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## 990-PF

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

OMB No 1545-0052 \_െ\_

		ent of the T Revenue Se	reasury	Note	The foundation	n may	be ab	reated as a Pri le to use a copy o	f this return to	on satisfy state	геро	rting requirements	<b>ZUU9</b>
F	or ca	lendar			ax year begir		-			, and endi		· · · · · · · · · · · · · · · · · · ·	, 20
G	Che	eck all t	hat apply.		Initial return	າ		Initial return	of a former	oublic char	ity		Final return
					Amended r	eturn			ess change	Г	Ť.	Name change	<b>_</b>
_			Name of fo	undat	ion			<del> </del>				A Employer identific	ation number
	lse t	he IRS	1		RITABLE	FOUNI	DATI	ON					
		bel.	C/O BRI									20-	5620042
		rwise,				numberi	f mail is	not delivered to stre	et address)	Room/su	ıte.	B Telephone number (see	
	р	rint	Trainisor and	<b>u</b> 00	ct (or i o box i	idiniber i	i iii dii k	That delivered to stre	et address)	1100111/301	ile	D reiebiliona limitoai (286	page 10 of the distructions)
	or t	ype.	31 DEPH	ТΥ	MINISTER	DRIV	JF:					173	2) 380-9797
		pecific			te, and ZIP cod		<b>V</b> L			<u> </u>	-	C If exemption applicat	•
l	nstru	ctions.	City of town	i, Stai	e, and zir cou	5						pending, check here	······ • • • • • • • • • • • • • • • •
			COITE N	r~v	, NJ 077	2.2						D 1 Foreign organization	
-	<u> </u>											<ol><li>Foreign organizati 85% test, check he</li></ol>	
Н								exempt private				computation	
$\perp$					mpt charitable			Other taxable p				E If private foundation	status was terminated
ı			t value of al			_		g method:  X	Cash Acc	crual		under section 507(b)	
	•	•	m Part II, co					specify)				F If the foundation is i	n a 60-month termination
_		▶ \$		<u> </u>		·		nn (d) must be o	n cash basıs.)			under section 507(b)(	1)(B), check here
G	art	Analy	sis of Reve	enue	and Expense	(The	1:	) Revenue and	(b) Net inve	etment		c) Adjusted net	(d) Disbursements
					ns (b), (c), and al the amounts			expenses per	incon		(	income	for charitable purposes
_		colum	n (a) (see pa	ge 11	of the instruction	ons).)		books					(cash basis only)
	1	Contribut	ion <u>s, gift</u> s, grants	, etc , r	eceived (attach sche	edule)		80,000	-				
	2	Check			ation is <b>not</b> requi								
	3	Interest			orary cash invest			17		17.		17.	ATCH 1
	4	Divider	nds and inter	est fro	om securities			1,182	1	1,182.		1,182.	ATCH 2
	5 a												
			al income or (lo										
ь					of assets not on III	ne 10							
חמ		Gross s	ales pnce for all										
Revenu	7		n line 6a . gain net inci	ome (	from Part IV, lir	2)		<del>,,</del>	<u> </u>		_		
₹	8	-	-	•	n	•							
	9		•	-	''				<del> </del>				
	-	Gross sa	les less retums										
l			wances • • • ost of goods sole										
			_	-	ch schedule)		<u> </u>		1				· · · · · · · · · · · · · · · · · · ·
									<del>                                     </del>	-			<del></del>
					edule)			81,199	····-	1,199.		1,199.	
$\dashv$			•		<u>h 11</u>			01,133		_,,		-, -, -, -,	
ł	13	Comper	isation of office	us, din	ectors in stees, e	C			1				
S	14				aegeiv	<u> </u>	<del>.  </del>		+				
ايّ	15		n plans, empl				<del>  </del>		+	<del></del>		-	
흸	16a	Legal f	ees (attach	nedu	le) LiNaule, 1 32]	146	\$0-5	1,214	1	0.		0.	1 014
ω								1,214	1			0.	1,214
ا≚ِ	С				ttach schedule		18						
ā	17				GDEN,		$\vdash$		<b></b>				
is	18	,			page 14 of the instru	,							
뒴	19				edule) and depl		ļ		ļ				
됩	20	-	•						ļ				
힏	21				meetings								
ā	22												
Operating and Administrative Expense	23				chedule) [4]			100	4				100
rat	24	Total o	perating and	l adm	inistrative exp	enses.							
B		Add lin	es 13 throug	h 23				1,314	1	0.		0.	1,314
۷	25				spaid			33,700	<u> </u>				33,700
$\perp$	26	Total exp	enses and disbu	rsemen	ts Add lines 24	and 25		35,014	-	0.		0.	35,014
	27	Subtrac	t line 26 from	n line	12								
	а	Excess of	revenue over ex	penses	and disbursemen	ts		46,185	1				
					if negative ente					1,199.			· · · · · · · · · · · · · · · · · · ·

c Adjusted net income (if negative, enter -0-). . For Privacy Act and Paperwork Reduction Act Notice, see page 30 of the instructions.  $^{9E1410\ 1\ 000}\ 133810\ M997\ 4/22/2010\ 10:27:49\ AM\ V\ 09-5.2$ 

1,199.

Part I	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End of	f year
	amounts only (See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash - non-interest-bearing	3.	0.	0.
2	Savings and temporary cash investments	0.	45,615.	45,615.
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 16 of the instructions)			
_	Other notes and loans receivable (attach schedule)			
7				
i	Less allowance for doubtful accounts			<del></del>
8 ع	Inventories for sale or use			
Assets a 0 1 a	Prepaid expenses and deferred charges			<del></del>
	Investments - U S and state government obligations (attach schedule)			
Ь	Investments - corporate stock (attach schedule) ATCH .5 .	40,422.	40,995.	19,051
	Investments - corporate bonds (attach schedule)			
	Less accumulated depreciation (attach schedule)			
12	Investments - mortgage loans			
13	Investments - other (attach schedule)			
14	Land, buildings, and equipment basis	i		
-	equipment basis Less accumulated depreciation (attach schedule)	<b>\</b>	1	
15	Other assets (describe			
16	Total assets (to be completed by all filers - see the			
1.*	instructions Also, see page 1, item I)	40,425.	86,610.	64,666.
17				
	Accounts payable and accrued expenses		· · · · · · · · · · · · · · · · · · ·	
18	Grants payable			
<u>8</u> 19	Deferred revenue			
≝ 20	Loans from officers, directors, trustees, and other disqualified persons .			
Liabilities 20 21 21	Mortgages and other notes payable (attach schedule)			
<b>-</b>  22	Other liabilities (describe	-		
23	Total liabilities (add lines 17 through 22)			
	Foundations that follow SFAS 117, check here ▶			
	and complete lines 24 through 26 and lines 30 and 31.			
8 24	Unrestricted			
E 25	Temporarily restricted			
20 20	Permanently restricted			
<u> </u>	and complete lines 24 through 26 and lines 30 and 31.  Unrestricted			
šl	Foundations that do not follow SFAS 117,			
<u> </u>	check here and complete lines 27 through 31. ▶ X			
0 27	Capital stock, trust principal, or current funds			
<del>ا</del> ا	Paid-in or capital surplus, or land, bldg, and equipment fund	40 405	06 610	
S 29	Retained earnings, accumulated income, endowment, or other funds	40,425.	86,610.	
30	Total net assets or fund balances (see page 17 of the			
ž	instructions)	40,425.	86,610.	
31	Total liabilities and net assets/fund balances (see page 17			
	of the instructions)	40,425.	86,610.	
Part II	Analysis of Changes in Net Assets or Fund B	alances		
	I net assets or fund balances at beginning of year - Part II,		agree with	
	of-year figure reported on prior year's return)	, ,	-	40,425.
				46,185.
) Otho	er amount from Part I, line 27a			
				86,610.
+ A00	lines 1, 2, and 3			00,010.
	reases not included in line 2 (itemize)			06.610
<u>s lota</u>	I net assets or fund balances at end of year (line 4 minus lin	ne 5) - Part II, column (b),	line 30 6	86,610.

P	art IV Capital Gains	s and Losses for Tax on Inv	estment Income			
		d describe the kind(s) of property sold (		(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
<u>1a</u>						
_p			<del></del>			
_ <u>c</u>			<del></del>			
<u>d</u>				<del>                                       </del>	<del>                                     </del>	
<u>e</u>		(0.00)	(a) Cost or other book			<u> </u>
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) mini	
<u>a</u>						
<u>b</u>	-			-		
<u>_</u>						
_ <u>d</u>						
_ <u>e</u>		howing dain in column (b) and own	ned by the foundation on 12/31/69		0 (0 ( (1)	
		(i) Adjusted basis	(k) Excess of col (i)	1 17	Gains (Col (h) ga (k), but not less t	
	(i) F M V as of 12/31/69	as of 12/31/69	over col (j), if any		Losses (from co	
_ <u>a</u>	,					
<u>b</u>					- <del></del>	
<u>_</u>			-			
<u>d</u>						
<u>е</u> 2		(net capital loss)	gain, also enter in Part I, line 7 (loss), enter -0- in Part I, line 7			
		•	,	2		
		n or (loss) as defined in sections 12 , line 8, column (c) (see pages 13 :	1 1 1 1			
	_	line 8		3		
Ð	art V Qualification II	nder Section 4940(e) for Redu	uced Tax on Net Investment Inc	_		
Wa			outable amount of any year in the ba	ase period	<sup>1</sup> ? [	Yes X No
1			, see page 18 of the instructions be	fore mak	ing any entries	
C	(a)  Base penod years alendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of nonchantable-use assets		(d) Distribution ra (col (b) divided by	ntio
	2008	53,407.	31,103.			1.717101
	2007	27,123.	17,596.			1.541430
	2006	0.	0.			0.000000
	2005					
	2004				-	
2	Total of line 1, column (d)			2		3.258531
3	_	for the 5-year base period - divide	the total on line 2 by 5, or by the			
	number of years the found	dation has been in existence if less	s than 5 years	3		1.086177
4	Enter the net value of non	icharitable-use assets for 2009 fro	m Part X line 5	4		43,364.
			m Part X, line 5	<del>,</del>		
5	Multiply line 4 by line 3			5		47,101.
6	Enter 1% of net investme	nt income (1% of Part I, line 27b)		6		12.
7	Add lines 5 and 6			7		47,113.
8	Enter qualifying distribution	ns from Part XII, line 4		8		35,014.
	If line 8 is equal to or gre Part VI instructions on pag	eater than line 7, check the box ii e 18.	n Part VI, line 1b, and complete t	hat part i	using a 1% tax	rate See the

Par	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of t	he ins	tructi	ons)
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 ruling letter if necessary - see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			24.
	here and enter 1% of Part I, line 27b			
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4%			
	of Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 2			
3	Add lines 1 and 2			24.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 4			0.
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0			24.
6	Credits/Payments			
а	2009 estimated tax payments and 2008 overpayment credited to 2009   6a			
b	Exempt foreign organizations-tax withheld at source			
С	Tax paid with application for extension of time to file (Form 8868) 6c 0 .			
d	Backup withholding erroneously withheld			0
7	Total credits and payments Add lines 6a through 6d			0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached			24.
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			24.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid.			
11 Par	Enter the amount of line 10 to be Credited to 2010 estimated tax ▶ Refunded ▶ 11  t VII-A Statements Regarding Activities			
			V	
та	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	4-	Yes	No X
	participate or intervene in any political campaign?	1a		<u> </u>
Ь	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 of the instructions for definition)?	1ь		X
	of the instructions for definition)?  If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials	16		
	published or distributed by the foundation in connection with the activities.			
_		1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year	16		
ŭ	(1) On the foundation $\blacktriangleright$ \$(2) On foundation managers $\blacktriangleright$ \$			
е	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?	2		Х
-	If "Yes," attach a detailed description of the activities			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of			
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		Х
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		Х
ь	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		X
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
	If "Yes," attach the statement required by General Instruction T			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that	į		
	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) $\triangleright^{NJ}$ ,			
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	8ь		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		x	

Par	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 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		<u>X</u>
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13		X
	Website address ►N/A			
14	The books are in care of ▶ BRIAN AND KAREN TORPEY Telephone no Located at ▶31 DEPUTY MINISTER DRIVE COLTS NECK, NJ ZIP+4 ▶ 07722	979	97 	
	Located at ▶31 DEPUTY MINISTER DRIVE COLTS NECK, NJ ZIP+4 ▶ 07722			
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			
Par	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.	ļ	Yes	<u>No</u>
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?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person?			
	(3) Turnish goods, services, or racindes to (or accept them from) a disqualined person?			
	(4) Tay compensation to, or pay of reimburse the expenses of, a disqualined person.			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?			
	(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 ).			
_	termination of government earlies and the state of the st		İ	
	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		
	Organizations relying on a current notice regarding disaster assistance check here			
	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that	1 c		Х
	were not corrected before the first day of the tax year beginning in 2009?	10		
	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))	i .		
	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?			
	If "Yes," list the years			
	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2)		Ì	
	(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		Х
	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business			
	enterprise at any time during the year?		1	
	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		l	
	foundation had excess business holdings in 2009)	3 b		
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
	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?			X
	F	orm <b>99</b>	0-PF (	2009)

Pai	tVII-B Statements Regarding Activities for	or Which Form 4	720 May Be Requ	ired (continued)		
5 a	During the year did the foundation pay or incur any amou	unt to				
	(1) Carry on propaganda, or otherwise attempt to influe	,	,	Yes X No	·	
	(2) Influence the outcome of any specific public election	•	•			
	directly or indirectly, any voter registration drive?				1 1	
	(3) Provide a grant to an individual for travel, study, or ot	her similar purposes?		. Yes X No	' }	
	(4) Provide a grant to an organization other than a char					
	section 509(a)(1), (2), or (3), or section 4940(d)(2)?			. Yes X No	'	
	(5) Provide for any purpose other than religious, charita					
	purposes, or for the prevention of cruelty to children of			· · · · · · · · · · · · · · · · · · ·	·	
b	If any answer is "Yes" to 5a(1)-(5), did any of the trans	• •	•			
	Regulations section 53 4945 or in a current notice regard	-			5b	
	Organizations relying on a current notice regarding disas	ter assistance check h	ere	▶ 🔲		
С	If the answer is "Yes" to question 5a(4), does the found	•				
	because it maintained expenditure responsibility for the g	rant?		. Yes X No	'	
	If "Yes," attach the statement required by Regulations sec	tion 53 4945-5(d)				
6a	Did the foundation, during the year, receive any funds, of	directly or indirectly, to	pay premiums			
	on a personal benefit contract?			. Yes X No	·	
Ь	Did the foundation, during the year, pay premiums, direct	ctly or indirectly, on a p	personal benefit contrac	:t?	6b	X
	If "Yes" to 6b, file Form 8870					
7 a	At any time during the tax year, was the foundation a pa	irty to a prohibited tax	shelter transaction? .	. Yes X No	·	
	If yes, did the foundation receive any proceeds or have					X
Pai	t VIII Information About Officers, Directors and Contractors	s, Trustees, Foun	dation Managers,	Highly Paid Emplo	oyees,	
1	List all officers, directors, trustees, foundation m	anagers and their	compensation (see	page 22 of the instru	uctions).	· · · · · · · · · · · · · · · · · · ·
	(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 other allo	
			_			
AT	TACHMENT 6		0.	0.		0
		<u> </u>				
						<u> </u>
	Compensation of five highest-paid employees (ot If none, enter "NONE."	her than those inc	luded on line 1 - se		ructions).	
(a	Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense other allo	
NON	E		<del>.</del>	ooporiousion		
		<del> </del>				· -
		<del>                                     </del>				
Tota	I number of other employees paid over \$50,000 .	<u> </u>	· <del>- · · · · · · · · · · · · · · · · · ·</del>	<u> </u>		NONE

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Emp and Contractors (continued)	
3 Five highest-paid independent contractors for professional services (see page 23 of the instructions). If non	e, enter "NONE."
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
T ( )	► NONE
Total number of others receiving over \$50,000 for professional services	NONE
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 beneficianes served, conferences convened, research papers produced, etc.	Expenses
1 N/A	
	-
	-
2	
	-
3	_
	_
4	_
	_
Part IX-B Summary of Program-Related Investments (see page 23 of the instructions)	<del></del>
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 NONE	-
	-
	<del> </del>
2	-
	-
All other program-related investments. See page 24 of the instructions	<del></del>
3 NONE	
<u> </u>	-
	-
Total. Add lines 1 through 3	<b>&gt;</b>

Pa	rt X  Minimum Investment Return (All domestic foundations must complete this part. Foreig see page 24 of the instructions.)	n foundations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,	
	purposes:	
а		1a 20,714.
b	Average of monthly cash balances	<b>1b</b> 23,310.
С	Fair market value of all other assets (see page 24 of the instructions)	<b>1c</b> 0.
d		1d 44,024.
е	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 0.
3	Subtract line 2 from line 1d	3 44,024.
4	Cash deemed held for charitable activities Enter 1 1/2 % of line 3 (for greater amount, see page 25	
	of the instructions)	<b>4</b> 660.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	<b>5</b> 43,364.
6	Minimum investment return. Enter 5% of line 5	6 2,168.
Pa	rt XI Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) private	e operating
	foundations and certain foreign organizations check here  and do not complete this pa	art.)
1	Minimum investment return from Part X, line 6	1 2,168.
2 a	Tax on investment income for 2009 from Part VI, line 5	
	Income tax for 2009. (This does not include the tax from Part VI)  2b	
С	Add lines 2a and 2b	2c 24.
3	Distributable amount before adjustments Subtract line 2c from line 1	3 2,144.
4	Recoveries of amounts treated as qualifying distributions	4
5	Add lines 3 and 4	5 2,144.
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 2,144.
Pal	rt XII Qualifying Distributions (see page 25 of the instructions)	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a 35,014.
b		<b>1b</b> 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:	
а	0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	3a 0.
b	Cash distribution test (attach the required schedule)	<b>3b</b> 0.
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4 35,014.
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 N/A
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6 35,014.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating wh	. 1
	qualifies for the section 4940(e) reduction of tax in those years.	

Pá	art XIII Undistributed Income (see page 2	26 of the instruction	ns)		
1	Distributable amount for 2009 from Part XI,	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
	line 7				2,144
2	Undistributed income, if any, as of the end of 2009				<del></del>
a				25,637.	
b	07 06 06	<del></del>		· · · · · · · · · · · · · · · · · · ·	<del></del>
3	Excess distributions carryover, if any, to 2009				
	5 2004				
h					
٦	From 2006				
u	From 2007				
	Total of lines 3a through e				
			<u> </u>		
4	Qualifying distributions for 2009 from Part XII, line 4 > \$ 35,014.				
а	Applied to 2008, but not more than line 2a			25,637.	
b	Applied to undistributed income of prior years (Election				
	required - see page 26 of the instructions)				<del></del>
С	Treated as distributions out of corpus (Election required - see page 26 of the instructions)				
d	Applied to 2009 distributable amount				2,144.
	Remaining amount distributed out of corpus	7,233.			
5	Excess distributions carryover applied to 2009				
6	(If an amount appears in column (d), the same amount must be shown in column (a) ) Enter the net total of each column as indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	7,233.			
ь	Prior years' undistributed income Subtract				
	line 4b from line 2b				
С	Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
d	Subtract line 6c from line 6b Taxable				
	amount - see page 27 of the instructions				
е	Undistributed income for 2008 Subtract line 4a from line 2a Taxable amount - see page				
	27 of the instructions				
f	Undistributed income for 2009 Subtract lines 4d and 5 from line 1 This amount must be				
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				
8	Excess distributions carryover from 2004 not applied on line 5 or line 7 (see page 27 of the				
α.	Excess distributions carryover to 2010.	-			
9		7,233.			
4.0	Subtract lines 7 and 8 from line 6a	,,255.			
	Analysis of line 9 Excess from 2005				
	Excess from 2006				
	Excess from 2007				
	Excess from 2008 Excess from 2009				

Pa	rt XIV Private Oper	ating Foundations (	see page 27 of th	e instructions and F	art VII-A, question 9)	NOT APPLICABLE
1 a	If the foundation has foundation, and the ruling				· I	
b	Check box to indicate wh					j)(3) or 4942(j)(5)
2 a	Enter the lesser of the ad-	Tax year		Prior 3 years	<del></del>	(e) Total
	justed net income from Part I or the minimum investment return from Part X for each year listed	(a) 2009	(b) 2008	(c) 2007	(d) 2006	
b	85% of line 2a					
С	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					
е	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					
а	*Assets alternative test - enter  (1) Value of all assets  (2) Value of assets qualifying					
b	under section 4942(j)(3)(B)(i) "Endowment" alternative test- enter 2/3 of minimum invest- ment return shown in Part X					
С	Ine 6 for each year listed  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 (1/3)(B)(III)					
	port from an exempt organization		<del></del>			
D.	(4) Gross investment income .  Int XV Supplementa	any Information /C	omplete this par	t only if the foun	dation had \$5,000	or more in assets
		during the year - see			idadion nad \$0,000	or more in assets
1	Information Regarding	•				
а	•	tax year (but only if th	ey have contributed		otal contributions receives (See section 507(d)(2).)	
<del>.</del>		KAREN A. TORPE		-f 4h4hf		
b	List any managers of ownership of a partner					riarge portion of the
	N/A					
2	Information Regarding	g Contribution, Grant	, Gift, Loan, Scholars	ship, etc., Programs:		
		or funds If the found	dation makes gifts,	grants, etc (see page	aritable organizations a ge 28 of the instruction	
а	The name, address, an ATTACHME		of the person to who	om applications should	be addressed:	
b	The form in which appl		omitted and informat	tion and materials the	ey should include	
	LETTER					
С	Any submission deadli	nes				
	NONE					
d	Any restrictions or lifeactors:	mitations on awards,	such as by geog	raphical areas, chari	itable fields, kinds of	institutions, or other
JSA	NONE		<del></del>			5 000 PE (2000)

Part XV Supplementary Information (co	ontinued)	16.		
3 Grants and Contributions Paid Durin	ng the Year or Appi	Foundation		T
Recipient  Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	status of	Purpose of grant or contribution	Amount
a Paid during the year	or substantial contributor	recipient	-	
a Faid during the year				
ATTACHMENT 8				
			!	
		-		
Total			▶ 3a	33,700.
<b>b</b> Approved for future payment				
Total				

Litter gross	amounts unless otherwise indicated	Unrela	ated business income	Excluded by	section 512, 513, or 514	(e) Related or exempt
1 Program	service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See page 28 of the instructions)
_						
c						
d			· · · · · · · · · · · · · · · · · ·			
е						<u></u>
f						
	and contracts from government agencies					
	ship dues and assessments					
	on savings and temporary cash investments			14	17.	
	ds and interest from securities			14	1,182.	
	al income or (loss) from real estate					
	t-financed property			+		
	debt-financed property		· ····			
	I income or (loss) from personal property					<del></del>
	vestment income					<del></del> .
-	oss) from sales of assets other than inventory					
	me or (loss) from special events					
	rofit or (loss) from sales of inventory					
	venue a					
			<u> </u>			
		· · · -		<del> </del>		
e				- <del></del>		
	Add columns (b), (d), and (e)		<del>- · </del>	-	1,199.	
	id line 12 columns (b) (d) and (e)					1 199
See workst	dd line 12, columns (b), (d), and (e) neet in line 13 instructions on page 28 (	to verify calcu				1,199
See worksh Part XVI-	neet in line 13 instructions on page 28 in Relationship of Activities	to verify calcu to the Ac	ulations ) complishment of E	xempt Purp	oses	
See worksh Part XVI-	neet in line 13 instructions on page 28 t	to verify calcu to the Ac ity for which	complishment of E	xempt Purp	oses  (e) of Part XVI-A cont	ributed importantly t
See worksh Part XVI- Line No.	Relationship of Activities  Explain below how each activities the accomplishment of the fo	to verify calcu to the Ac ity for which	complishment of E	xempt Purp	oses  (e) of Part XVI-A cont	ributed importantly t
See worksh Part XVI- Line No.	Relationship of Activities  Explain below how each activities the accomplishment of the fo	to verify calcu to the Ac ity for which	complishment of E	xempt Purp	oses  (e) of Part XVI-A cont	ributed importantly t
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See worksh Part XVI- Line No.	Relationship of Activities  Explain below how each activities the accomplishment of the fo	to verify calcu to the Ac ity for which	complishment of E	xempt Purp	oses  (e) of Part XVI-A cont	ributed importantly t
See worksh Part XVI- Line No.	Relationship of Activities  Explain below how each activities the accomplishment of the fo	to verify calcu to the Ac ity for which	complishment of E	xempt Purp	oses  (e) of Part XVI-A cont	ributed importantly t
See worksh Part XVI- Line No.	Relationship of Activities  Explain below how each activities the accomplishment of the fo	to verify calcu to the Ac ity for which	complishment of E	xempt Purp	oses  (e) of Part XVI-A cont	ributed importantly t
See worksh Part XVI- Line No.	Relationship of Activities  Explain below how each activities the accomplishment of the fo	to verify calcu to the Ac ity for which	complishment of E ch income is reporte exempt purposes (i	xempt Purped in column other than b	oses  (e) of Part XVI-A cont	ributed importantly t
See worksh Part XVI- Line No.	Relationship of Activities  Explain below how each activities the accomplishment of the fo	to verify calcu to the Ac ity for which	complishment of E	xempt Purped in column other than b	oses  (e) of Part XVI-A cont	ributed importantly t
See worksh Part XVI- Line No.	Relationship of Activities  Explain below how each activities the accomplishment of the fo	to verify calcu to the Ac ity for which	complishment of E ch income is reporte exempt purposes (i	xempt Purped in column other than b	oses  (e) of Part XVI-A cont	ributed importantly t
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See worksh Part XVI- Line No.	Relationship of Activities  Explain below how each activities the accomplishment of the fo	to verify calcu to the Ac ity for which	complishment of E ch income is reporte exempt purposes (i	xempt Purped in column other than b	oses  (e) of Part XVI-A cont	ributed importantly t
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See worksh Part XVI- Line No.	Relationship of Activities  Explain below how each activities the accomplishment of the fo	to verify calcu to the Ac ity for which	complishment of E ch income is reporte exempt purposes (i	xempt Purped in column other than b	oses  (e) of Part XVI-A cont	ributed importantly t
See worksh Part XVI- Line No.	Relationship of Activities  Explain below how each activities the accomplishment of the fo	to verify calcu to the Ac ity for which	complishment of E ch income is reporte exempt purposes (i	xempt Purped in column other than b	oses  (e) of Part XVI-A cont	ributed importantly t
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See worksh Part XVI- Line No.	Relationship of Activities  Explain below how each activities the accomplishment of the fo	to verify calcu to the Ac ity for which	complishment of E ch income is reporte exempt purposes (i	xempt Purped in column other than b	oses  (e) of Part XVI-A cont	ributed importantly t

Form	990-PF (200	09)				2	0-5620042			Page	e 13
Pa	rt XVII	Information Exempt Orga		Transfers To	and Transa	actions a	nd Relations	hips With I	Nonch	arita	ble
1	in section	organization direct n 501(c) of the Cons?	Code (other than	n section 501(c)	)(3) organization	s) or in se				/es	No
а		from the reporting								İ	v
									1a(1)	-	$\frac{x}{x}$
		assets			· · · · · · · · · ·				1a(2)		
b									1		Х
		of assets to a nonc							1b(1)		$\frac{x}{x}$
		nases of assets from							1b(2)	-+	$\frac{x}{x}$
		al of facilities, equipm							1b(3)	-	$\frac{x}{x}$
		bursement arrangem							1b(4)		$\frac{x}{x}$
		s or loan guarantees							1 1		$\frac{x}{x}$
		rmance of services									$\frac{x}{x}$
C		f facilities, equipme									
a		nswer to any of		•	J		• •	•			
		the goods, other		•							
	value in	any transaction of	n snaring arran	igement, snow i	in column (a)	ine value o	r the goods, ou	ner assets, or	services	rece	ivea
(a)	Line no	(b) Amount involved	(c) Name of	noncharitable exem	ot organization	(d) Descri	iption of transfers, tra	nsactions, and sha	nno arrano	ements	 s
		N/A			<u></u>	N/A			3		
			1				<del></del>				
		· · · · · · · · · · · · · · · · · · ·	<del> </del>			· · · · · ·	<del></del>	<del></del>			
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			<del></del>	<del></del>						-	
	ls the fe	undation directly or	L and rootly offile	ated with or role	atod to one or		mot organization	described in			
28		01(c) of the Code (ot						aescribed iii	Yes	X	No
		complete the following		50 1(c)(5)) or iii se	CHOH 5277				] າຣ	تنا	NO
		(a) Name of organization		(b) Typ	e of organization		(c) Des	cription of relations			
		(a) Hamo of organization		(-, . ),	- o gamzanom		(6) 500	onphien en relation			
		<del></del>									
				<del></del>	,						
			<del></del>	<del>  )                                   </del>							
$\neg$	Under pen	alties of perjury, I dec	lare that I have ex	amined this return.	including accomp	anvino schedul	les and statements	and to the best of	f my kno	wledge	and
	belief, it is	true, correct, and con	iplete Declaration	of preparer (other the	han taxpayer or fid	uciary) is base	d on all information	of which prepare	r has any	knowle	edge
-			,/\\\	1 Trust	<u> </u>	1 5/27	ulco J	veta o			
اره	Signat	ure of office or trustee	<del></del>	<del>- 1,0),</del>		Date	Title				—
<u>ē</u>		are or officer of trustee	<del></del>		D-4-	Date	· me	Preparer's	identifian	10	—
핕	<u>,</u>	• • • • • • • • • • • • • • • • • • •	(1 X	13	Date		Check if	number (Se	e Signátu	re on	
Sign Here	Paid Preparer's Use Only Lis	eparer's	グルシノ	Men -	11/	49/10	self-employed	page 30 of	ne instruc	tions)	
ω	Paid Preparer' Use Only	nature /	וועידוש .	MSMITH+BROW		- 07	l	<u> </u>	<u>n 9 2</u>		
	- R S	m's name (or yours it f-employed), address	·	EWMAN SPRT		125	EIN	- 22 2021			

331 NEWMAN SPRINGS RD STE 125

NJ

Form 990-PF (2009)

07701-6765 Phone no 732-842-3113

self-employed), address,

and ZIP code

RED BANK,

#### 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, 990-EZ, or 990-PF.

OMB No 1545-0047

Employer identification number

TORPEY CHARITABLE F C/O BRIAN TORPEY	OUTAGNUC	20-5620042				
Organization type (check one	).					
Filers of:	Section:					
Form 990 or 990-EZ	501(c)( ) (enter number) organization					
	4947(a)(1) nonexempt charitable trust <b>not</b> treat	ed as a private foundation				
	527 political organization					
Form 990-PF	X 501(c)(3) exempt private foundation					
	4947(a)(1) nonexempt charitable trust treated a	as a private foundation				
	501(c)(3) taxable private foundation					
	out(o)(o) taxable private realization					
Note. Only a section 501(c)(7 instructions  General Rule  X For an organization property) from any  Special Rules  For a section 501(c) sections 509(a)(1) a	filing Form 990, 990-EZ, or 990-PF that received, during one contributor. Complete Parts I and II.  (3) organization filing Form 990 or 990-EZ that met the 3 and 170(b)(1)(A)(vi), and received from any one contribution. (i) Form 990, Part VIII, line 1h or (ii)	the year, \$5,000 or more (in money or 331/3% support test of the regulations under tor, during the year, a contribution of the greater				
II For a section 501(countries the year, aggregates)	)(7), (8), or (10) organization filing Form 990 or 990-EZ to contributions of more than \$1,000 for use exclusively for	that received from any one contributor, during religious, charitable, scientific, literary, or				
educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.  For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year						
990-EZ, or 990-PF), but it <b>mu</b> er or on line 2 of its Form 990-P 990-PF).	is not covered by the General Rule and/or the Special R st answer "No" on Part IV, line 2 of its Form 990, or chec F, to certify that it does not meet the filing requirements	ok the box on line H of its Form 990-EZ, of Schedule B (Form 990, 990-EZ, or				
For Privacy Act and Paperwork Red for Form 990, 990-EZ, or 990-PF.	uction Act Notice, see the Instructions	Schedule B (Form 990, 990-EZ, or 990-PF) (2009)				

Name of organization TORPEY CHARITABLE FOUNDATION C/O BRIAN TORPEY

Employer identification number 20-5620042

(a)	(b)	(c) Aggregate contributions	(d)
No.	Name, address, and ZIP + 4		Type of contribution
1	BRIAN AND KAREN TORPEY  31 DEPUTY MINISTER DRIVE  COLTS NECK, NJ 07722	\$80,000.	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a)	(b)	(c) Aggregate contributions	(d)
No.	Name, address, and ZIP + 4		Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)

ATTACHMENT 1

09-5.2
AMV
10:27:49
4/22/2010
M997
133810

INTEREST ON TEMPORARY CASH INVESTMENTS	
CASH	
TEMPORARY	
NO	
INTEREST	
PART	
ORM 990PF,	
FOF	

ADJUSTED NET	INCOME	17.	17.
	INCOME	17.	17.
REVENUE AND	PER BOOKS	17.	17.
			TOTAL
	NOI	TRADE	
	DESCRIPTION	TD AMERITRADE	

ADJUSTED NET INCOME	1,182.	1,182.
NET INVESTMENT INCOME	1,182.	1,182.
REVENUE AND EXPENSES PER BOOKS	1,182.	1,182.
		TOTAL
	ъì	
DESCRIPTION	TD AMERITRADE	

- DIVIDENDS AND INTEREST FROM SECURITIES

PART I

FORM 990PE,

ATTACHMENT 2

SS	1,214	1,214	0.1
AND EXPENSES PER BOOKS	<b>(-1</b>		09-5.2
			AMV
			10:27:49
		TOTALS	10:
	PREPARATION		4/22/2010
NO			M997
DESCRIPTION	RETURN		133810 1
DESC	TAX		Η.

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CHARITABLE PURPOSES

ADJUSTED NET

NET INVESTMENT INCOME

REVENUE AND

- ACCOUNTING FEES

FORM 990PF, PART I

1,214.

INCOME

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ESTER		7 7 7 7	
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ATTACHMENT 3

ATTACHMENT 4

EXPENSES
- OTHER
i
PART
990PF,
FORM

REVENUE	AND EXPENSES	PER BOOKS	
			ਜ਼ ਜ਼ੁਜ਼
		지 년 년	EXCISE FEES
		ESCRIPTION J FILING F	$\alpha \vdash$
		DES	S A

TOTALS

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	AND	ENSES	ROOKS	09	16	24	
•		EXP	PEF				

CHARITABLE
PURPOSES
60.
16.

100.

CORPORATE STOCK

PART

FORM 990PF,

വ
ATTACHMENT

ENDING <u>FMV</u>	8,552. 1,586. 435. 3,134. 1,659. 3,505.	19,051.
ENDING BOOK VALUE	9,010. 17,517. 573. 1,935. 5,120. 2,310. 4,530.	40,995.
DESCRIPTION	200 SH HEINZ H J CO COM 650 SH AMERICAN CAPITAL LTD 178 SH AMERICAN CAPITAL LTD 55 SH CATERPILLAR INC COM 4200 SH LEGEND MEDIA INC COM 115 SH MICROSOFT CORP COM 1500 REGEN BIOLOGIES INC COM	TOTALS

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

EXPENSE ACCT AND OTHER ALLOWANCES	·	Ö	0
CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	.0	.0	
COMPENSATION	· o	.0	
TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	TRUSTEE	TRUSTEE	GRAND TOTALS
NAME AND ADDRESS	BRIAN A. TORPEY 31 DEPUTY MINISTER DR COLTS NECK, NJ 07722	KAREN A. TORPEY 31 DEPUTY MINISTER DRIVE COLTS NECK, NJ 07722	

#### FORM 990PF, PART XV - NAME, ADDRESS AND PHONE FOR APPLICATIONS

BRIAN AND KAREN TORPEY 31 DEPUTY MINISTER DRIVE COLTS NECK, NJ 07722

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		
DECTUTION NAME AND ADDOGGO	AND AND AND AND AND AND AND AND AND AND	THE TOTAL OF CHANGE OF CAMERITATION	EMICONA
מברגנינון ואמום מוט מסממנים	FOUNDATION STATUS OF RECIPLENT	FURFOSE OF GRAIN OR CONTRIBUTION	AMOON
RANNEY SCHOOL ANNUAL FUND	NONE	GENERAL SUPPORT	2,000
TINTON FALLS, NJ			
AMERICAN CANCER SOCIETY	NONE	GENERAL SUPPORT	200
6725 LYONS ST PO BOX 7			
EAST SYRACUSE, NY 13057-0902			
GEORGETOWN UNIVERSITY	NONE	SCHOLARSHIPS	21,250
BOX 571253			
WASHINGTON, DC 20057-1253			
COLTS NECK VOLUNTEER FIRE DEPT	NONE	GENERAL SUPPORT	200
COLTS NECK, NJ 07722			
COLTS NECK PBA LOCAL 333	NONE	GENERAL SUPPORT	200.
PO BOX 517			
COLTS NECK, NJ 07722			
MONMOUTH UNIVERSITY	NONE	GENERAL SUPPORT	200
WEST LONG BRANCH, NJ 07764			
JDRF, CENTRAL JERSEY CHAPTER	NONE	GENERAL SUPPORT	500.
740 BROAD STREET, SUITE 4			
SHREWSBURY, NJ 07702			
BOYS & GIRLS CLUB OF MONMOUTH COUNTY	NONE	GENERAL SUPPORT	200
1201 MONROE AVENUE			
ASBURY PARK, NJ 07712			
CASA OF MONMOUTH COUNTY	NONE	GENERAL SUPPORT	4,800.
613 HOPE ROAD, BLDG 4, 2ND FLOOR			
EATONTOWN, NJ 07724			

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

RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR

AND

FOUNDATION STATUS OF RECIPIENT

PURPOSE OF GRANT OR CONTRIBUTION

ATTACHMENT 8 (CONT'D)

250. AMOUNT

RECIPIENT NAME AND ADDRESS

PENN STATE UNIVERSITY

FOUR DIAMONDS FUND

ONE OLD MAIN UNIVERSITY PARK, PA 16802

NONE

33,700

TOTAL CONTRIBUTIONS PAID

PAGE 24 ATTACHMENT 8

V 09-5 2

### Form 8868

(Rev April 2009)

Department of the Treasury Internal Revenue Service

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

OMB No 1545-1709

File a separate application for each return.

mtemai kevenue S	stylce	
<ul> <li>If you are f</li> </ul>	ling for an Automatic 3-Month Extension, complete only Part I and check this box	X
	ling for an <b>Additional (Not Automatic) 3-Month Extension, complete only Part II</b> (on page te <b>Part II unless</b> you have already been granted an automatic 3-month extension on a prev	
Part I Auto	matic 3-Month Extension of Time. Only submit original (no copies needed).	
A corporation	equired to file Form 990-T and requesting an automatic 6-month extension - check this be	ox and complete
Part I only		▶ ∟ .
	prations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 70 ome tax returns	04 to request an extension of
one of the regelectronically in returns, or a co	ng (e-file). Generally, you can electronically file Form 8868 if you want a 3-month autourns noted below (6 months for a corporation required to file Form 990-T). However (1) you want the additional (not automatic) 3-month extension or (2) you file Forms of or consolidated From 990-T. Instead, you must submit the fully completed and dedetails on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for City.	er, you cannot file Form 8868 990-BL, 6069, or 8870, group signed page 2 (Part II) of Form
Type or	Name of Exempt Organization TORPEY CHARITABLE FOUNDATION	Employer identification number
print	C/O BRIAN TORPEY	20-5620042
File by the	Number, street, and room or suite no. If a P.O. box, see instructions	
due date for	31 DEPUTY MINISTER DRIVE	
filing your return See	City, town or post office, state, and ZIP code For a foreign address, see instructions	
nstructions	COLTS NECK, NJ 07722	
Check type o	f return to be filed (file a separate application for each return):	
Form 990	Form 990-T (corporation)	n 4720
Form 990	-BL Form 990-T (sec 401(a) or 408(a) trust) Form	n 5227
Form 990		n 6069
X Form 990	PF Form 1041-A Form	n 8870
<ul> <li>If the organ</li> <li>If this is for</li> <li>for the whole g</li> </ul>	No ► 732 380-9797  FAX No. ►  Ization does not have an office or place of business in the United States, check this box a Group Return, enter the organization's four digit Group Exemption Number (GEN)  roup, check this box . ► If it is for part of the group, check this box . ► and an all members the extension will cover.	. If this is
1 I reques	t an automatic 3-month (6 months for a corporation required to file Form	n 990-T) extension of time
unii		named above. The extension is
2 If this tax	year is for less than 12 months, check reason: Initial return Final return	Change in accounting period
3a If this ap	plication is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, I	ess any
	dable credits. See instructions	3a \$
-	plication is for Form 990-PF or 990-T, enter any refundable credits and estimated tax pa	·
	lude any prior year overpayment allowed as a credit.	3b \$
	Oue. Subtract line 3b from line 3a Include your payment with this form, or, if required,	
	coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System	· · · · · · · · · · · · · · · · · · ·
instructio		3c \$
	are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EC	and Form 8879-EO
or payment in		
For Privacy A	t and Paperwork Reduction Act Notice, see Instructions.	Form <b>8868</b> (Rev 4-2009)