Form **990-PF**

Department of the Treasury
Internal Revenue Service (77)

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

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

OMB No 1545-0052

2009

For calendar year 2009, or tax year beginning , and ending

G Check all that apply ☐ Initial return ☐ Initial return of a former public charity ☐ Final return
☐ Amended return ☐ Address change ☐ Name change

Use the IRS label. Otherwise, print or type. See Specific Instructions.

Name of foundation: The Spano Family Charitable Foundation Inc

Number and street (or P O box number if mail is not delivered to street address): c/o Foundation Source, 501 Silverside Road — Room/suite: 123

City or town, state, and ZIP code: Wilmington DE 19809-1377

A Employer identification number: 20-3821314

B Telephone number (see page 10 of the instructions): (800) 839-1754

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 ▶ ☐

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 *(from Part II, col (c), line 16)* ▶ $ 1,376,660

J Accounting method ☒ Cash ☐ Accrual
☐ Other (specify)
(Part I, column (d) must be on cash basis)

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) (see page 11 of the instructions))*

		(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 (attach schedule)	5,250			
	2 Check ▶ ☒ if the foundation is **not** required to attach Sch B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities	32,672	32,672		
	5 a Gross rents				
	b Net rental income or (loss)				
	6 a Net gain or (loss) from sale of assets not on line 10	-1,986			
	b Gross sales price for all assets on line 6a 1,963,051				
	7 Capital gain net income (from Part IV, line 2)		0		
	8 Net short-term capital gain				
	9 Income modifications				
	10 a Gross sales less returns and allowances				
	b Less Cost of goods sold				
	c Gross profit or (loss) (attach schedule)				
	11 Other income (attach schedule)	5,551	-6		
	12 **Total.** Add lines 1 through 11	41,487	32,666		
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc				
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16 a Legal fees (attach schedule)				
	b Accounting fees (attach schedule)				
	c Other professional fees (attach schedule)	6,432	6,432		
	17 Interest				
	18 Taxes (attach schedule) (see page 14 of the instructions)	8	8		
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule)	9,503	11		9,492
	24 **Total operating and administrative expenses.** Add lines 13 through 23	15,943	6,451		9,492
	25 Contributions, gifts, grants paid	121,500			121,500
	26 **Total expenses and disbursements.** Add lines 24 and 25	137,443	6,451		130,992
	27 Subtract line 26 from line 12				
	a **Excess of revenue over expenses and disbursements**	-95,956			
	b **Net investment income** (if negative, enter -0-)		26,215		
	c **Adjusted net income** (if negative, enter -0-)				

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

		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash—non-interest-bearing			
	2 Savings and temporary cash investments	860,992	27,811	27,811
	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 (attach schedule) (see page 15 of the instructions)			
	7 Other notes and loans receivable (attach schedule) ▶			
	Less allowance for doubtful accounts ▶			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10 a Investments—U S and state government obligations (attach schedule)			
	b Investments—corporate stock (attach schedule)	344,338	1,081,563	1,348,849
	c Investments—corporate bonds (attach schedule)			
	11 Investments—land, buildings, and equipment basis ▶			
	Less accumulated depreciation (attach schedule) ▶			
	12 Investments—mortgage loans			
	13 Investments—other (attach schedule)			
	14 Land, buildings, and equipment basis ▶			
	Less accumulated depreciation (attach schedule) ▶			
	15 Other assets (describe ▶)			
	16 **Total assets** (to be completed by all filers—see the instructions Also, see page 1, item I)	1,205,330	1,109,374	1,376,660
Liabilities	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 (attach schedule)			
	22 Other liabilities (describe ▶)			
	23 **Total liabilities** (add lines 17 through 22)	0	0	
Net Assets or Fund Balances	**Foundations that follow SFAS 117, check here ▶ ☐ 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 ▶ ☒ and complete lines 27 through 31.			
	27 Capital stock, trust principal, or current funds			
	28 Paid-in or capital surplus, or land, bldg , and equipment fund			
	29 Retained earnings, accumulated income, endowment, or other funds	1,205,330	1,109,374	
	30 **Total net assets or fund balances** (see page 17 of the instructions)	1,205,330	1,109,374	
	31 **Total liabilities and net assets/fund balances** (see page 17 of the instructions)	1,205,330	1,109,374	

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	1,205,330
2	Enter amount from Part I, line 27a	2	-95,956
3	Other increases not included in line 2 (itemize) ▶	3	0
4	Add lines 1, 2, and 3	4	1,109,374
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	1,109,374

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	Publicly-traded Securities			
b	Passthrough K1 Capital Gain/Loss			
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	1,965,783		1,965,037	746
b	-2,732		0	-2,732
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** -1,986

3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see pages 13 and 17 of the instructions) 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 page 18 of 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))
2008	124,942	1,403,116	0 089046
2007	292,283	1,780,019	0 164202
2006	203,993	1,798,471	0 113426
2005	0	796,694	0 000000
2004			0 000000

2 **Total** of line 1, column (d)	2	0 366674
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	0 091669
4 Enter the net value of noncharitable-use assets for 2009 from Part X, line 5	4	1,172,791
5 Multiply line 4 by line 3	5	107,509
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	262
7 Add lines 5 and 6	7	107,771
8 Enter qualifying distributions from Part XII, line 4	8	130,992

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 on page 18.

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instructions)

1 a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ 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 ▶ ☒ and enter 1% of Part I, line 27b	1	262
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	262
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	4	
5	**Tax based on investment income.** Subtract line 4 from line 3 If zero or less, enter -0-	5	262
6	Credits/Payments		
a	2009 estimated tax payments and 2008 overpayment credited to 2009 — 6a: 500		
b	Exempt foreign organizations—tax withheld at source — 6b:		
c	Tax paid with application for extension of time to file (Form 8868) — 6c: 0		
d	Backup withholding erroneously withheld — 6d:		
7	Total credits and payments Add lines 6a through 6d	7	500
8	Enter any **penalty** for underpayment of estimated tax Check here ☐ if Form 2220 is attached	8	0
9	**Tax due.** If the total of lines 5 and 8 is more than line 7, enter **amount owed** ▶	9	0
10	**Overpayment.** If line 7 is more than the total of lines 5 and 8, enter the **amount overpaid** ▶	10	238
11	Enter the amount of line 10 to be **Credited to 2010 estimated tax** ▶ 238 **Refunded** ▶	11	0

Part VII-A Statements Regarding Activities

			Yes	No
1 a	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?	1a		X
b	Did it spend more than $100 during the year (either directly or indirectly) for political purposes (see page 19 of the instructions for definition)?	1b		X
	If the answer is "Yes" to ***1a*** *or* ***1b****, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities*			
c	Did the foundation file **Form 1120-POL** for this year?	1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year **(1)** On the foundation ▶ $ ________ **(2)** On foundation managers ▶ $ ________			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ▶ $ ________			
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*	2		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*	3		X
4 a	Did the foundation have unrelated business gross income of $1,000 or more during the year?	4a		X
b	If "Yes," has it filed a tax return on **Form 990-T** for this year?	4b	N/A	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? *If "Yes," attach the statement required by General Instruction T*	5		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?	6	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*	7	X	
8 a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the instructions) ▶ DE			
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*	8b	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 2009 or the taxable year beginning in 2009 (see instructions for Part XIV on page 27)? *If "Yes," complete Part XIV*	9		X
10	Did any persons become substantial contributors during the tax year? *If "Yes," attach a schedule listing their names and addresses*	10		X

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

			Yes	No
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 page 20 of the instructions)	11		X
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	

Website address ▶

14 The books are in care of ▶ c/o Foundation Source Telephone no ▶ (800) 839-1754
Located at ▶ 501 Silverside Road, Suite 123, Wilmington, DE ZIP+4 ▶ 19809-1377

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

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?	☐ Yes ☒ No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	☐ Yes ☒ No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	☐ Yes ☒ No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	☐ Yes ☒ 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)?	☐ Yes ☒ No			
	(6) Agree to pay money or property to a government official? (**Exception.** Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days)	☐ Yes ☒ 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 page 20 of the instructions)?		1b	N/A	
	Organizations relying on a current notice regarding disaster assistance check here ▶ ☐				
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 2009?		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 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2009?	☐ Yes ☒ No			
	If "Yes," list the years ▶ 20______ , 20______ , 20______ , 20______				
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 page 20 of the instructions)		2b	N/A	
c	If the provisions of section 4942(a)(2) are being applied to **any** of the years listed in 2a, list the years here ▶ 20______ , 20______ , 20______ , 20______				
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	☐ Yes ☒ No			
b	If "Yes," did it have excess business holdings in 2009 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 2009)*		3b	N/A	
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 2009?		4b		X

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)? (see page 22 of the instructions) ☐ 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 page 22 of the instructions)? **5b** 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? ☐ 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? **6b** No: X

If "Yes" to 6b, file Form 8870

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? **7b** N/A

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 (see page 22 of the instructions).

(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
SEE ATTACHMENT				

2 Compensation of five highest-paid employees (other than those included on line 1—see page 23 of the instructions). 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 ▶

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

3 Five highest-paid independent contractors for professional services (see page 23 of the instructions). If none, enter "NONE."

(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 ▶	

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 NONE	
2	
3	
4	

Part IX-B **Summary of Program-Related Investments** (see page 24 of the instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 NONE	
2	
All other program-related investments See page 24 of the instructions 3	
Total. Add lines 1 through 3 ▶	0

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see page 24 of the 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	770,746
b	Average of monthly cash balances	1b	419,905
c	Fair market value of all other assets (see page 24 of the instructions)	1c	0
d	**Total** (add lines 1a, b, and c)	1d	1,190,651
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) 1e		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	1,190,651
4	Cash deemed held for charitable activities Enter 1½ % of line 3 (for greater amount, see page 25 of the instructions)	4	17,860
5	**Net value of noncharitable-use assets.** Subtract line 4 from line 3 Enter here and on Part V, line 4	5	1,172,791
6	**Minimum investment return.** Enter 5% of line 5	6	58,640

Part XI Distributable Amount (see page 25 of the 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	58,640
2a	Tax on investment income for 2009 from Part VI, line 5	2a	262		
b	Income tax for 2009 (This does not include the tax from Part VI)	2b			
c	Add lines 2a and 2b			2c	262
3	Distributable amount before adjustments Subtract line 2c from line 1			3	58,378
4	Recoveries of amounts treated as qualifying distributions			4	0
5	Add lines 3 and 4			5	58,378
6	Deduction from distributable amount (see page 25 of the instructions)			6	
7	**Distributable amount** as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1			7	58,378

Part XII Qualifying Distributions (see page 25 of the 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	130,992
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	0
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	**Qualifying distributions.** Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	130,992
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see page 26 of the instructions)	5	262
6	**Adjusted qualifying distributions.** Subtract line 5 from line 4	6	130,730

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

Part XIII Undistributed Income (see page 26 of the instructions)

			(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1	Distributable amount for 2009 from Part XI, line 7					58,378
2	Undistributed income, if any, as of the end of 2009					
a	Enter amount for 2008 only				0	
b	Total for prior years 20____, 20____, 20___			0		
3	Excess distributions carryover, if any, to 2009					
a	From 2004					
b	From 2005					
c	From 2006	124,174				
d	From 2007	206,662				
e	From 2008	54,690				
f	**Total** of lines 3a through e		385,526			
4	Qualifying distributions for 2009 from Part XII, line 4 ▶ $ 130,992					
a	Applied to 2008, but not more than line 2a				0	
b	Applied to undistributed income of prior years (Election required—see page 26 of the instructions)			0		
c	Treated as distributions out of corpus (Election required—see page 26 of the instructions)					
d	Applied to 2009 distributable amount					58,378
e	Remaining amount distributed out of corpus		72,614			
5	Excess distributions carryover applied to 2009 *(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		458,140			
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					
d	Subtract line 6c from line 6b Taxable amount—see page 27 of the instructions			0		
e	Undistributed income for 2008 Subtract line 4a from line 2a Taxable amount—see page 27 of the instructions				0	
f	Undistributed income for 2009 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2010					0
7	Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see page 27 of the instructions)					
8	Excess distributions carryover from 2004 not applied on line 5 or line 7 (see page 27 of the instructions)		0			
9	**Excess distributions carryover to 2010.** Subtract lines 7 and 8 from line 6a		458,140			
10	Analysis of line 9					
a	Excess from 2005	0				
b	Excess from 2006	124,174				
c	Excess from 2007	206,662				
d	Excess from 2008	54,690				
e	Excess from 2009	72,614				

Part XIV Private Operating Foundations (see page 27 of the instructions and Part VII-A, question 9) N/A

1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2009, enter the date of the ruling ▶

b Check box to indicate whether the foundation is a private operating foundation described in section ☐ 4942(j)(3) or ☐ 4942(j)(5)

	Tax year	Prior 3 years			
	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total
2 a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon					
a "Assets" alternative test—enter (1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test—enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test—enter (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					

Part XV Supplementary Information (Complete this part only if the foundation had $5,000 or more in assets at any time during the year—see page 28 of the instructions.)

1 Information Regarding Foundation Managers:

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than $5,000) (See section 507(d)(2))

See Attached Statement

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

None

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here ▶ ☒ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds If the foundation makes gifts, grants, etc (see page 28 of the instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

a The name, address, and telephone number of the person to whom applications should be addressed

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

c Any submission deadlines

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

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
200 CLUB OF MONMOUTH COUNTY INC 52 HOMINY HILL RD COLTS NECK NJ 07722	N/A	509(a)(1)	General & Unrestricted	130
A R M S INC 64 HARDING RD RED BANK NJ 07701	N/A	509(a)(1)	General & Unrestricted	2,750
ASHLEY LAUREN FOUNDATION 41 HWY 34S STE 103 COLTS NECK NJ 07722	N/A	509(a)(1)	Charitable Event	2,500
ASSOC IN MENTAL HEALTH & DEVELOP DISAB 370 BERKELEY RD ORANGE NJ 07050	N/A	509(a)(1)	General & Unrestricted	150
BERGEN COMMUNITY COLLEGE FOUNDATION 400 PARAMUS RD PARAMUS NJ 07652	N/A	509(a)(1)	General & Unrestricted	2,000
BRIDGE COMMUNITY CHURCH P O BOX 29724 ELKINS PARK PA 19027	N/A	509(a)(1)	Swaziland Relief Project	10,000
CAMP QUALITY USA INCORPORATED PO BOX 264 ADELPHIA NJ 07710	N/A	509(a)(2)	General & Unrestricted	370
CENTRASTATE HEALTHCARE FOUNDATION PO BOX 6427 FREEHOLD NJ 07728	N/A	509(a)(1)	Charitable Event	1,000
CEREBRAL PALSY OF NJ INC 1005 WHITEHEAD RD EXT #1 EWING NJ 08638	N/A	509(a)(1)	General & Unrestricted	7,105
CEREBRAL PALSY OF NJ INC 1005 WHITEHEAD RD EXT #1 EWING NJ 08638	N/A	509(a)(1)	Charitable Event	10,000
CEREBRAL PALSY OF NJ INC 1005 WHITEHEAD RD EXT #1 EWING NJ 08638	N/A	509(a)(1)	Charitable Event	1,450
CHAIN OF HOPE 18 NEW AMWELL RD HILLSBOROUGH NJ 08844	N/A	509(a)(1)	Charitable Event	900
CHEERFUL GIVERS 1287 BERRY RIDGE RD EAGAN MN 55123	N/A	509(a)(1)	General & Unrestricted	200
COLLIER SERVICES 160 CONOVER RD WICKATUNK NJ 07765	N/A	509(a)(1)	General & Unrestricted	5,000
COLLIER SERVICES 160 CONOVER RD WICKATUNK NJ 07765	N/A	509(a)(1)	Charitable Event	1,000
COMMUNITIES OF FAITH FOR HOUSING INC 300 BLOOMFIELD ST HOBOKEN NJ 07030	N/A	509(a)(1)	Hoboken Shelter Program	1,000
Total See Attached Statement			▶ 3a	121,500
b *Approved for future payment*				
Total			▶ 3b	0

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated	Unrelated business income		Excluded by section 512, 513, or 514		(e)
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See page 28 of the instructions)
1 Program service revenue.					
a					
b					
c					
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments					
4 Dividends and interest from securities			14	32,672	
5 Net rental income or (loss) from real estate					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory			18	-1,986	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue a Federal Tax Refund			01	5,557	
b K-1 Pass-Through Loss			14	-6	
c					
d					
e					
12 Subtotal Add columns (b), (d), and (e)		0		36,237	0

13 Total. Add line 12, columns (b), (d), and (e) 13 36,237

(See worksheet in line 13 instructions on page 28 to verify calculations)

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See page 28 of the instructions)
	N/A

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

			Yes	No
1	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?			
a	Transfers from the reporting foundation to a noncharitable exempt organization of			
	(1) Cash	1a(1)		X
	(2) Other assets	1a(2)		X
b	Other transactions			
	(1) Sales of assets to a noncharitable exempt organization	1b(1)		X
	(2) Purchases of assets from a noncharitable exempt organization	1b(2)		X
	(3) Rental of facilities, equipment, or other assets	1b(3)		X
	(4) Reimbursement arrangements	1b(4)		X
	(5) Loans or loan guarantees	1b(5)		X
	(6) Performance of services or membership or fundraising solicitations	1b(6)		X
c	Sharing of facilities, equipment, mailing lists, other assets, or paid employees	1c		X

d 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

(a) Line no	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements
N/A			

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 or fiduciary) is based on all information of which preparer has any knowledge

Signature of officer or trustee | Date 7/26/10 | Title President

Paid Preparer's Use Only

Preparer's signature Jeffrey D. Haskell	Date 7/13/2010	Check if self-employed ☐	Preparer's identifying number (see Signature on page 30 of the instructions)
Firm's name (or yours if self-employed), address, and ZIP code	FOUNDATION SOURCE 55 WALLS DRIVE, FAIRFIELD, CT 06824	EIN	Phone no (800) 839-1754

Form 990-PF, Part I, Line 11 - Other Income

		(a) Expenses per Books	(b) Net Investment Income
	TOTAL:	5,551	-6
1	US OIL FUND LP K-1 Pass-Through Share of Partnership Income/(Loss)	-6	-6
2	Federal Tax Refund 12/08 990PF	5,557	0
3			
4			
5			
6			
7			
8			
9			
10			

Form 990-PF, Part I, Line 16c - Other Professional Fees

		(a) Expenses per Books	(b) Net Investment Income	(c) Adjusted Net Income	(d) Charitable Purpose
	TOTAL:	6,432	6,432	0	0
1	Investment Management Services	6,432	6,432		0
2					
3					
4					
5					
6					
7					
8					
9					
10					

Form 990-PF, Part I, Line 18 - Taxes

		(a) Expenses per Books	(b) Net Investment Income	(c) Adjusted Net Income	(d) Charitable Purpose
	TOTAL:	8	8	0	0
1	Foreign Tax Paid	8	8		0
2					
3					
4					
5					
6					
7					
8					
9					
10					

Form 990-PF, Part I, Line 23 - Other Expenses

		(a) Expenses per Books	(b) Net Investment Income	(c) Adjusted Net Income	(d) Charitable Purpose
	TOTAL:	9,503	11	0	9,492
1	Administrative Fees	9,492	0	0	9,492
2	Bank Charge	11	11		0
3					
4					
5					
6					
7					
8					
9					
10					

Form 990-PF, Part II, Line 10b - Investments: Corporate Stock

	Description/Symbol/CUSIP Number	Shares	Line 10b - Column (b) Book Value	Line 10b - Column (c) Fair Market Value
		TOTAL:	1,081,563	1,348,849
1	FPA CRESCENT PORTFOLIO (FPACX)	7,770	193,436	192,864
2	IVA WORLDWIDE FUND CLASS I (IVWIX)	12,680	160,854	186,020
3	LOOMIS SAYLES FDS INV GRADE BOND FD CL Y TR II (LSIIX)	10,290	110,584	120,192
4	NUVEEN TRADEWINDS GLOBAL ALL-CAP FUND CL R (NWGRX)	2,791	59,366	67,336
5	PIMCO FDS PACIFIC INV MGMT (PAUIX)	12,152	127,679	124,554
6	PIMCO Total Return Fund (PTTRX)	10,660	111,545	115,125
7	PIMCO UNCONSTRAINED BOND FUND, INST CL (PFIUX)	11,181	122,079	120,758
8	TASEKO MINES LIMITED (TGB)	100,000	196,020	422,000
9				
10				

Form 990-PF, Part VIII, Line 1 - Compensation of Officers, Directors, Trustees and Foundation Managers

	Name	Street	City	State	Zip Code	Title	Avg Hrs.	Comp	Benefits	Expense Account
						TOTAL:		0	0	0
1	Gabrielle Spano	c/o Foundation Source 501 Silverside Road Suite 123	Wilmington	DE	19809	Director / Secretary	1	0	0	0
2	Thomas Spano	c/o Foundation Source 501 Silverside Road Suite 123	Wilmington	DE	19809	President / Director	1	0	0	0
3	Claire Spano	c/o Foundation Source 501 Silverside Road Suite 123	Wilmington	DE	19809	Vice President	1	0	0	0
4	James Spano	c/o Foundation Source 501 Silverside Road Suite 123	Wilmington	DE	19809	Vice President	1	0	0	0
5	Joseph Spano	c/o Foundation Source 501 Silverside Road Suite 123	Wilmington	DE	19809	Vice President	1	0	0	0
6	Mary Spano Gleckner	c/o Foundation Source 501 Silverside Road Suite 123	Wilmington	DE	19809	Vice President	1	0	0	0
7	Thomas Gleckner	c/o Foundation Source 501 Silverside Road Suite 123	Wilmington	DE	19809	Vice President	1	0	0	0
8	Anthony T Psomas	c/o Foundation Source 501 Silverside Road Suite 123	Wilmington	DE	19809	Vice President / Director	1	0	0	0
9	Diane Spano	c/o Foundation Source 501 Silverside Road Suite 123	Wilmington	DE	19809	Vice President / Director	1	0	0	0
10										

Form 990-PF, Part XV, Line 1a - Information Regarding Foundation Managers

1	Claire Spano
2	Diane Spano
3	Joseph Spano
4	Mary Spano Gleckner
5	Thomas Gleckner
6	Thomas Spano
7	
8	
9	
10	

Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year

Recipient(s) paid during the year

Name				Person	Business
COUNCIL ON FOUNDATIONS INC				[ ]	[X]
Street					
2121 CRYSTAL DR STE 700					
City		**State**	**Zip code**	**Foreign Country**	
ARLINGTON		VA	22202		
Relationship	**Foundation Status**				
N/A	509(a)(1)				
Purpose of grant/contribution					**Amount**
2009 membership Program					500

Name				Person	Business
COURT APPOINTED SPECIAL ADVOCATES OF NJ INC				[ ]	[X]
Street					
613 HOPE RD STE 4					
City		**State**	**Zip code**	**Foreign Country**	
EATONTOWN		NJ	07724		
Relationship	**Foundation Status**				
N/A	509(a)(1)				
Purpose of grant/contribution					**Amount**
General & Unrestricted					2,500

Name				Person	Business
FEAL GOOD FOUNDATION INC				[ ]	[X]
Street					
144 SHENANDOAH BLVD N					
City		**State**	**Zip code**	**Foreign Country**	
NESCONSET		NY	11767		
Relationship	**Foundation Status**				
N/A	509(a)(1)				
Purpose of grant/contribution					**Amount**
General & Unrestricted					11,000

Name				Person	Business
FOODBANK OF MONMOUTH AND OCEAN COUNTIES INC				[ ]	[X]
Street					
3300 ROUTE 66					
City		**State**	**Zip code**	**Foreign Country**	
NEPTUNE		NJ	07753		
Relationship	**Foundation Status**				
N/A	509(a)(2)				
Purpose of grant/contribution					**Amount**
General & Unrestricted					28,100

Name				Person	Business
FOREST CITY FIRE DEPT				[ ]	[X]
Street					
340 MAIN ST					
City		**State**	**Zip code**	**Foreign Country**	
FOREST CITY		PA	18421		
Relationship	**Foundation Status**				
N/A	509(a)(1)				
Purpose of grant/contribution					**Amount**
Charitable Event					500

Name				Person	Business
FOX CHASE CANCER CENTER				[ ]	[X]
Street					
333 COTTMAN AVE					
City		**State**	**Zip code**	**Foreign Country**	
PHILADELPHIA		PA	19111		
Relationship	**Foundation Status**				
N/A	509(a)(1)				
Purpose of grant/contribution					**Amount**
General & Unrestricted					500

Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year

Recipient(s) paid during the year

Name FREEHOLD BOROUGH EDUCATIONAL FOUNDATION INC			☐ Person	☒ Business
Street 280 PARK AVE				
City FREEHOLD	**State** NJ	**Zip code** 07728	**Foreign Country**	
Relationship N/A	**Foundation Status** 509(a)(1)			
Purpose of grant/contribution General & Unrestricted				**Amount** 100

Name FRIENDS OF THE MONMOUTH COUNTY CHILD ADVOCACY CENTER			☐ Person	☒ Business
Street 75 W MAIN ST				
City FREEHOLD	**State** NJ	**Zip code** 07728	**Foreign Country**	
Relationship N/A	**Foundation Status** 509(a)(1)			
Purpose of grant/contribution General & Unrestricted				**Amount** 10,000

Name HOLMDEL KIWANIS FOUNDATION INC			☐ Person	☒ Business
Street PO BOX 114				
City HOLMDEL	**State** NJ	**Zip code** 07733	**Foreign Country**	
Relationship N/A	**Foundation Status** 509(a)(1)			
Purpose of grant/contribution Charitable Event				**Amount** 1,500

Name IEP YOUTH SERVICES INC			☐ Person	☒ Business
Street 75 W MAIN ST				
City FREEHOLD	**State** NJ	**Zip code** 07728	**Foreign Country**	
Relationship N/A	**Foundation Status** 509(a)(2)			
Purpose of grant/contribution General & Unrestricted				**Amount** 1,100

Name JUVENILE DIABETES RESEARCH FOUNDATION - SO NJ CHAP			☐ Person	☒ Business
Street 1415 ROUTE 70 EAST,SUITE 502				
City CHERRY HILL	**State** NJ	**Zip code** 08034	**Foreign Country**	
Relationship N/A	**Foundation Status** 509(a)(1)			
Purpose of grant/contribution General & Unrestricted				**Amount** 2,500

Name MARINE CORPS LEAGUE			☐ Person	☒ Business
Street PO BOX 885				
City FREEHOLD	**State** NJ	**Zip code** 07728	**Foreign Country**	
Relationship N/A	**Foundation Status** 509(a)(1)			
Purpose of grant/contribution Charitable Event				**Amount** 100

Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year

Recipient(s) paid during the year

Name				Person	Business
MARINE GRADUATION FOUNDATION					X
Street					
2837 CHARLES ST					
City	**State**	**Zip code**	**Foreign Country**		
SAINT JOSEPH	MO	64501			
Relationship	**Foundation Status**				
N/A	509(a)(1)				
Purpose of grant/contribution				**Amount**	
General & Unrestricted				250	

Name				Person	Business
MARKET STREET MISSION INC					X
Street					
9 MARKET ST					
City	**State**	**Zip code**	**Foreign Country**		
MORRISTOWN	NJ	07960			
Relationship	**Foundation Status**				
N/A	509(a)(1)				
Purpose of grant/contribution				**Amount**	
Feed and Care for 30 People				110	

Name				Person	Business
MERIDIAN HEALTH SYSTEM INC					X
Street					
MERIDIAN HEALTH AFFILIATED FOUNDATIONS GALA 4900 RTE 33, STE 100					
City	**State**	**Zip code**	**Foreign Country**		
NEPTUNE	NJ	07753			
Relationship	**Foundation Status**				
N/A	509(a)(3)				
Purpose of grant/contribution				**Amount**	
Charitable Event				3,750	

Name				Person	Business
MERIDIAN HEALTH SYSTEM INC					X
Street					
MERIDIAN HEALTH AFFILIATED FOUNDATIONS GALA 4900 RTE 33, STE 100					
City	**State**	**Zip code**	**Foreign Country**		
NEPTUNE	NJ	07753			
Relationship	**Foundation Status**				
N/A	509(a)(3)				
Purpose of grant/contribution				**Amount**	
Charitable Event				3,750	

Name				Person	Business
MONMOUTH MEDICAL CENTER FOUNDATION INC					X
Street					
300 2ND AVE					
City	**State**	**Zip code**	**Foreign Country**		
LONG BRANCH	NJ	07740			
Relationship	**Foundation Status**				
N/A	509(a)(1)				
Purpose of grant/contribution				**Amount**	
Charitable Event				100	

Name				Person	Business
NATIONAL MULTIPLE SCLEROSIS SOCIETY					X
Street					
246 MONMOUTH RD					
City	**State**	**Zip code**	**Foreign Country**		
OAKHURST	NJ	07755			
Relationship	**Foundation Status**				
N/A	509(a)(1)				
Purpose of grant/contribution				**Amount**	
General & Unrestricted				250	

Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year

Recipient(s) paid during the year

Name				Person / Business	
SHARE OUR STRENGTH INC				[ ] Person [X] Business	
Street					
1730 M ST NW STE 700					
City	**State**	**Zip code**	**Foreign Country**		
WASHINGTON	DC	20036			
Relationship	**Foundation Status**				
N/A	509(a)(1)				
Purpose of grant/contribution					**Amount**
General & Unrestricted					150

Name				Person / Business	
SOUTH TRYON COMMUNITY CHURCH				[ ] Person [X] Business	
Street					
2516 SOUTH TRYON ROAD					
City	**State**	**Zip code**	**Foreign Country**		
CHARLOTTE	NC	28203			
Relationship	**Foundation Status**				
N/A	509(a)(1)				
Purpose of grant/contribution					**Amount**
Fresh Start Program					500

Name				Person / Business	
SPECIAL OLYMPICS NEW JERSEY INC				[ ] Person [X] Business	
Street					
3 PRINCESS RD					
City	**State**	**Zip code**	**Foreign Country**		
LAWRENCEVILLE	NJ	08648			
Relationship	**Foundation Status**				
N/A	509(a)(1)				
Purpose of grant/contribution					**Amount**
General & Unrestricted					500

Name				Person / Business	
ST JUDE CHILDRENS RESEARCH HOSPITAL INC				[ ] Person [X] Business	
Street					
332 N LAUDERDALE ST STOP 512					
City	**State**	**Zip code**	**Foreign Country**		
MEMPHIS	TN	38105			
Relationship	**Foundation Status**				
N/A	509(a)(1)				
Purpose of grant/contribution					**Amount**
General & Unrestricted					1,000

Name				Person / Business	
ST ROSE OF LIMA PARISH				[ ] Person [X] Business	
Street					
16 MCLEAN STREET					
City	**State**	**Zip code**	**Foreign Country**		
FREEHOLD	NJ	07728			
Relationship	**Foundation Status**				
N/A	509(a)(1)				
Purpose of grant/contribution					**Amount**
Charitable Event					1,000

Name				Person / Business	
ST ROSE OF LIMA PARISH				[ ] Person [X] Business	
Street					
16 MCLEAN STREET					
City	**State**	**Zip code**	**Foreign Country**		
FREEHOLD	NJ	07728			
Relationship	**Foundation Status**				
N/A	509(a)(1)				
Purpose of grant/contribution					**Amount**
Charitable Event					1,000

Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year

Recipient(s) paid during the year

Name				Person	Business
SUSAN G KOMEN BREAST CANCER FOUNDATION					X
Street					
PO BOX 4810					
City	**State**	**Zip code**	**Foreign Country**		
ASPEN	CO	81612			
Relationship	**Foundation Status**				
N/A	509(a)(1)				
Purpose of grant/contribution					**Amount**
Charitable Event					250

Name				Person	Business
SUSAN G KOMEN BREAST CANCER FOUNDATION					X
Street					
125 S 9TH ST STE 202					
City	**State**	**Zip code**	**Foreign Country**		
PHILADELPHIA	PA	19107			
Relationship	**Foundation Status**				
N/A	509(a)(1)				
Purpose of grant/contribution					**Amount**
General & Unrestricted					100

Name				Person	Business
THE CARING HOUSE PROJECT INC					X
Street					
1177 GEORGE BUSH BL					
City	**State**	**Zip code**	**Foreign Country**		
DELRAY BEACH	FL	33483			
Relationship	**Foundation Status**				
N/A	509(a)(1)				
Purpose of grant/contribution					**Amount**
Badwater Marathon Fund					135

Name				Person	Business
THE LEUKEMIA & LYMPHOMA SOCIETY INC , NYC CHAP					X
Street					
475 PARK AVE SOUTH, 8TH FLR					
City	**State**	**Zip code**	**Foreign Country**		
NEW YORK	NY	10016			
Relationship	**Foundation Status**				
N/A	509(a)(1)				
Purpose of grant/contribution					**Amount**
Charitable Event					100

Name				Person	Business
URBANPROMISE MINISTRIES INC					X
Street					
PO BOX 1479					
City	**State**	**Zip code**	**Foreign Country**		
CAMDEN	NJ	08105			
Relationship	**Foundation Status**				
N/A	509(a)(1)				
Purpose of grant/contribution					**Amount**
General & Unrestricted					500

Name				Person	Business
WALK WITH JOE					X
Street					
P O BOX 434					
City	**State**	**Zip code**	**Foreign Country**		
MANALAPAN	NJ	07726			
Relationship	**Foundation Status**				
N/A	509(a)(1)				
Purpose of grant/contribution					**Amount**
General & Unrestricted					1,000

Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year

Recipient(s) paid during the year

Name
WELLNESS COMMUNITY-NO NJ SHORE THE GOLDSMITH CENTER ☐ Person ☒ Business
Street
613 HOPE RD
City	State	Zip code	Foreign Country
EATONTOWN	NJ	07724	

Relationship	Foundation Status
N/A	509(a)(1)

Purpose of grant/contribution	Amount
Charitable Event	100

Name
WESTERN MONMOUTH HABITAT FOR HUMANITY ☐ Person ☒ Business
Street
P O BOX 62
City	State	Zip code	Foreign Country
FREEHOLD	NJ	07728	

Relationship	Foundation Status
N/A	509(a)(1)

Purpose of grant/contribution	Amount
Charitable Event	1,000

Name
WHISPERING HOPE RANCH FOUNDATION ☐ Person ☒ Business
Street
9045 E PIMA CENTER PKWY
City	State	Zip code	Foreign Country
SCOTTSDALE	AZ	85258	

Relationship	Foundation Status
N/A	509(a)(1)

Purpose of grant/contribution	Amount
General & Unrestricted	2,000

Name
☐ Person ☐ Business
Street
City	State	Zip code	Foreign Country

Relationship	Foundation Status

Purpose of grant/contribution	Amount
	0

Name
☐ Person ☐ Business
Street
City	State	Zip code	Foreign Country

Relationship	Foundation Status

Purpose of grant/contribution	Amount
	0

Name
☐ Person ☐ Business
Street
City	State	Zip code	Foreign Country

Relationship	Foundation Status

Purpose of grant/contribution	Amount
	0