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 XN	р		
	(6) Agree to pay money or property to a government official? (Exception, Check 'No' if the		-	
	(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)	9		
ь	olf 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	. NI	/A
	Organizations relying on a current notice regarding disaster assistance. See instructions		14	Y A
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 2019?	1 c		Х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section $4942(j)(3)$ or $4942(j)(5)$)			-
а	At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines 6d and		İ	
	6e) for tax year(s) beginning before 2019? Yes XN	0		
	If 'Yes,' list the years ▶ 20 , 20 , 20 , 20			
ь	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			<u> </u>
	all years listed, answer 'No' and attach statement – see instructions).	2 b	N N	/A
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	► 20 , 20 , 20 , 20			
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 N	0	ı	
b	olf 'Yes,' did it have excess business holdings in 2019 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		} P	
	(3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to	-	i	
	determine if the foundation had excess business holdings in 2019)	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	ļ ,	X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could			-
-	leopardize its charitable purpose that had not been removed from jeopardy before the first day of	, A L	<u> </u>	V
	the tax year beginning in 2019?	4 b	ــــــــــــــــــــــــــــــــــــــ	(2010)

Form 990-PF (2019) ALAN & VICKI LEVIN	E FAMILY FOUND	ATION		-335644	14	Р	age
Part VII-B Statements Regarding Activiti		1 4720 May Be Req	uired (continue	ed)		V	- N-
5 a During the year, did the foundation pay or incur at(1) Carry on propaganda, or otherwise attempt	•	n (section 4945(e))?	☐Yes	X No		Yes	No
(2) Influence the outcome of any specific pub				Λ 110			
on, directly or indirectly, any voter registra (3) Provide a grant to an individual for travel,	ition drive?		Yes Yes	X No X No			
(4) Provide a grant to an organization other than in section 4945(d)(4)(A)? See instructions	a charitable, etc., organi			X No			
(5) Provide for any purpose other than religion	us, charitable, scientific		Yes				
educational purposes, or for the prevention b If any answer is 'Yes' to 5a(1)-(5), did any of	-		ntions Yes	X No			
described in Regulations section 53 4945 or in a c See instructions	current notice regarding d	lisaster assistance?	p		5 b	N	/A
Organizations relying on a current notice rega	rding disaster assistant	ce, check here	1				
c If the answer is 'Yes' to question 5a(4), does to tax because it maintained expenditure respons	sibility for the grant?		N/A Yes	No			
If 'Yes,' attach the statement required by Regu							
6 a Did the foundation, during the year, receive ar on a personal benefit contract?			Yes	XNo	6		,
b Did the foundation, during the year, pay premi If 'Yes' to 6b, file Form 8870	lums, directly or indirec	tiy, on a personal bene	ent contract?		6 b		X
7 a At any time during the tax year, was the found				XNo	7 b		i
b If 'Yes,' did the foundation receive any procee8 Is the foundation subject to the section 4960 tax of				N/A	7.0		
or excess parachute payment(s) during the ye	•		Yes	X No			
Part VIII Information About Officers, D	irectors, Trustees,	Foundation Manage	gers, Highly Pa	id Emp	loyee	s,	
and Contractors 1 List all officers, directors, trustees, and found	dation managers and th	neir compensation. See	e instructions.				
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions employee ben plans and defe compensation	efit (e) rred	Expens other a		
SEE_STATEMENT_5	<u> </u>						
		0.		0.			0.
		0.		0.			<u> </u>
							
2 Compensation of five highest-paid employees (of		on line 1 – see instructio	ns). If none, enter 'N	IONE.			
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	employee ben plans and defe compensation	efit (e) rred	Expens other a	se acc Illowar	ount, nces
NONE	-						
							_
					*.10		
Total number of other employees paid over \$50,000		9/22/10		<u>▶</u>	orm 990	.DE /2	(010)
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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highland Contractors (continued)	ly Paid Employees,
3 Five highest-paid independent contractors for professional services. See instructions. If none, enter 'N	ONE.'
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE	
Total number of others receiving over \$50,000 for professional services	• 0
Part IX-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 of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 N/A	
2	
3	
4	-
Part IX-B 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	
2	
All other program-related investments See instructions	
3	
Total. Add lines 1 through 3	<u>▶</u> 0.
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1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes a Expenses, contributions, gifts, etc. — total from Part I, column (d), line 26	1 a	1
b Program-related investments — total from Part IX-B	1 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)	3 a	l
b Cash distribution test (attach the required schedule)	3 b	

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income

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
 Adjusted qualifying distributions. Subtract line 5 from line 4

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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0.

0.

4

5

6

Part XIII Undistributed Income (see instructions)

1. Distributable amount for 2019 from Part XI, inter.? 2. Undistributed rezone, if any, as of the earl of 2019 8. Enter amount for 2018 only 1. Total for price yets: 20 _ 20 _ 20 3. Excess distributions carryover, if any, to 2019 8. From 2016 6. From 2016 6. From 2017 7. Expect and statistically stati		(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
2. Underhobed income, if any, as of the end of 2019 8. Enter amount for 2018 only b Total for prior years 28 20 20 30 8. Excess distributions carryover, if any, to 2019 8. From 2015 9. From 2016 9. From 2016 9. From 2017 9. From 2018 1. Total of lines 3a through e 9. 4. Outsifying distributions for 2019 from Part XIII, line 4 + 5 1. Total of lines 3a through e 9. 4. Outsifying distributions for 2019 from Part XIII, line 4 + 5 1. Applied to 2018, but not more than line 25 1. Applied to 2018, but not more than line 25 1. Applied to 2018, but not more than line 25 1. Applied to 2018, but not more than line 25 1. Applied to undestributed income of prior years (Election required — see instructions) 1. Created as distributions out of corpus (Election required — see instructions) 1. Created as distributions carryover applied to 2019 1. Create the end appears in column (b), the same amount miss be shown in column (a) 1. Enter the net total of each column as indicated below: 1. Create the amount of prior years' undistributed income Subtract line 4b from line 2b 1. Prior years' undistributed income Subtract line 4b from line 2b 1. Create the amount of prior years' undistributed income Subtract line 4b from line 2b 1. Create the amount of prior years' undistributed income for the see instructions (b), the same amount of prior years' undistributed income for the see instructions (b), the same amount of the set instructions (b), the same amount of the set instructions (c), the same amount of th					50,799.
b Total for prey years 20 20 20 3 3 Excess distributions carryover, if any, to 2019 a From 2016 d From 2016 d From 2017 f From 2016 d From 2017 (A Qualifying distributions for 2019 from Part XIII, Inc. 4 = 5 a Appleed to 2018, but not more than line 28 A Appleed to 2018, but not more than line 29 A Appleed to 2018, but not more than line 20 A Appleed to 2018, but not more than line 20 C Treated as distributions income of prior years (Cleicion required — see instructions) Glection required — see instructions) Glection required — see instructions O . Treated as distributions carryover applied to 2019 (if an amount appears in courtin (0), the same amount must be shown in column (a)) E mere set stributions carryover applied to 2019 (if an amount appears in column as indicated below: Carpas Add install, 4c, and 4e Subtract line 5 Prior years' undistributed income Subtract line 4b from line 2b 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 lists inte 4b from line 2b C Enter the amount of prior years' undistributed income for which a notice of deficiency lists inte 4b from line 2b C Enter the amount of prior years' undistributed income for form line 2b C Enter the amount of prior years' undistributed income for form line 2b C Enter the amount of prior years' undistributed income for form line 2b C Enter the amount of the form line 2b C Enter the amount of the form line 2b C Enter the amount of the form line 2b C Enter the amount of the form line 2b C Enter the amount of the form line 2b C Enter the amount of the form line 2b C Enter the amount of the form line 2b C Enter the amount of the form line 2b C Enter the amount of the form line 2b C Enter the amount of the form line 2b C Enter the amount of the form line 2b C Enter the amount of the form line 2b C Enter the amount of the form line 2b C Enter the form line 2b C Enter the amount of the form line 2b C Enter the form	2 Undistributed income, if any, as of the end of 2019				
3 Sizest distributions carryever, if any, to 2019 a From 2014 b From 2015 c From 2016 d From 2017 e From 2018 1 Total of lines 3a through e 4 Qualifying distributions for 2019 from Part XXI, line 4 P S A Applied to 2018, but not more than line 2a b Applied to 2018, but not more than line 2a b Applied to 2018, but not more than line 2a b Applied to 2018, but not more than line 2a b Applied to 2018, but not more than line 2a b Applied to 2018, but not more than line 2a b Applied to 2019, but not more than line 2a b Applied to 2019, but not more than line 2a b Applied to 2019, but not more than line 2a b Applied to 2019, but not more than line 2a b Applied to 2019, but not more than line 2a b Applied to 2019 earthfuliable amount c Remaining amount distributed out of corpus (Clection required – see instructions) 0. d Command appears in column (d), line as more amount appears in column (e) to 0. E cases distributions carryeve applied 2019 (If an amount appears in column (e) to 0. E there the net total of each column as indicated below: a Ceipsis Add line 3f, 4c, and 4c Subtract line 6b from line 2b D Prior years' undistributed income Subtract line 4b from line 2b D D D D D D D D D D D D D D D D D D D	a Enter amount for 2018 only			0.	
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corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(c)(3) (Election may be required — see instructions) 8					50,799.
section 170(b)(1)(F) or 4942(g)(3) (Election may be required — see instructions) 8					ı
may be required — see instructions) 8 Excess distributions car/yover from 2014 not applied on line 5 or line 7 (see instructions) 9 Excess distributions carryover to 2020. Subtract lines 7 and 8 from line 6a 10 Analysis of line 9 a Excess from 2015 b Excess from 2016 c Excess from 2017 d Excess from 2018 e Excess from 2019	corpus to satisfy requirements imposed by section 170(b)(1)(E) or 4942(of(3) (Election				
9 Excess distributions carryover to 2020. Subtract lines 7 and 8 from line 6a 0. 10 Analysis of line 9 a Excess from 2015 b Excess from 2016 c Excess from 2017 d Excess from 2018 e Excess from 2019		0.			• •
9 Excess distributions carryover to 2020. Subtract lines 7 and 8 from line 6a 0. 10 Analysis of line 9 a Excess from 2015 b Excess from 2016 c Excess from 2017 d Excess from 2018 e Excess from 2019	8 Excess distributions carriover from 2014 not				
9 Excess distributions carryover to 2020. Subtract lines 7 and 8 from line 6a 0. 10 Analysis of line 9 a Excess from 2015 b Excess from 2016 c Excess from 2017 d Excess from 2018 e Excess from 2019	applied on line 5 or line 7 (see instructions)	0.			į
Subtract lines 7 and 8 from line 6a 0. 10 Analysis of line 9 a Excess from 2015 b Excess from 2017 c Excess from 2018 e Excess from 2019					
10 Analysis of line 9 a Excess from 2015 b Excess from 2016 c Excess from 2017 d Excess from 2018 e Excess from 2019	Subtract lines 7 and 8 from line 6a	0.			
b Excess from 2016 c Excess from 2017 d Excess from 2018 e Excess from 2019	10 Analysis of line 9				
c Excess from 2017 d Excess from 2018 e Excess from 2019	a Excess from 2015				
d Excess from 2018 e Excess from 2019	b Excess from 2016				
e Excess from 2019	c Excess from 2017				
	d Excess from 2018				
	e Excess from 2019				

orm 990-PF (2019) ALAN & VICKI LEV			1) / II A 1	84-3356444	Page 1
Part XIV Private Operating Founda	<u> </u>				N/A
1 a If the foundation has received a ruling or det is effective for 2019, enter the date of the	ermination letter that ruling	it is a private operati	ing iounoation, and tr	re runny	
b Check box to indicate whether the founda	ition is a private op	erating foundation o	described in section	4942(j)(3) or L	4942(J)(5)
2 a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years		(e) Total
investment return from Part X for each year listed	(a) 2019	(b) 2018	(c) 2017	(d) 2016	
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4, for each year listed	-va-tories-va				
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c	2	•			
3 Complete 3a, b, or c for the alternative test relied upon					
a 'Assets' alternative test — enter					
(1) Value of all assets	1				
(2) Value of assets qualifying under section 4942(j)(3)(B)(i) b 'Endowment' alternative test — enter 2/3 of					
minimum investment return shown in Part X, line 6, for each year listed					
c 'Support' alternative test — enter					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section					
512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(III)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					
art XV Supplementary Information assets at any time during the Information Regarding Foundation Management	ne year — see ir igers:	istructions.)			
a List any managers of the foundation who have close of any tax year (but only if they have ALAN LEVINE	ve contributed more to contributed more	than \$5,000) (See	ontributions received section 507(d)(2))	by the foundation befo	re tne
b List any managers of the foundation who ow a partnership or other entity) of which the NONE	n 10% or more of the e foundation has a 1	stock of a corporation of the stock of a corporation of the stock of a corporation of the stock of the stock of the stock of the stock of a corporation of the stock of the stoc	on (or an equally large est	e portion of the owners	hip of
2 Information Regarding Contribution, Grant,					
Check here $[X]$ if the foundation only m requests for funds. If the foundation make 2a, b, c, and d. See instructions	es gifts, grants, etc	, to individuals or o	rganizations under	other conditions, com	
a The name, address, and telephone number of	or email address of th	ne person to whom ap	oplications should be	addressed	
					····
b The form in which applications should be	submitted and info	rmation and materia	als they should inclu	de	
c Any submission deadlines					
d Any restrictions or limitations on awards,	such as by geograp	ohical areas, charita	ible fields, kinds of i	institutions, or other f	actors
		······································			
AA	TE	EA0310L 08/22/19		Fo	rm 990-PF (2019)

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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	Purpose of grant or contribution	N/A Amount			
Name and address (home or business)	any foundation manager	recipient	contribution				
a Paid during the year	or substantial contributor						
a raid daming the year							
Total			► 3a				
b Approved for future payment							
			▶ 3b				
Total			► 3h	İ			

Ent e r gro	ss amounts unless otherwise indicated	Unrelated	business income	Excluded by	section 512, 513, or 514	(e)
1 Pro	gram service revenue	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	Related or exempt function income (See instructions)
	gram service revenue			Code	·	
a	<u> </u>	 		 		
b				-		
<u>_</u>				1		
d						
e					<u></u>	 .
1 =		 	-		·	·-
-	s and contracts from government agencies	ļ				
_	mbership dues and assessments		_ .	 		
	est on savings and temporary cash investments			1.4	0.665	
	dends and interest from securities	ļ	·· ·····	14	8,665.	
	rental income or (loss) from real estate	1		 		
	ot-financed property					
	debt-financed property			-		
	rental income or (loss) from personal property	-				
	er investment income			1		
	or (loss) from sales of assets other than inventory					
	income or (loss) from special events					
	ss profit or (loss) from sales of inventory					
11 Oth	er revenue	-		٠,		
a						
b						
С		<u> </u>				
d			_			
е						
	stated Add solumns (b) (d) and (a)					
	ototal Add columns (b), (d), and (e)				8,665.	
13 Tot	al. Add line 12, columns (b), (d), and (e)			. -	8,665. 13	8,665
13 Tot See work	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculati				13	8,665
1 3 Tot See worl	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculate /I-B Relationship of Activities to the	e Accomplis		· · · · · · · · · · · · · · · · · · ·	13 es	
1 3 Tot See worl	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculate /I-B Relationship of Activities to the	e Accomplis	ted in column (e) of	Part XVI A c	13 es	ly to the
13 Tot See work Part X\ Line No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculate //-B Relationship of Activities to the	e Accomplis	ted in column (e) of	Part XVI A c	13 es	ly to the
13 Tot See work Part X\ Line No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculate //-B Relationship of Activities to the	e Accomplis	ted in column (e) of	Part XVI A c	13 es	ly to the
13 Tot See work Part X\ Line No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculate //-B Relationship of Activities to the	e Accomplis	ted in column (e) of	Part XVI A c	13 es	ly to the
13 Tot See work Part X\ Line No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculate //-B Relationship of Activities to the	e Accomplis	ted in column (e) of	Part XVI A c	13 es	ly to the
13 Tot See work Part X\ Line No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculate //-B Relationship of Activities to the	e Accomplis	ted in column (e) of	Part XVI A c	13 es	ly to the
13 Tot See work Part X\ Line No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculate //-B Relationship of Activities to the	e Accomplis	ted in column (e) of	Part XVI A c	13 es	ly to the
13 Tot See work Part X\ Line No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculate //-B Relationship of Activities to the	e Accomplis	ted in column (e) of	Part XVI A c	13 es	ly to the
13 Tot See work Part X\ Line No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculate //-B Relationship of Activities to the	e Accomplis	ted in column (e) of	Part XVI A c	13 es	ly to the
13 Tot See work Part X\ Line No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculate //-B Relationship of Activities to the	e Accomplis	ted in column (e) of	Part XVI A c	13 es	ly to the
13 Tot See work Part X\ Line No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculate //-B Relationship of Activities to the	e Accomplis	ted in column (e) of	Part XVI A c	13 es	ly to the
13 Tot See work Part X\ Line No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculate //-B Relationship of Activities to the	e Accomplis	ted in column (e) of	Part XVI A c	13 es	ly to the
13 Tot See work Part X\ Line No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculate //-B Relationship of Activities to the	e Accomplis	ted in column (e) of	Part XVI A c	13 es	ly to the
13 Tot See work Part X\ Line No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculate //-B Relationship of Activities to the	e Accomplis	ted in column (e) of	Part XVI A c	13 es	ly to the
13 Tot See work Part X\ Line No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculate //-B Relationship of Activities to the	e Accomplis	ted in column (e) of	Part XVI A c	13 es	ly to the
13 Tot See work Part X\ Line No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculate //-B Relationship of Activities to the	e Accomplis	ted in column (e) of	Part XVI A c	13 es	ly to the
13 Tot See work Part X\ Line No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculate //-B Relationship of Activities to the	e Accomplis	ted in column (e) of	Part XVI A c	13 es	ly to the
13 Tot See work Part X\ Line No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculate //-B Relationship of Activities to the	e Accomplis	ted in column (e) of	Part XVI A c	13 es	ly to the
13 Tot See work Part X\ Line No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculate //-B Relationship of Activities to the	e Accomplis	ted in column (e) of	Part XVI A c	13 es	ly to the
13 Tot See work Part X\ Line No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculate //-B Relationship of Activities to the	e Accomplis	ted in column (e) of	Part XVI A c	13 es	ly to the
13 Tot See work Part X\ Line No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculate //-B Relationship of Activities to the	e Accomplis	ted in column (e) of	Part XVI A c	13 es	ly to the
13 Tot See work Part X\ Line No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculate //-B Relationship of Activities to the	e Accomplis	ted in column (e) of	Part XVI A c	13 es	ly to the
13 Tot See work Part X\ Line No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculate //-B Relationship of Activities to the	e Accomplis	ted in column (e) of	Part XVI A c	13 es	ly to the
13 Tot See work Part X\ Line No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculate //-B Relationship of Activities to the	e Accomplis	ted in column (e) of	Part XVI A c	13 es	ly to the
13 Tot See work Part X\ Line No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculate //-B Relationship of Activities to the	e Accomplis	ted in column (e) of	Part XVI A c	13 es	ly to the

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

1 Did th	o organization directly	or indirectly e	engage in any of the follow	ing with ar	ov other organization	nn		Yes	No
descri	bed in section 501(c) to to political organiza	(other than see	ction 501(c)(3) organization	ns) or in se	ection 527,				}
	3 1		a noncharitable exempt of	roanization	n of				
(1) Ca		g touridation to	a nonenantable exempt of	garnzation	, 0.		1 a (1)		X
· · · · · · · · · · · · · · · · · · ·	ther assets						1 a (2)		X
. • •	transactions						1 4 (2)		$\vdash \stackrel{\wedge}{\vdash}$
	ales of assets to a nor	ncharitable eve	mot organization				1 b (1)		X
• •			, -				<u>``</u>		
• •			able exempt organization				1 b (2)		X
. ,	ental of facilities, equi		r assets				1 b (3)		X
٠,	eimbursement arrange						1 b (4)		X
٠,	ans or loan guarante						1 b (5)		X
\- /			ip or fundraising solicitatio				1 b (6)		X
c Sharir	ng of facilities, equipm	nent, mailing lis	sts, other assets, or paid e	mployees			1 c		X
d It the	anamer to any of the	abaya in 'Vas '	complete the following sch	andula Ca	lumn (h) chould alu	vave chow the fair r	markat val	uo of	
the go	answer to any of the a ods, other assets, or se	above is fes,	complete the following sch the reporting foundation. If the	ne foundati	on received less that	r fair market value in	narket van	ue oi	
any tr	ansaction or sharing a	arrangement, s	how in column (d) the valu	e of the go	oods, other assets,	or services receive	d		
(a) Line no	(b) Amount involved	(c) Name (of noncharitable exempt organizati	on	(d) Description of tran	isfers, transactions, and	sharing arrar	gement	is
N/A									
		<u> </u>							
			·····						
		<u> </u>						_	
		-					-		
		 			.				
				- +					
	******			+					—
		 			· <u>·</u> ······				
		 							
		<u> </u>							
2 a is the	foundation directly or in	directly affiliated	d with, or related to, one or notion 501(c)(3)) or in section	nore tax-ex	empt organizations		□vac	[v]	No
	• •	•	short bur(c)(b)) or in section	JII 3277			∐Yes	X	NO
	complete the follow		(I) Tune of second			. Danamatica of well			
	(a) Name of organizat	.1011	(b) Type of organi	2011011	(c) Description of rela	ationship		
N/A									
						.			
corre	r penalties of perjury, I decla ct, and complete. Declaration	ire that I have exam n of preparer (other	ined this return, including accompa than taxpayer) is based on all infor	nying schedul mation of whi	es and statements, and to ch preparer has any know	o the best of my knowledg riedge	e and belief,	it is true	:
Sign	11: 1-	//	_				May the I	RS disc	uss
Here	1/1/1/1/				TREASURER		this return preparer	shown b	ie below?
Sic	anature of officer or trustee		Date 1	7-	Title		See instru	yctions Yes	
	Print/Type preparer's na	ime	Preparells signature	-//	Tat of	Chart ,	PTIN	165	No
5	i i		Tool 1		1 77 72 7	Checkif		200	
Paid	JACK D. OUJ		JACK D. OUTC	PA	1/6-23-20	r	P00314	383	
Preparer	_		CPA, INC.			Firm s EIN 20-0	108372		
Use Only				<u>0\6</u>					
	<u> </u>	VALL, NJ O	7719			Phone no 732-	556-42 <u>1</u>	<u> 5</u>	
BAA							Form 990)-PF (2019)

Schedule B

(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

► Go to www irs gov/Form990 for the latest information.

OMB No 1545 0047

2019

Employer identification number

ALAN	& VICKI LEVINE	FAMILY FOU	INDAT	ION	84-3356444		
Organization type (check one)							
Filers of:		Section:					
Form 990 or 990-EZ		501(c)() (enter number) organization					
		4947(a)(1)	nonexe	mpt charitable trust not treated as	a private foundation		
Form 99	0-PF	527 political organization					
		501(c)(3) exempt private foundation					
		4947(a)(1)	nonexe	mpt charitable trust treated as a p	rivate foundation		
		X 501(c)(3) ta	xable p	orivate 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						
X	For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.						
Special	Rules						
	under sections 509(a)(received from any or	(1) and 170(b)(1)(A ne contributor, dur)(vi), th	at checked Schedule A (Form 990 or	at met the 33·1/3% support test of the regulations 990·EZ), Part II, line 13, 16a, or 16b, and that eater of (1) \$5,000, or (2) 2% of the amount on (i)		
	during the year, total	I contributions of r	more th		or 990-EZ that received from any one contributor, s, charitable, scientific, literary, or educational s I, II, and III		
during the year, o \$1,000 If this bo charitable, etc , p		on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than is checked, enter here the total contributions that were received during the year for an exclusively religious, curpose. Don't complete any of the parts unless the General Rule applies to this organization because clusively religious, charitable, etc., contributions totaling \$5,000 or more during the year.					

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't 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 doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Name of organization

ΔΤΔΝ	۲.	VTCKT	IFVINE	FAMILY	FOUNDATION
ALAN	CV	V I L.IN I	LICIVITY	LUDITION	LOCKDALION

Part I Contributors (see instructions) Use duplicate copies of Part I if additional space is needed

	1	1			
Employe	r identification numb	oer			
84-33	356444	_			
s	(d Type of co				
	Person				
	Payroll				
194.	Noncash				

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	N/A	\$ <u>997,194</u> .	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash Complete Part II for noncash contributions)
BAA	TEFA07021 09/09/10	Schedule B (Form 99	1 990-F7 or 990-PF) (2019)

Schedule B (Form 990, 990-EZ, or 990-PF) (2019)

BAA

Name of organization ALAN & VICKI LEVINE FAMILY FOUNDATION Employer identification number

84-3356444 Part II Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed (d) Date received (a) No. from Part I (b)
Description of noncash property given (c) FMV (or estimate) (See instructions.) VANGUARD WHITEHALL HIGH DIVIDEND YIELD ETF 1___ 10/31/19 997,194. (c) FMV (or estimate) (d) Date received (a) No. from Part I (b) Description of noncash property given (See instructions.) (a) No. from (d) (b) (c) FMV (or estimate) Date received Description of noncash property given Part I (See instructions.) (a) No. from Part I (b)
Description of noncash property given (c) FMV (or estimate) (See instructions.) (d) Date received (a) No. from (c) FMV (or estimate) (d) Date received (b) Description of noncash property given Part I (See instructions.) (a) No. from Part I (b) Description of noncash property given (d) (c) FMV (or estimate) Date received (See instructions.)

FEDERAL STATEMENTS 2019 **ALAN & VICKI LEVINE FAMILY FOUNDATION** STATEMENT 1 FORM 990-PF, PART I, LINE 23 OTHER EXPENSES (A) (B) NET (C) **ADJUSTED** CHARITABLE ' **EXPENSES** INVESTMENT PURPOSES PER BOOKS INCOME NET INCOME 1,282. \$ 1<u>,282.</u> 1,282. ACCOUNT MANAGEMENT FEES 1,282. \$ 1,282. TOTAL \$ 1,282. **STATEMENT 2** FORM 990-PF, PART II, LINE 13 **INVESTMENTS - OTHER** VALUATION BOOK FAIR MARKET METHOD VALUE VALUE

STATEMENT 3 FORM 990-PF, PART III, LINE 3 OTHER INCRÉASES

OTHER PUBLICLY TRADED SECURITIES

VANGUARD WHITEHALL FDS HIGH DIVIDEND YIE

NET UNREALIZED GAINS OR LOSSES ON INVESTMENTS

45,0<u>44.</u> 45,044. TOTAL

\$ 1,042,238. \$ 1,042,238.

TOTAL \$ 1,042,238. \$ 1,042,238.

PAGE 1

84-3356444

0.

STATEMENT 4 FORM 990-PF, PART VII-A, LINE 10 SUBSTANTIAL CONTRIBUTORS DURING THE TAX YEAR

NAME OF SUBSTANTIAL CONTRIBUTOR

ADDRESS OF SUBSTANTIAL CONTRIBUTOR

ALAN LEVINE

3701 NE 30TH AVE LIGHTHOUSE POINT, FL 33064

MKT VAL

2019

FEDERAL STATEMENTS

PAGE 2

ALAN & VICKI LEVINE FAMILY FOUNDATION

84-3356444

STATEMENT 5 FORM 990-PF, PART VIII, LINE 1 LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED	COMPEN- SATION	CONTRI- BUTION TO EBP & DC	
ALAN LEVINE 3701 NE 30TH AVE LIGHTHOUSE POINT, FL 33064	PRESIDENT 0	\$ 0.	\$ 0.	\$ 0.
VICKI LEVINE 3701 NE 30TH AVE LIGHTHOUSE POINT, FL 33064	TREASURER 0	0.	0.	0.
GARRETT LEVINE 141 5TH AVE # 8D NEW YORK, NY 10010	VICE PRESIDENT 0	0.	0.	0.
VICTORIA LEVINE 1575 BRIARVISTA WAY NE ATLANTA, GA 30329	SECRETARY 0	0.	0.	0.
ELIZABETH LEVINE 141 5TH AVE # 8D NEW YORK, NY 10010	VICE PRESIDENT 0	0.	0.	0.
	TOTAL	\$ 0.	\$ 0.	\$ 0.