

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Department of the Treasury Internal Revenue Service

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

F	or ca	lendar	year 2009, or	tax year begi	nning			, 2009	, and end	ling				, 20
G	Che	eck all t	hat apply.	Initial retur	n		l <u>nıtıa</u> l return	of a former p	oublic cha	rity		Fina	l retur	'n
_				Amended r	eturn		Addre	ss change		N	lame change			
			Name of founda	ation							A Employer iden	tification r	umber	
(Jse t	he IRS												
	lat	oel.	THE SAMBO	L FAMILY	FOUND	OATION					2:	2-3697	638	
		rwise,	Number and str	eet (or P O box	number if	f mail is not o	lelivered to stree	et address)	Room/su	ute	B Telephone number	see page 10	of the instru	ictions)
	•	int ype.												
5		ype. pecific	1033 N MA	PLE AVE,	P.O.	BOX 51	.10				(*	732) 3	49-2	900
		ctions.	City or town, sta	ate, and ZIP cod	е						C If exemption app pending, check h			. ▶
											D 1. Foreign organ		ck here	. ▶ 🔲
_			TOMS RIVE								2. Foreign organ			
H	<u>C</u> he	ck type	of organization	n· X Sectio	on 501(c)(3) exe	mpt private	foundation			85% test, ched computation			. ▶ 🛄
\perp			1947(a)(1) nonex					rıvate founda			E If private founda	tion status w	as termin	ated —
I			t value of all as			_	ethod 🔼 C	ash Acc	rual	1	under section 50			
	-		m Part II, col (d			ther (spec					F If the foundation	ıs ın a 60-m	onth term	nnation
		▶ \$	1,078			column (d	i) must be or	n cash basis)			under section 50			
Li	art	Analy total o	sis of Revenue famounts in colui	e and Expense	es (The	(a) Re	venue and	(b) Net inve	estment	10	c) Adjusted net		Disburs or char	sements
		may n	ot necessarily eq	ual the amounts	in		nses per ooks	incom		,,	income	"	purpos	
_			n (a) (see page 1			B		ļ				(ca		is only)
	1		ions, gifts, grants, etc.	received (attach schi	edule) .		130,884	!						
	2	Check		B			69							
	3		on savings and tem				16,327	1	69. 6,327.					
	4		ids and interest f				10,327	4 <u> </u>	6,327.					
			ents					 		-	RECE	VED		
			al income or (loss)				-17,945			_		+	10	
ıue			n or (loss) from sale ales price for all		ne 10 , 490 .		-17, 543	1		10	1111 62	0040	080	
Kevenue		assets o	n linė 6a ——							00	JUL 07	<u> 2010 </u>	18	
Ke	7		gain net income	•	,					+			<u> 184</u>	
	8		ort-term capital ga			,				上	_OGDE	{ UT	\rightarrow	
	9 10 a	Gross sa	modifications • les less returns											
			wances									-		
			profit or (loss) (att					 						
	11		ncome (attach sc				2,432		2,432.			AT	CH :	1
	12		Add lines 1 through				131,767		8,828.			+	<u> </u>	-
			sation of officers, d				0 .							
	14		employee salaries											
ses	15		n plans, employe	_								 		
	16a		ees (attach sched				79.		0.		().		79
ΕX			iting fees (attach				3,816		0.		().		3,816
Ne Ve			rofessional fees											
rati	17	Interest												
SI	18	Taxes (a	ttach schedule) (see	page 14 of the instr	uctions) *		4,201.		4,141.					60
=	19	Deprec	iation (attach scl	hedule) and dep	letion.									
Ē	20		ancy									\perp		
	21		conferences, and											
~	22		and publications		1									
֓֞֟֟֟֟֝֟֟֟֝֟֟֓֟֓֟֟֓֟֟֓֟֟	23		expenses (attach	•										
e l	24		perating and ad				0 000		, , , ,		_	\backslash		2 055
٥			es 13 through 23				8,096.		4,141.			<u>'- </u>		3,955
-	25		utions, gifts, grai	-			113,835.		1 1 1 1			+		13,835
\dashv	26		enses and disburseme		and 25		121,931.		$4,\overline{1}\overline{4}\overline{1}$.).	$\frac{1}{}$	17,790
	27		ct line 26 from lin				9,836.					1		
			revenue over expens				2,030.	1	4,687.			+		
			estment income					<u> </u>	7,00/.		-0-			
_	C	Aujust	ed net income (if	negative, enter	-∪-) [I	1			1		

For Privacy Act and Paperwork Reduction Act Notice, see page 30 of the instructions. 9E1410 1 000 96693S M998 6/1/2010 7:22:47 AM V 09-6.3

JSA ** ATCH 2

Р	arî li	Balance Sheets description column should be for end-of-year	Beginning of year	End of	year
		amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	16,059.	32,000.	32,000.
	2	Savings and temporary cash investments			
	3	Accounts receivable			
		Less. allowance for doubtful accounts ▶			
	4	Pledges receivable			
į		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)			
	7	Other notes and loans receivable (attach schedule)			
	•	Less allowance for doubtful accounts			
	8				
Assets		Inventories for sale or use			
SS	9	Prepaid expenses and deferred charges			- · · · ·
۷		Investments - U S and state government obligations (attach schedule)	658,828.	652,723.	1,046,068.
		Investments - corporate stock (attach schedule)	030,020.	032,723.	1,040,000.
	11 C	Investments - corporate bonds (attach schedule)			
	• •	and anymore therein			
		and equipment basis Less accumulated depreciation (attach schedule)			
	12	Investments - mortgage loans			
	13	Investments - other (attach schedule)			
	14	Land, buildings, and equipment basis			
		equipment basis Less accumulated depreciation (attach schedule)			
	15	Other assets (describe)			
	16	Total assets (to be completed by all filers - see the		ĺ	
i		ınstructions Also, see page 1, item I)	674,887.	684,723.	1,078,068.
	17	Accounts payable and accrued expenses			
	18	Grants payable			
ý	19	Deferred revenue			
iţi	20	Loans from officers, directors, trustees, and other disqualified persons			
Ē	21	Mortgages and other notes payable (attach schedule)			
Liabilities	22	Other liabilities (describe			
	44	Other habilities (describe			
	23	Total liabilities (add lines 17 through 22)			
\dashv	23	The state of the s		-	
		Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.			
s					
S	24	Unrestricted			
lan	25	Temporarily restricted			
a	26	Permanently restricted			
밀		Foundations that do not follow SFAS 117,			
리	25 26 27 28 29 30	check here and complete lines 27 through 31. ▶ X			
6	27	Capital stock, trust principal, or current funds			
ş	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
SS	29	Retained earnings, accumulated income, endowment, or other funds	674,887.	684,723.	
۲	30	Total net assets or fund balances (see page 17 of the			
Ž		instructions)	674,887.	684,723.	
	31	Total liabilities and net assets/fund balances (see page 17			
		of the instructions)	674,887.	684,723.	
P	art II	Analysis of Changes in Net Assets or Fund E		<u></u>	
_	_	net assets or fund balances at beginning of year - Part II,		agree with	
		of-year figure reported on prior year's return)	, ,	•	674,887.
2	Ente	r amount from Part I, line 27a		2	9,836.
3	Othe	r amount from Part I, line 27a r increases not included in line 2 (itemize) ▶ ATTACHI	MENT 3	3	393,345.
4	Add	lines 1, 2, and 3			1,078,068.
5	Decr	lines 1, 2, and 3 reases not included in line 2 (itemize) ►ATTACHI	 MFNT 4	4	393,345.
		I net assets or fund balances at end of year (line 4 minus line)			684,723.
<u>~</u>	ivia	The assets of fund balances at end of year time 4 minus in	ne o) - Fart II, COIUMIN (D),	IIIIE 30 10	Form 990-PF (2009)

	d describe the kind(s) of property sold (<u> </u>	(b) How acquired P-Purchase	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr.)
1a SEE PART IV SCHE	- · · · · · · · · · · · · · ·	siis MEC CO /	D-Donation	(mo , day, yr)	
b					
c					
d		 			
e					
(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	
a					
b					
C					
d					
e					
	howing gain in column (h) and owr	ned by the foundation on 12/31/69	(1)	Gains (Col. (h) g	ain minus
(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		(k), but not less t Losses (from co	han -0-) or
a					
b					
С					
d					
е					
2 Capital gain net income or	(net capital loss) $\left\{ \begin{array}{c} \text{ If} \\ \text{ If} \end{array} \right.$	gain, also enter in Part I, line 7 (loss), enter -0- in Part I, line 7	2		-17,945.
3 Net short-term capital gair	or (loss) as defined in sections 12	22(5) and (6):			
_	line 8, column (c) (see pages 13 a		3		
Part V Qualification U	nder Section 4940(e) for Redu	iced Tax on Net Investment Inc	come		
	leave this part blank. the section 4942 tax on the distrib not qualify under section 4940(e).	= =	ase perio	d? □	Yes X No
	ount in each column for each year		oforo mak	una ony ontrios	
(a)	· ·		eiore mak	(d)	=
Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of nonchantable-use assets		Distribution ra	
2008	279,821.	1,153,941.		(col (b) divided by	0.242492
2007	260,610.	1,519,053.			0.171561
2006	237,708.	1,445,893.			0.164402
2005	210,000.	1,243,632.			0.168860
2004	193,243.	1,108,311.			0.174358
		 			·
2 Total of line 1, column (d)	for the 5-year base period - divide	the total on line 2 by 5 or by the	2	-	0.921673
	dation has been in existence if less		3		0.184335
4 Enter the net value of nor	ncharitable-use assets for 2009 fro	m Part X, line 5	4		844,787.
5 Multiply line 4 by line 3			5		155,724.
6 Enter 1% of net investme	nt income (1% of Part I, line 27b)		6		147.
7 Add lines 5 and 6			7		155,871.
8 Enter qualifying distribution If line 8 is equal to or graph Part VI instructions on page	ens from Part XII, line 4	n Part VI, line 1b, and complete t	8 hat part	using a 1% tax	117,790. c rate. See the

Capital Gains and Losses for Tax on Investment Income

Pai	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of ti	ne ins	tructi	ons)
1a	Exempt operating foundations described in section 4940(d)(2), check here			
	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	-	_ 1	47.
	here X 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		1	47.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			0.
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	_	1	47.
6	Credits/Payments			
а	2009 estimated tax payments and 2008 overpayment credited to 2009 6a 1,632.			
b	Exempt foreign organizations-tax withheld at source 6b 0.			
С	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		1,6	32.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached		_	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			85.
11	Enter the amount of line 10 to be Credited to 2010 estimated tax ▶ 200. Refunded ▶ 11		1,2	85.
Pai	t VII-A Statements Regarding Activities	,. <u></u>		
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
	participate or intervene in any political campaign?	1 a		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)?	1 b		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?	1 c		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 >\$			
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		X
4 a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4 a		Х
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4 b		 _
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		Х
	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		, 3	
	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that		v	
	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	Α	
8 a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the			
	instructions) ► NJ,			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General		v	
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8 b	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			x
	27)? If "Yes," complete Part XIV	9		
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			x
	names and addresses	10		l ^`

Form 990-PF (2009)

Part	VII-A Statements Regarding Activities (continued)			
11 /	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
ı	meaning of section 512(b)(13)? If "Yes," attach schedule (see page 20 of the instructions)	11		<u> </u>
12 I	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before			
,	August 17, 2008?	12		X
	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	<u> </u>	
1	Website address ► N/A The backs are in are of ► ERIC SAMBOL 732-345	-		
14	The books are in care of ► ERIC SAMBOL Telephone no ► 732-349			
i	The books are in care of ► ERIC SAMBOL Telephone no 732-349 ocated at ► 1033 N MAPLE AVE TOMS RIVER, NJ ZIP+4 ► 08755			т-г
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of F orm 1041 - Check here		🏲	ш
	and enter the amount of tax-exempt interest received or accrued during the year 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.
	During the year did the foundation (either directly or indirectly)			
	1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No			
	2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a		.	
,	disqualified person?			
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No		.	
-	4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X 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)?			
(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.)			
b I	f 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)?	1 b		
(Organizations refying 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			Х
	were not corrected before the first day of the tax year beginning in 2009?	1 c		
	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))			
	At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and Se, Part XIII) for tax year(s) beginning before 2009?			
	f "Yes," list the years The state of the			
	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)		ŀ	
	relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)		į	
•	o all years listed, answer "No" and attach statement - see page 20 of the instructions)	2b		
	f the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
J	>			
3a [Old the foundation hold more than a 2% direct or indirect interest in any business			
6	enterprise at any time during the year?			
b I	f "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or		ł	
C	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the		ĺ	
	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			
	oundation had excess business holdings in 2009)	3 b		X
4a (Oid the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		
	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?	4 b		Х

Pa	t, VII-B Statements Regarding Activities f	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		4945(e))?	Yes X N	。	
	(2) Influence the outcome of any specific public election	n (see section 4955), o	or to carry on.			
		•	•	Yes X N	,	
	(3) Provide a grant to an individual for travel, study, or of			·		
				. Lies Lin	•	
	(4) Provide a grant to an organization other than a char	. •		□ ☑		
	section 509(a)(1), (2), or (3), or section 4940(d)(2)?			. Yes XN	°	
	(5) Provide for any purpose other than religious, charita	•				
	purposes, or for the prevention of cruelty to children of	or animals?		. Yes X N	o	
b	If any answer is "Yes" to 5a(1)-(5), did any of the trans	sactions fail to qualify	under the exceptions	described in		
	Regulations section 53 4945 or in a current notice regard	ding disaster assistanc	e (see page 22 of the	instructions)?	5b	
	Organizations relying on a current notice regarding disas	ter assistance check h	ere	▶∐	į į	
С	If the answer is "Yes" to question 5a(4), does the found	ation claim exemption t	from the tax			
	because it maintained expenditure responsibility for the g	·		Yes N	•	
	If "Yes," attach the statement required by Regulations sec					
6.0	Did the foundation, during the year, receive any funds, of	• •	nov oromumo		j	
Оа	_ ,	•		Yes X N		
.	on a personal benefit contract?					l x
D	Did the foundation, during the year, pay premiums, direct	ctly or indirectly, on a p	personal benefit contrac	31 ⁷	6b	^
_	If "Yes" to 6b, file Form 8870.					
	At any time during the tax year, was the foundation a pa	•	•			
	If yes, did the foundation receive any proceeds or have					
Pa	t VIII Information About Officers, Directors and Contractors	s, Trustees, Foun	dation Managers,	Highly Paid Empl	loyees,	
1	List all officers, directors, trustees, foundation m	anagers and their	compensation (see	page 22 of the insti	ructions).	
	(a) Name and address	(b) Title, and average	(c) Compensation (If not paid, enter	(d) Contributions to	(e) Expens	
	(a) Hame and address	hours per week devoted to position	(if not paid, enter	employee benefit plans and deferred compensation	other all	owances
					1	
AT	TACHMENT 5		0.	0.	1	0
						-
						
				···		
	· · · · · · · · · · · · · · · · · · ·				<u> </u>	
					ł	
	Compensation of five highest-paid employees (ot	har than those inc	luded on line 4 as	o nome 22 of the inc	tructions)	
	of the highest-paid employees (of none, enter "NONE."	nei tilan tilose nic	idded on line 1 - Se	e page 23 of the ins	dructions).	
		(b) Title, and average		(d) Contributions to		
(a) Name and address of each employee paid more than \$50,000	hours per week	(c) Compensation	employee benefit plans and deferred	(e) Expens other allo	e account, owances
		devoted to position		compensation		• •
	NONE					
		<u> </u>				
		l				
			-			
Tota	I number of other employees paid over \$50,000 .					•I

Part VIII	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Emploand Contractors (continued)	oyees,	
3 Five high	est-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			
		T	
			_
			_
Total number	er of others receiving over \$50,000 for professional services	NON!	 E
			_
Part IX-A	Summary of Direct Charitable Activities		
List the found	dation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number	T	_
	ons and other beneficianes served, conferences convened, research papers produced, etc	Expenses	
1 N/A			
2		<u> </u>	_
3			—
4			
Part IX-B	Summary of Program-Related Investments (see page 23 of the instructions)		-
	two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount	—
1 NONE		···-	—
2			—
All other prog	gram-related investments. See page 24 of the instructions		_
3 NONE			
·			
			

Form **990-PF** (2009)

Pa	That X Minimum Investment Return (All domestic foundations must complete this part. Foreign see page 24 of the instructions.)	gn foundation	S,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes:		
а	Average monthly fair market value of securities	1a	829,891.
b	Average of monthly cash balances	1b	27,761.
С	Fair market value of all other assets (see page 24 of the instructions)	1c	0.
d	Total (add lines 1a, b, and c)	1d	857,652.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	857,652.
4	Subtract line 2 from line 1d Cash deemed held for charitable activities. Enter 1 1/2 % of line 3 (for greater amount, see page 25		
	of the instructions)	4	12,865.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	844,787.
6	Minimum investment return. Enter 5% of line 5	6	42,239.
Pa	Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) privation foundations and certain foreign organizations check here ▶ and do not complete this privation.		<u> </u>
1	Minimum investment return from Part X, line 6	1	42,239.
2 a	Tax on investment income for 2009 from Part VI, line 5 2a 147.		
b	Income tax for 2009. (This does not include the tax from Part VI) 2b	1 1	
С	Add lines 2a and 2b	2c	147.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	42,092.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	42,092.
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	42,092.
Pa	rt XII Qualifying Distributions (see page 25 of the instructions)		
1	Amounts paid (including administrative expenses) to accomplish chantable, etc., purposes	I I	
' a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1 _a	117,790.
b	Program-related investments - total from Part IX-B	1b	0.
2	Program-related investments - total from Part IX-B Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	10	
2	nurneens		0.
3	purposes Amounts set aside for specific charitable projects that satisfy the	2	<u>.</u>
-			0
a	Suitability test (prior IRS approval required) Cash distribution test (attach the required schedule)	3a	0.
D 4		3b	117,790.
4 5	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.	4	111,130.
J		_	1 47
c	Enter 1% of Part I, line 27b (see page 26 of the instructions)	5	147.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating w qualifies for the section 4940(e) reduction of tax in those years	nether the foun	laation

Form 990-PF (2009)

Pa	rt XIII Undistributed income (see page	26 of the instruction	ns)		
	1	(a)	(b)	(c)	(d)
1	Distributable amount for 2009 from Part XI,	Corpus	Years prior to 2008	2008	2009
	line 7				42,092.
2	Undistributed income, if any, as of the end of 2009	-			
	Enter amount for 2008 only				
	07 06 05 1				
b					
3	Excess distributions carryover, if any, to 2009				
а	From 2004				
b	From 2005 151, 632.				
C	From 2006 167, 970.				
d	From 2007 188, 352.				
е	From 2008 226, 472.				
f	Total of lines 3a through e	876,287.			
4	Qualifying distributions for 2009 from Part XII,				
	line 4 ▶ \$117,790.				
	Applied to 2008, but not more than line 2a				
		·			<u> </u>
b	Applied to undistributed income of prior years (Election				
	required - see page 26 of the instructions)				
C	Treated as distributions out of corpus (Election				1
	required - see page 26 of the instructions)			<u> </u>	42,092.
	Applied to 2009 distributable amount	75,698.			42,092.
e	Remaining amount distributed out of corpus	73,090.			
5	Excess distributions carryover applied to 2009				
	(If an amount appears in column (d), the same amount must be shown in column (a).)				
6	Enter the net total of each column as				
	indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	951,985.			
h	Prior years' undistributed income Subtract				
-	line 4b from line 2b				
C	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has been				
	issued, or on which the section 4942(a) tax has been previously assessed				
	,				
a	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				
_	distributed in 2010				
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) ,	141,861.			
9	Excess distributions carryover to 2010.				
	Subtract lines 7 and 8 from line 6a	810,124.			
10	Analysis of line 9:				
	Excess from 2005151, 632.				
	Excess from 2006 167,970.				
	Excess from 2007				
d	Excess from 2008 226, 472.		1		
	Excess from 2009				

_	rt XIV Private Oper					NOT APPLICABL
1 a	If the foundation has foundation, and the ruling					
b	Check box to indicate wh)(3) or 4942(j)(5)
2 a	Enter the lesser of the ad-	Tax year		Prior 3 years	<u> </u>	(e) Total
24	justed net income from Part Lor the minimum investment return from Part X for each year listed	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(0,1000)
b	85% of line 2a					
c	Qualifying distributions from Part					
	XII, line 4 for each year listed .					
đ	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 under section					
b	4942(j)(3)(B)(i)					
	enter 2/3 of minimum invest- ment 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)			ļ		ļ
	(2) Support from general public and 5 or more exempt organizations as provided in section 4942					
	(j(x3)(B)(iii)					
	(4) Gross investment income				<u> </u>	
Pa		ary Information (C Juring the year - se			lation had \$5,000	or more in assets
1	Information Regardin	9				
а	List any managers of before the close of any	tax year (but only if th				
	ATTACHMI					
b	List any managers of ownership of a partner	the foundation who ship or other entity) or	own 10% or more o f which the foundatio	f the stock of a corp n has a 10% or greate	oration (or an equally r interest	large portion of the
	N/A					
2	Information Regardin	•		• • • •		
	Check here ► X if t unsolicited requests f organizations under ot	or funds. If the foun	dation makes gifts, g	grants, etc. (see page	itable organizations a e 28 of the instruction	nd does not accept ons) to individuals or
а	The name, address, a	nd telephone number	of the person to who	m applications should t	pe addressed:	
b	The form in which app	lications should be su	bmitted and informati	on and materials they	should include:	
c	Any submission deadli	nes [,]				
d	Any restrictions or li	mitations on awards	, such as by geogr	aphical areas, charit	able fields, kinds of	ınstitutions, or other
	factors:		, , ,	•		

Part XV Supplementary Information (c	ontinued)			
3 Grants and Contributions Paid Dur	ing the Year or Appr			
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
ATTACHMENT 7				
ATTACHMENT /				
Total				113,835
b Approved for future payment				
Total	<u> </u>			

ter gross	amounts unless otherwise indicated	Unrel	ated business income	Excluded by	section 512, 513, or 514	(e) Related or exempt
Program	n service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See page 28 of the instructions)
a						
b						
с						
d						<u> </u>
·						
·						
g Fees	and contracts from government agencies					
Member	ship dues and assessments					
	on savings and temporary cash investments			14	69.	
	ds and interest from securities			14	16,327.	
	al income or (loss) from real estate					
	t-financed property					
	debt-financed property					
	Il income or (loss) from personal property .		-			
Other in	vestment income			1.0	17.045	
Gain or (l	loss) from sales of assets other than inventory			18	-17,945.	
Net inco	ome or (loss) from special events					
Gross pi	rofit or (loss) from sales of inventory		-			
0.001	venue. a					2 42
b OTH	HER INCOME					2,43
c	<u> </u>					
d		!				
-		· · · · · · · · · · · · · · · · · · ·				
e					1 5 10	
e Subtotal	Add columns (b), (d), and (e)				-1,549.	
e Subtotal Total. Ad e worksh	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) neet in line 13 instructions on page 28 to Relationship of Activities	to verify calc	ulations)	xempt Purp	oses	88
e Subtotal Total. Ad e worksh	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e)	to verify calco	ulations) complishment of E	xempt Purp	oses (e) of Part XVI-A cont	88.
Subtotal Total. Ac e worksh rt XVI- ne No.	Add columns (b), (d), and (e)	to verify calcost to the Acuty for white oundation's	ulations) ccomplishment of E ch income is reporte exempt purposes (xempt Purped in column other than b	oses (e) of Part XVI-A control providing funds for	88 tributed importantly
e Subtotal Total. Ac e worksh art XVI- ne No.	Add columns (b), (d), and (e)	to verify calcost to the Acuty for white oundation's	ulations) ccomplishment of E ch income is reporte exempt purposes (xempt Purped in column other than b	oses (e) of Part XVI-A control providing funds for	88 tributed importantly
e Subtotal Total. Ac e worksh art XVI- ne No.	Add columns (b), (d), and (e)	to verify calcost to the Acuty for white oundation's	ulations) ccomplishment of E ch income is reporte exempt purposes (xempt Purped in column other than b	oses (e) of Part XVI-A control providing funds for	88 tributed importantly
Subtotal Total. Ac e worksh rt XVI- ne No.	Add columns (b), (d), and (e)	to verify calcost to the Acuty for white oundation's	ulations) ccomplishment of E ch income is reporte exempt purposes (xempt Purped in column other than b	oses (e) of Part XVI-A control providing funds for	88 tributed importantly
e Subtotal Total. Ad e worksh Irt XVI- ne No.	Add columns (b), (d), and (e)	to verify calcost to the Acuty for white oundation's	ulations) ccomplishment of E ch income is reporte exempt purposes (xempt Purped in column other than b	oses (e) of Part XVI-A control providing funds for	8.8 tributed importantly
e Subtotal Total. Ad e worksh Irt XVI- ne No.	Add columns (b), (d), and (e)	to verify calcost to the Acuty for white oundation's	ulations) ccomplishment of E ch income is reporte exempt purposes (xempt Purped in column other than b	oses (e) of Part XVI-A control providing funds for	8.8 tributed importantly
Subtotal Total. Ac e worksh rt XVI- ne No.	Add columns (b), (d), and (e)	to verify calcost to the Acuty for white oundation's	ulations) ccomplishment of E ch income is reporte exempt purposes (xempt Purped in column other than b	oses (e) of Part XVI-A control providing funds for	8.8 tributed importantly
Subtotal Total. Ac e worksh rt XVI- ne No.	Add columns (b), (d), and (e)	to verify calcost to the Acuty for white oundation's	ulations) ccomplishment of E ch income is reporte exempt purposes (xempt Purped in column other than b	oses (e) of Part XVI-A control providing funds for	8.8 tributed importantly
Subtotal Fotal. Ac worksh rt XVI-	Add columns (b), (d), and (e)	to verify calcost to the Acuty for white oundation's	ulations) ccomplishment of E ch income is reporte exempt purposes (xempt Purped in column other than b	oses (e) of Part XVI-A control providing funds for	8.8 tributed importantly
Subtotal Fotal. Ac worksh rt XVI-	Add columns (b), (d), and (e)	to verify calcost to the Acuty for white oundation's	ulations) ccomplishment of E ch income is reporte exempt purposes (xempt Purped in column other than b	oses (e) of Part XVI-A control providing funds for	8.8 tributed importantly
Subtotal Fotal. Ac worksh rt XVI-	Add columns (b), (d), and (e)	to verify calcost to the Acuty for white oundation's	ulations) ccomplishment of E ch income is reporte exempt purposes (xempt Purped in column other than b	oses (e) of Part XVI-A control providing funds for	8.8 tributed importantly
Subtotal Fotal. Ac worksh rt XVI-	Add columns (b), (d), and (e)	to verify calcost to the Acuty for white oundation's	ulations) ccomplishment of E ch income is reporte exempt purposes (xempt Purped in column other than b	oses (e) of Part XVI-A control providing funds for	8.8 tributed importantly
Subtotal Fotal. Ac worksh rt XVI-	Add columns (b), (d), and (e)	to verify calcost to the Acuty for white oundation's	ulations) ccomplishment of E ch income is reporte exempt purposes (xempt Purped in column other than b	oses (e) of Part XVI-A control providing funds for	8.8 tributed importantly
Subtotal Fotal. Ac worksh rt XVI-	Add columns (b), (d), and (e)	to verify calcost to the Acuty for white oundation's	ulations) ccomplishment of E ch income is reporte exempt purposes (xempt Purped in column other than b	oses (e) of Part XVI-A control providing funds for	8.8 tributed importantly
Subtotal Fotal. Ac worksh rt XVI-	Add columns (b), (d), and (e)	to verify calcost to the Acuty for white oundation's	ulations) ccomplishment of E ch income is reporte exempt purposes (xempt Purped in column other than b	oses (e) of Part XVI-A control providing funds for	8.8 tributed importantly
Subtotal Total. Ac e worksh rt XVI- ne No.	Add columns (b), (d), and (e)	to verify calcost to the Acuty for white oundation's	ulations) ccomplishment of E ch income is reporte exempt purposes (xempt Purped in column other than b	oses (e) of Part XVI-A control providing funds for	8.8 tributed importantly
Subtotal Total. Ac e worksh rt XVI- ne No.	Add columns (b), (d), and (e)	to verify calcost to the Acuty for white oundation's	ulations) ccomplishment of E ch income is reporte exempt purposes (xempt Purped in column other than b	oses (e) of Part XVI-A control providing funds for	8.8 tributed importantly
Subtotal Total. Ac e worksh rt XVI- ne No.	Add columns (b), (d), and (e)	to verify calcost to the Acuty for white oundation's	ulations) ccomplishment of E ch income is reporte exempt purposes (xempt Purped in column other than b	oses (e) of Part XVI-A control providing funds for	8.8 tributed importantly
e Subtotal Total. Ad e worksh Irt XVI- ne No.	Add columns (b), (d), and (e)	to verify calcost to the Acuty for white oundation's	ulations) ccomplishment of E ch income is reporte exempt purposes (xempt Purped in column other than b	oses (e) of Part XVI-A control providing funds for	8.8 tributed importantly
e Subtotal Total. Ac e worksh art XVI- ne No.	Add columns (b), (d), and (e)	to verify calcost to the Acuty for white oundation's	ulations) ccomplishment of E ch income is reporte exempt purposes (xempt Purped in column other than b	oses (e) of Part XVI-A control providing funds for	88 tributed importantly
e Subtotal Total. Ac e worksh art XVI- ne No.	Add columns (b), (d), and (e)	to verify calcost to the Acuty for white oundation's	ulations) ccomplishment of E ch income is reporte exempt purposes (xempt Purped in column other than b	oses (e) of Part XVI-A control providing funds for	
e Subtotal Total. Ac e worksh art XVI- ne No.	Add columns (b), (d), and (e)	to verify calcost to the Acuty for white oundation's	ulations) ccomplishment of E ch income is reporte exempt purposes (xempt Purped in column other than b	oses (e) of Part XVI-A control providing funds for	88.
e Subtotal Total. Ac e worksh art XVI-	Add columns (b), (d), and (e)	to verify calcost to the Acuty for white oundation's	ulations) ccomplishment of E ch income is reporte exempt purposes (xempt Purped in column other than b	oses (e) of Part XVI-A control providing funds for	88 tributed importantly

Form	990-PF	(2009)						22-369	7638			Pa	ge 13
	t XVII		egarding Trans izations	sfers To	and Ti	ransad	ctions	and Re	elationship	s With	Nonc	harit	able
1	in sec	ne organization directly ction 501(c) of the Coczations? ers from the reporting fou	e (other than sec	tion 501(c	:)(3) organ	ızatıons)	y with or in	any other section 5	organization 27, relating	described to political		Yes	No
а		ish									. <u>1a(1)</u>		X
		her assets								• • • • •	. 1a(2)		X
D		transactions: iles of assets to a noncha	ritable exempt organiz	zation							_ _ 1b(1)		х
		rchases of assets from a									• —		Х
		ental of facilities, equipmen											X
		eimbursement arrangemen									1	1	X
	• -	ans or loan guarantees , erformance of services or									1	1	X
c	•	g of facilities, equipment,											Х
d		answer to any of the	· ·			_				-			
		of the goods, other a	•	•	•	_							
	value	in any transaction or	snaring arrangemen	it, snow	in column	(0) (1)	e value	or the	goods, other	assets, or	Servic	es rec	Seiven
(a) L	ine no	(b) Amount involved	(c) Name of noncha	aritable exen	npt organizati	on		scription of	transfers, transa	ctions, and sh	aring arra	ngeme	nts
		N/A					N/A						
									· · · · · · · · · · · · · · · · · · ·				
								,					
									<u> </u>			_	
				·									
								<u>.</u>					
									.	· -			
						i							
2a		foundation directly or ii n 501(c) of the Code (othe	•					exempt or	_	escribed in		es 🗀	No.
ь		s," complete the following:		(3)) 01 111 5	ection 327	••••					''	C3 [
		(a) Name of organization		(b) Ty	pe of organiz	zation			(c) Descrip	tion of relatio	nship		
													
		 											
													
_													
	Under belief,	penalties of perjury, I declar it strue correct, and compl	e that I have examined ete Declaration of prep	this return	, including a than taxpays	accompar er or fidu I	ciary) is t	edules and pased on all 9-10	statements, and information of	to the best which prepa	of my k rer has a	nowled ny knov	ge and wledge
a	- Su	gnature of officer or trustee	Maria	2000	<u> </u>		Date	1 10	Title	· -			
Sign Here		Preparer's signature	Calm	_		Date 6/1	110	Check self-en		Preparer number (page 30 o P0007	See Sign If the inst	ature o	
"	Paid Preparer's Use Only	Firm's name (or yours if	WITHUMSMI			c.	//	1 -	EIN ▶	22-202	7092		
	<u>م</u> م	self-employed), address, and ZIP code	ONE SPRIM		EET NJ		0.8	8901	Phone r	no. 732-	828-1	614	

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

THE SAMBOL FAMILY FO	UNDATION	22-3697638				
Organization type (check one)						
Filers of:	Section:					
Form 990 or 990-EZ	501(c)() (enter number) organization					
	4947(a)(1) nonexempt charitable trust not treated as a private fou	ndation				
	527 political organization					
Form 990-PF	X 501(c)(3) exempt private foundation					
	4947(a)(1) nonexempt charitable trust treated as a private foundat	ion				
	501(c)(3) taxable private foundation					
Note. Only a section 501(c)(7) instructions General Rule X For an organization f	overed by the General Rule or a Special Rule . (8), or (10) organization can check boxes for both the General Rule and a State of the General Rule and a S					
Special Rules	The contributer complete ratio ratio in					
sections 509(a)(1) a	(3) organization filing Form 990 or 990-EZ that met the 331/3% support tesnd 170(b)(1)(A)(vi), and received from any one contributor, during the year 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line	, a contribution of the greater				
the year, aggregate	(7), (8), or (10) organization filing Form 990 or 990-EZ that received from a contributions of more than \$1,000 for use <i>exclusively</i> for religious, charitables, or the prevention of cruelty to children or animals. Complete Parts I, II, an	e, scientific, literary, or				
the year, contributior aggregate to more the year for an exclusivel applies to this organi	(7), (8), or (10) organization filing Form 990 or 990-EZ that received from an stor use exclusively for religious, charitable, etc., purposes, but these contains \$1,000. If this box is checked, enter here the total contributions that we by religious, charitable, etc., purpose Do not complete any of the parts unlessization because it received nonexclusively religious, charitable, etc., contributions.	tributions did not ere received during the es the General Rule outions of \$5,000 or more				
990-EZ, or 990-PF), but it mus or on line 2 of its Form 990-PF	s not covered by the General Rule and/or the Special Rules does not file So t answer "No" on Part IV, line 2 of its Form 990, or check the box on line H F, to certify that it does not meet the filing requirements of Schedule B (Form	of its Form 990-EZ,				
For Privacy Act and Paperwork Reduction Form 990, 990-EZ, or 990-PF.	בעטוו אכנ וויסענפי, פפס עופ ווופטענעטוופי בייסער אייסער אייסער אייסער אייסער אייסער אייסער אייסער אייסער אייסער	5 (, 5, 665, 666 EL, 6, 666 1) (2005)				

Name of organization

THE SAMBOL FAMILY FOUNDATION

Employer identification number 22-3697638

(a)	(b)	(c) Aggregate contributions	(d)
No.	Name, address, and ZIP + 4		Type of contribution
1	RICHARD SAMBOL 546 NAVESINK RIVER ROAD RED BANK, NJ 07701	\$130,884.	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.)
(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.)

Considere B (1 cmm seet 5 = 5 = 2 = 7 ; 7 = 5 = 5)		
Name of organization THE SAMBOL FAMIL	Y FOUNDATION	Employer identification number
		22-3697638
Part II Noncash Property (see instruction	s)	

	, , , , , , , , , , , , , , , , , , , ,		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	SECURITIES		
		\$\$	08/15/2009
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received

JSA 9E1254 1 000

Schedule B (Form 990, 990-EZ, or 990-PF) (2009)

PAGE 18

ATTACHMENT 1

FORM 990PF, PART I - OTHER INCOME

DESCRIPTION MISCELLANEOUS

AND EXPENSES PER BOOKS 2,432. REVENUE

INCOME 2,432. INVESTMENT

2,432.

TOTALS

2,432.

	ı
_	ı
H	ı
-	ı
4	ı
[-1]	ı
=	ľ
$\mathbf{\Sigma}$	ı
┰	ŧ
	ı
$^{\circ}$	ł
~	ļ
7	ı
\vdash	Į
Ē	1
	ı
Ø	ŀ
. ~	•

TAXES ı FORM 990PF, PART I

CHARITABLE <u>PURPOSES</u>	.09	.09
NET INVESTMENT INCOME	3,811. 330.	4,141.
REVENUE AND EXPENSES PER BOOKS	3,811. 330. 60.	4,201.
DESCRIPTION	US TREASURY ON INVESTMENT INC FOREIGN TAX NJ TAXES	TOTALS

.09

60.

FORM 990PF, PART III - OTHER INCREASES IN NET WORTH OR FUND BALANCES

DESCRIPTION AMOUNT

UNREALIZED GAINS/LOSSES, NET

393,345.

TOTAL

393,345.

FORM 990PF, PART III - OTHER DECREASES IN NET WORTH OR FUND BALANCES

DESCRIPTION

AMOUNT

UNREALIZED GAINS/LOSSES, NET

393,345.

TOTAL

393,345.

D TRUSTEES
AND
DIRECTORS,
OFFICERS,
ΟĒ
LIST
ı
VIII
PART
990PF,

ACCT HER NCES	.0	o	·			0
EXPENSE ACCT AND OTHER ALLOWANCES						
CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	.0	.0	.0	.0	0	0
COMPENSATION	.0	.0	· O	·	·	0.
TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	PRESIDENT & DIRECTOR	1ST VICE PRESIDENT & DIRECTOR	2ND VICE PRESIDENT & DIRECTOR	SECRETARY, TREASURER, & DIRE.	3RD VICE PRESIDENT & DIRECTOR	GRAND TOTALS
NAME AND ADDRESS	GARY SAMBOL 1709 CHANTICLEER CHERRY HILL, NJ 08003	RICHARD SAMBOL 3181 MONET DRIVE PALM BEACH GARDENS, FL 33410	JANICE SAMBOL 3181 MONET DRIVE PALM BEACH GARDENS, FL 33410	ERIC SAMBOL 629 TURKEY POINT ROAD BRICK, NJ 08724	HERBERT SAMBOL 440 WEST 24TH STREET APT 17A NEW YORK, NY 10011	

PAGE 22

FORM 990PF, PART XV - INFORMATION REGARDING FOUNDATION MANAGERS

RICHARD SAMBOL
VISTA CENTER ASSOC (HERBERT SAMBOL GEN PARTNER)
SAMBOL INVESTMENTS, INC. (RICHARD SAMBOL, JANICE SAMBOL STOCKHOLDERS)

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

RECIPIENT NAME AND ADDRESS	AND FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
21 PLUS FOUNDATION INC 1130 HOOPER AVENUE	NONE TAX EXEMPT	TO USE HOWEVER ORGANIZATION NEEDS IT	1,000
TOMS RIVER, NJ 08753			
JEWISH FEDERATION OF OCEAN COUNTY	NONE	TO USE HOWEVER ORGANIZATION NEEDS IT	35,000
301 MADISON AVE	TAX EXEMPT		
LAKEWOOD, NJ 08701			
UNIVERSITY OF VERMONT	NONE	TO USE HOWEVER ORGANIZATION NEEDS IT	1,000
411 MAIN STREET	TAX EXEMPT		
BURLINGTON, VT 05401			
KIMBALL MEDICAL CENTER	NONE	TO USE HOWEVER ORGANIZATION NEEDS IT	1,000
600 RIVER AVE	TAX EXEMPT		
LAKEWOOD, NJ 08701			
MONMOUTH UNIVERSITY	NONE	TO USE HOWEVER ORGANIZATION NEEDS IT	21,000
WEST LONG BRANCH, NJ 07764	TAX EXEMPT		
	NONE	TO USE HOWEVER ORGANIZATION NEEDS IT	1,000
C/O ISLES INC, 10 WOOD STREET	TAX EXEMPT		
TRENTON, NJ 08618			

7.22:47 AM

22-3697638

ATTACHMENT 7 (CONT'D)

	l
YEAR	
THE	l
DURING	
PAID	
CONTRIBUTIONS	
AND (l
GRANTS	
- 1	l
×	۱
PART	
990PF,	
FORM	

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		
	AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
LAKEWOOD CHEDER- RABBI BARNETSKY	NONE	TO USE HOWEVER ORGANIZATION NEEDS IT	1,000
350 COURTNEY ROAD	TAX EXEMPT		
LAKEWOOD, NJ 08701			
PEYLIM LEV LACHIM	NONE	TO USE HOWEVER ORGANIZATION NEEDS IT	1,000
350 COURTNEY ROAD	TAX EXEMPT		
LAKEWOOD, NJ 08701			
CHABAD OF THE SHORE	NONE	TO USE HOWEVER ORGANIZATION NEEDS IT	1,000
620 OCEAN AVE	TAX EXEMPT		
LONG BRANCH, NJ 07740			
OCEAN COUNTY COLLEGE FOUNDATION	NONE	TO USE HOWEVER ORGANIZATION NEEDS IT	1,000
COLLEGE DRIVE	TAX EXEMPT		
PO BOX 2001			
TOMS RIVER, NJ 08754-2001			
MERIDIAN HEALTH FOUNDATION	NONE	TO USE HOWEVER ORGANIZATION NEEDS IT	1,000
4900 ROUTE 33, SUITE 1000	TAX EXEMPT		
NEPTUNE, NJ 07753			
CUMBERLAND COUNTY SPCA	NONE	TO USE HOWEVER ORGANIZATION NEEDS IT	200
1244 NORTH DELSEA DRIVE	TAX EXEMPT		
VINELAND, NJ 08360			

7:22.47 AM

ATTACHMENT 7 (CONT'D)

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		
	AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
MONMOUTH MEDICAL CENTER FOUNFATION	NONE	TO USE HOWEVER ORGANIZATION NEEDS IT	1,000.
300 SECOND AVE	TAX EXEMPT		
LON BRANCH, NJ 07740			
SOLOMON SCHECHTER ACADEMY	NONE	TO USE HOWEVER ORGANIZATION NEEDS IT	1,000
395 KENT RD	TAX EXEMPT		
HOWELL, NJ 07731			
ST STEPANOS AMERICAN CHURCH ENDOWMENT	NONE	TO USE HOWEVER ORGANIZATION NEEDS IT	1,000
1184 OCEAN AVE	TAX EXEMPT		
ELBERON, NJ 07740			
MONMOUTH ACADEMY	NONE	TO USE HOWEVER ORGANIZATION NEEDS IT	1,000
152 LANES MILL RD	TAX EXEMPT		
HOWELL, NJ 07731			
DAVID HOROWITZ FREEDOM CENTER	NONE	TO USE HOWEVER ORGANIZATION NEEDS IT	1,000
SHERMAN OAKS, CA 91499	TAX EXEMPT		
GCSANJ FOUNDATION	NONE	TO USE HOWEVER ORGANIZATION NEEDS IT	1,250
PO BOX 394	TAX EXEMPT		
BRIELLE, NJ 08730			

7:22:47 AM

ATTACHMENT 7 (CONT'D)

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

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
GIET OF WARMTH 1415 WYCKOFF ROAD WALL, NJ 07719	NONE TAX EXEMPT	TO USE HOWEVER ORGANIZATION NEEDS IT	1,000
CONGREGATION B'NAI ISRAEL 1488 OLD FREEHOLD RD TOMS RIVER, NJ	NONE TAX EXEMPT	TO USE HOWEVER ORGANIZATION NEEDS IT	10,000
FAIRVIEW FIRST AID SQUAD P O BOX 8208 RED BANK, NJ 07701	NONE TAX EXEMPT	TO USE HOWEVER ORGANIZATION NEEDS IT	1,000
HERBERTSVILLE FIRE CO NO.1 601 HERBERTSVILLE RD BRICK, NJ 08724	NONE TAX EXEMPT	TO USE HOWEVER ORGANIZATION NEEDS IT	1,000
HERTBERTSVILLE FIRE AID SQUAD 375 HERBERTSVILLE RD BRICKTOWN, NJ 08724	NONE TAX EXEMPT	TO USE HOWEVER ORGANIZATION NEEDS IT	1,000
JERSEY SHORE ANIMAL CENTER 185RICK BLVD. BRICK, NJ 00723	NONE TAX EXEMPT	TO USE HOWEVER ORGANIZATION NEEDS IT	200

7.22:47 AM

22-3697638

···

ATTACHMENT 7 (CONT'D)

PAGE 28

ATTACHMENT 7 (CONT'D)

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

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		
	AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
JERSEY SHORE COUNCIL, BSA	NONE	TO USE HOWEVER ORGANIZATION NEEDS IT	1,000
1518 RIDGEWAY ROAD	TAX EXEMPT		
TOMS RIVER, NJ 08755			
MACCABI USA/SPORTS FOR ISRAEL	NONE	TO USE HOWEVER ORGANIZATION NEEDS IT	1,000
1926 ARCH STREET 4R	TAX EXEMPT		
PHILADELPHIA, PA 19103			
JEWISH THEOLOGICAL SEMINARY	NONE	TO USE HOWEVER ORGANIZATION NEEDS IT	1,000
3080 BROADWAY	TAX EXEMPT		
NEW YORK, NY 10027			
AMERICAN FRIENDS OF TORAH B'YISRAEL	NONE	TO USE HOWEVER ORGANIZATION NEEDS IT	1,000
403 6TH STREET	TAX EXEMPT		
LAKEWOOD, NJ 08701			
LIBERTY SCIENCE CENTER	NONE	TO USE HOWEVER ORGANIZATION NEEDS IT	1,000
222 JERSEY CITY BOULEVARD	TAX EXEMPT		
JERSEY CITY, NJ 07305			
VNA OF CENTRAL JERSEY	NONE	TO USE HOWEVER ORGANIZATION NEEDS IT	1,000
176 RIVERSIDE AVENUE SUITE 200	TAX EXEMPT		
BERWYN, PA 19312			

ATTACHMENT 7 (CONT'D)

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		
	AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
OPEN ARMS	NONE	TO USE HOWEVER ORGANIZATION NEEDS IT	85
601 PINE AVENUE	TAX EXEMPT		
ALBANY, GA 31701			
HOLOCAUST GENOCIDE & HUMAN RIGHTS EDUCATION CENTER	NONE	TO USE HOWEVER ORGANIZATION NEEDS IT	1,000
765 NEWMAN SPRING ROAD	TAX EXEMPT		
LINCROFT, NJ 07738			
MCSPCA	NONE	TO USE HOWEVER ORGANIZATION NEEDS IT	200
260 WALL STREET	TAX EXEMPT		
EATONTOWN, NJ 07724			
UNITED SYNAGOGUE OF CONSERVATIVE JUDAISM	NONE	TO USE HOWEVER ORGANIZATION NEEDS IT	1,000
820 SECOND AVENUE 10TH FLOOR	TAX EXEMPT		
NEW YORK, NY 10017			
NEW YORK PRESBYTERIAN HOSPITAL	NONE	TO USE HOWEVER ORGANIZATION NEEDS IT	1,000
622 WEST 168TH STREET	TAX EXEMPT		
NEW YORK, NY 10032			
US HOLOCASUT MEMORIAL MUSEUM	NONE	TO USE HOWEVER ORGANIZATION NEEDS IT	5,000
100 RAOUL WALLENBERG PLACE SW	TAX EXEMPT		
WASHINGTON, DC, DC 20024			

RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR

FOUNDATION STATUS OF RECIPIENT

PURPOSE OF GRANT OR CONTRIBUTION

AMOUNT

ATTACHMENT 7 (CONT'D)

RIVERVIEW MEDICAL CENTER FOUNDATION 1 RIVERVIEW PLAZA

RED BANK, NJ 07701

RECIPIENT NAME AND ADDRESS

TAX EXEMPT NONE

TO USE HOWEVER ORGANIZATION NEEDS IT

1,000

TOTAL CONTRIBUTIONS PAID

113,835

PAGE 31 ATTACHMENT 7

V 09-6 3

96693S M998 6/1/2010

7.22:47 AM

SCHEDULE D (Form 1041)

Department of the Treasury Internal Revenue Service

Capital Gains and Losses

▶ Attach to Form 1041, Form 5227, or Form 990-T. See the instructions for Schedule D (Form 1041) (also for Form 5227 or Form 990-T, if applicable). OMB No 1545-0092

Employer identification number Name of estate or trust THE SAMBOL FAMILY FOUNDATION 22-3697638 Note: Form 5227 filers need to complete only Parts I and II. Short-Term Capital Gains and Losses - Assets Held One Year or Less Part I (e) Cost or other basis (f) Gain or (loss) for (a) Description of property (b) Date acquired (c) Date sold (see page 4 of the instructions) (d) Sales once the entire year Subtract (e) from (d) (Example 100 shares 7% preferred of "Z" Co) (mo , day, yr) (mo, day, yr) 1a b Enter the short-term gain or (loss), if any, from Schedule D-1, line 1b 1b Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824 3 Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts 3 Short-term capital loss carryover Enter the amount, if any, from line 9 of the 2008 Capital Loss 4 Net short-term gain or (loss). Combine lines 1a through 4 in column (f) Enter here and on line 13, column (3) on the back . . Long-Term Capital Gains and Losses - Assets Held More Than One Year (e) Cost or other basis (f) Gain or (loss) for (a) Description of property (b) Date acquired (c) Date sold the entire year Subtract (e) from (d) (d) Sales price (see page 4 of the instructions) (Example 100 shares 7% preferred of "Z" Co) (mo , day, yr) (mo, day, yr) 6a -17,945. **b** Enter the long-term gain or (loss), if any, from Schedule D-1, line 6b 6b Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824 Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts 8 9 Gain from Form 4797, Part I 10 Long-term capital loss carryover. Enter the amount, if any, from line 14 of the 2008 Capital Loss 11 Net long-term gain or (loss). Combine lines 6a through 11 in column (f) Enter here and on line 14a, -17,945.For Paperwork Reduction Act Notice, see the Instructions for Form 1041. Schedule D (Form 1041) 2009

Schedule	D (Form	1041) 2	2009

		•
2 00°	ıe	4

	dule D (Form 1041) 2009					Page 2
Pa	t ill Summary of Parts I and II	(1) Ben	eficianes'	(2) Es	tate's	(2) Total
	Caution: Read the instructions before completing this part.	(see p	page 5)	or tru	ıst's	(3) Total
13	Net short-term gain or (loss)					
14	Net long-term gain or (loss):					
а	Total for year14a					-17,945.
	Unrecaptured section 1250 gain (see line 18 of the wrksht) 14b					
С	28% rate gain			_		
15	• • • • • • • • • • • • • • • • • • • •					-17,945.
Note	e: If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4 (or Form 990	O-T, Part I, III	ne 4a). If line	es 14a and 1	5, colu	mn (2), are net gains, go
_	ort V, and do not complete Part IV If line 15, column (3), is a net loss, complete Part IV	and the Cap	itai Loss Cai	ryover won	csneet,	as necessary
Pa	t IV Capital Loss Limitation				,	
16	Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, Part I, I					
a Note Cam	The loss on line 15, column (3) or b \$3,000 If the loss on line 15, column (3), is more than \$3,000, or if Form 1041, page 1, line over Worksheet on page 7 of the instructions to figure your capital loss carryover	ne 22 (or Fo	rm 990-T, II	ne 34), is a	16 loss, c	(3,000) omplete the Capital Loss
	Tax Computation Using Maximum Capital Gains Rates			<u> </u>		
_	n 1041 filers. Complete this part only if both lines 14a and 15 in column (2) are gain	s oran an	nount is er	tered	in Part Lor Part II and
	e is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is more that		o, o. a a			mir die rorr die nand
Cau	tion: Skip this part and complete the worksheet on page 8 of the instructions	ıf:				
	ther line 14b, col. (2) or line 14c, col. (2) is more than zero, or					
	oth Form 1041, line 2b(1), and Form 4952, line 4g are more than zero.					
For	n 990-T trusts. Complete this part only if both lines 14a and 15 are gail	ns, or qual	ified divide	ends are II	nclude	d in income in Part I
	orm 990-T, and Form 990-T, line 34, is more than zero. Skip this part and er line 14b, col. (2) or line 14c, col. (2) is more than zero.	i complete	tne work	sneet on p	age 8	of the instructions if
						 -
17	Enter taxable income from Form 1041, line 22 (or Form 990-T, line 34)	17				
18	Enter the smaller of line 14a or 15 in column (2)					
	but not less than zero	_				
19	Enter the estate's or trust's qualified dividends					
	from Form 1041, line 2b(2) (or enter the qualified					
	dividends included in income in Part I of Form 990-T)					
20	Add lines 18 and 19	i				
21	If the estate or trust is filing Form 4952, enter the					
	amount from line 4g; otherwise, enter -0 ▶ 21	_				
22	Subtract line 21 from line 20. If zero or less, enter -0-					
23	Subtract line 22 from line 17. If zero or less, enter -0-	23				
24	Enter the smaller of the amount on line 17 or \$2,300	24			-	
25	Is the amount on line 23 equal to or more than the amount on line 24?					
	Yes. Skip lines 25 and 26; go to line 27 and check the "No" box	_			1	
	No. Enter the amount from line 23					
26	Subtract line 25 from line 24	26				
27	Are the amounts on lines 22 and 26 the same?	_				
	Yes. Skip lines 27 thru 30, go to line 31 No. Enter the smaller of line 17 or line 22	27				
28	Enter the amount from line 26 (If line 26 is blank, enter -0-)	. 28				
29	Subtract line 28 from line 27	. 29		·		
30	Multiply line 29 by 15% (.15)				30	
31	Figure the tax on the amount on line 23. Use the 2009 Tax Rate Sch					
	(see the Schedule Ginstructions in the instructions for Form 1041)				31	
32	Add lines 30 and 31				32	
33	Figure the tax on the amount on line 17 Use the 2009 Tax Rate Sch					
	(see the Schedule Ginstructions in the instructions for Form 1041)				33	
34	Tax on all taxable income. Enter the smaller of line 32 or line 33 here a		•			
	G, line 1a (or Form 990-T, line 36)				34	

Name of estate or trust as shown on Form 1041. Do not enter name and employer identification number if shown on the other side THE SAMBOL FAMILY FOUNDATION

Employer identification number 22-3697638

				(D. O - I 1 1
(b) Date acquired (mo , day, yr)	(c) Date sold (mo , day, yr)	(d) Sales pnce (see page 4 of the instructions)	(e) Cost or other basis (see page 4 of the instructions)	(f) Gain or (loss) Subtract (e) from (d)
12/13/2000	01/02/2009	7.		7
09/08/2005	06/23/2009	57,135.	57,070.	65
09/08/2005	11/25/2009	64,348.	60,290.	4,058
12/07/2004	12/31/2009		22,075.	-22,075
	(mo, day, yr) 12/13/2000 09/08/2005 09/08/2005	12/13/2000 01/02/2009 09/08/2005 06/23/2009 09/08/2005 11/25/2009	12/13/2000 01/02/2009 7. 09/08/2005 06/23/2009 57,135. 09/08/2005 11/25/2009 64,348.	12/13/2000 01/02/2009 7. 09/08/2005 06/23/2009 57,135. 57,070. 09/08/2005 11/25/2009 64,348. 60,290.

FORM 990-PF - PART IV
CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

CA	IPITAL GAI	NS AND LO	SSES FOR	<u>R TAX ON</u>	INVEST	M	ENT INCOM	<u>lE</u>
Kınd of F			Desc	ription		or D	Date acquired	Date sold
Gross sale price less expenses of sale	Depreciation allowed/ allowable	Cost or other basis	FMV as of 12/31/69	Adj. basis as of 12/31/69	Excess of FMV over adj basis	Ĭ	Gain or (loss)	
		1000SH BANK PROPERTY TY	OF AMERICA	7		D	12/13/2000	01/02/2009
7.							7.	
57,135.		1000SH MCDO PROPERTY TY 57,070.				D	09/08/2005	06/23/2009
		1000SH MCDO				D	09/08/2005	11/25/2009
64,348.		PROPERTY TY 60,290.	PE: SECURIT	IES			4,058.	
		1000 CITIGR PROPERTY TY		les.		D		12/31/2009
		22,075.					-22,075.	
'OTAL GAIN(L	OSS)						-17,945.	
		; ;						
		·						
A						Ц		

	UNREALIZEC	GAIN OR	ross		0	34,870	56,070	(20,972)	×.671	0	(39,010)	18,230	42,217	(4,186)	1,838	(17,870)	51,416	17,827	0	ô	0	18,570	89,075	68,395	11,130	55,074				393 345
	Ī	TOTAL G	MARKET		32,000	080'09	85,590	88,237	45,343	0	3,310	57,000	059'98	44,600	4,888	15,130	81,600	26,640	0	0	٥	91,440	128,225	131,835	24,880	62,720	_			1,078,068
SALES	_		-		1 00	30 04		15.08	2 89	000		57 00	19 31	10 00	11 01	15 13		29 21	00 0	000	000	30 48	37 40 1			62 72				2,
MKT SECURITIES REMAINING AFTER SALES	MKT	PRICE	12-31-09		90		L		24	٥			Z	36					0	0										23
SREMAININ			COST		L	0 25,210	0 29 520		5. 44,672	0		017.96 0	0 54,334	_	3,050	33,000	0 30,184	2. 8,812		0	0	0 72 870			0 13,750	0 7,648		·		684 723
ECURITIES		STIND			32,000	2,000	000'E 🔅	5,859	~15,165	0	1,000	1.000	2,000	4,460	444	∴1,000;	4,000	. 912	0	0	0	3,000	3,375	3,525	200	1,000 po				
MKTS			Description		Cash & Equivalents 12/31/09	Alistate Insurance	Amdocs Limited	Bank of America firmly MBNA	Central Jersey Bancorp		Crigroup Incorporated	Coca-Cola Co	Coming Incorporated	Ford Motor Co Inc	Gammon Lake Resources	General Electric	Intel Corporation	Lihir Gold Limited				Microsoft Corporation	New Jersey Resources	New Jersey Resources	Prudential Financial	Toronto Dominion Bank (merger w/Con				
5. 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		SHORT	TERM															_	65	4,058										4 123
		LONG	TERM							(22,075)											ica									(22,075)
2009 SALES		PROFIT	(LOSS)		0	o ^	0 3.	0	0	(22,075)	.0 × × ×	0 .	₹0	0 ~	0 **	0	0	7	65	4,058	Merged with Bank of America	0	0	0	0 -	, O,		N	٠ ٠,	(17,952)
2009 SALE		SALES	PROCEEDS		_					0		_							57,135	64,348	erged with B									121,483
4 4 33			COST PR	_	0	0	0	0	0	22,075	0	0	0	0	0	0	0	0	57,070	60 290	26,719 M	0	0	0	0	0				166,154
,		SIIIS								1,000			_						1,000	1,000	1,000									
100 mm		DATE	SOLD			25,210				12-31-09									06-23-09	33,722 11-26-09	01-02-09									
		DONOR	COST		32,000	25,210	29,520	109 208	44 872	22,075	42 320	38,770	54,334	48,786	3,050	33,000	30,184	8,812	33,722	33,722	26,719	72 870	27,150	63 440	13 750	7 646				800,960
		STINO			32,000	2,000	3,000	5,859	15 165	1,000	1,000	1,000	5,000	4,460	444	1,000	4,000	912	1,000	1 000	1,000	3 000	3,375	3 525	200	1,000				
	COST	Ä	LIND		9	· 12 80	984	18 84	2 95	\$ 22 08	≪ ≈42 32.	38 77	.≫ 10 87	10 94-	6.87	33 00	7.55	99 6	33.72	> 33.72	26 72	. 24 29.	8 04	≪ 18 00	××× 27.50	♦ 7.65				
	nation	TOTAL				88,679	103 313	172 257	173,285	42 690	Ť		105,550		7,148		63,040	14,309	57,070	60,290	53 980		69 180	134,479	_	139,872			_	1,305,737
	FMV at time of Donation	SIND				2,000	3,000	2 000	15 165	1,000			2,000		777		4,000	912	1,000	1,000	1,000		3,375	3 525	200	2 070				
CURITIES	FMV at	PER	FNO			2	2.2.2	34 45.	11 43	42 69	×	_	₹2111	*	16 10	`	15.78	15 69	57 07	60 28	83 BB	× ~	* 20 50 ×	38 15	41 19	67.57	* \square		ž	
ETABLE SE		Date	Purchased			12-23-02	12-29-99	01-03-06	12-23-03	12-07-04	10-25-04	10-25-04	12-15-05	01-24-02	12-29-05	10-25-04	12-12-02	12-29-05	9-08/05	9-08/05	12-13-00	3-22-05	12-13-01	12/29/09	12-12-03	11-15-06				
OF MARKE			<u>a</u>	ŀ						Ė					_		_	È	_				_		ĺ	_		-		
THE SAMBOL FAMILY FOUNDATION - SCHEDULE OF MARKETABLE SECURITIES			STOCK		1 00 Cash & Equivalents 12/31/09	32 76 Alistate insurance	18 29 Amdocs Limited	14 08 Bank of Amenca frmly MBNA	6 35 Central Jersey Bancorp	4 54 Cit Group Inc	6 71 Citigroup Incorporated	45 27 Coca-Cola Co	9 53 Corning Incorporated	2 29 Ford Motor Co Inc	5 47 Gammon Lake Resources	16 20 General Electric	14 66 Intel Corporation	21 93 Lhir Gold Limited	Donalds	Donalds	mll Lynch	19 44 Microsoft Corporation	39 35 New Jersey Resources	39 35 New Jersey Resources	30 26 Prudential Financial	35 87 Toronto Dominion Bank (merger w/Con				
FAMILY FC	MKT	PRICE	12-31-08	-	1 00 Ca	32 76 Alls	18 29 Am	14 08 Bai	8 35 Ce	4 2 2	8 71 Cut	45 27 Co	9 53 Col	2 29 For	5 47 Ga	16 20 Ge	14 68 Inte	21 93 LIN	62 19 McDonalds	62 19 McDonalds	11 64 Memil Lynct	19 44 Mic	39 35 Ner	39 35 Ne	30 26 Pm	35 87 Tor	-			H
E SAMBOL		<u> </u>	SYMB 12-	-	ZX.	ALL	×õ	BAC	SBX	다	v	κο	GLW	L	GRS	GE	INTC	LIHRY	MCD	MCD	WER	MSFT	NJR	RUR	PRU	£				$ \cdot $
Ξ	I		Ľ	L	ľ	<u> </u>	Ĺ	Ĺ	<u>ا</u>	L	L	L	Ľ	L	Ľ	L	Ľ	تا	Ĺ	Ĺ	Ĺ	_	Ľ.	Ĺ	Ĺ	L		L	L_	Ц

32,000