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

2009

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

For calendar year 2009, or tax year beginning,

and ending

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

Use the IRS label. Otherwise, print or type. See Specific Instructions.	Name of foundation <b>THE JAMES B. BOSKEY MEMORIAL FOUNDATION INC.</b>		A Employer identification number <b>22-3787050</b>	
	Number and street (or P O box number if mail is not delivered to street address) <b>C/O ADELE BOSKEY - 4 WINDING WAY</b>		Room/suite	B Telephone number <b>(973) 226-7463</b>
City or town, state, and ZIP code <b>NORTH CALDWELL, NJ 07006</b>		<p>C If exemption application is pending, check here ► <input type="checkbox"/></p> <p>D 1. Foreign organizations, check here ► <input type="checkbox"/></p> <p>2. Foreign organizations meeting the 85% test, check here and attach computation ► <input type="checkbox"/></p> <p>E If private foundation status was terminated under section 507(b)(1)(A), check here ► <input type="checkbox"/></p> <p>F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ► <input type="checkbox"/></p>		
<p>H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation  <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation</p> <p>I Fair market value of all assets at end of year (from Part II, col. (c), line 16) ► \$ <b>362166.</b> (Part I, column (d) must be on cash basis.)</p>		<p>J Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual  <input type="checkbox"/> Other (specify) _____</p>		
<b>Part I</b> Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).)		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income
		(d) Disbursements for charitable purposes (cash basis only)		
<b>REVENUE</b>  <b>OPERATING AND ADMINISTRATIVE EXPENSES</b>  <b>2009</b>	1 Contributions, gifts, grants, etc., received	<b>29675.</b>	<b>N/A</b>	
	2 Check ► <input checked="" type="checkbox"/> if the foundation is not required to attach Sch B			
	3 Interest on savings and temporary cash investments	<b>7959.</b>	<b>7959.</b>	<b>STATEMENT 1</b>
	4 Dividends and interest from securities	<b>7101.</b>	<b>7101.</b>	<b>STATEMENT 2</b>
	5a Gross rents			
	b Net rental income or (loss)			
	6a Net gain or (loss) from sale of assets not on line 10	<b>-287.</b>		
	b Gross sales price for all assets on line 6a			
	7 Capital gain net income (from Part IV, line 2)		<b>0.</b>	
	8 Net short-term capital gain			
	9 Income modifications			
	10a Gross sales less returns and allowances			
	b Less Cost of goods sold			
	c Gross profit or (loss)			
	11 Other income	<b>4410.</b>	<b>4410.</b>	<b>STATEMENT 3</b>
	12 Total. Add lines 1 through 11	<b>48858.</b>	<b>19470.</b>	
	13 Compensation of officers, directors, trustees, etc	<b>0.</b>	<b>0.</b>	<b>0.</b>
	14 Other employee salaries and wages			
	15 Pension plans, employee benefits			
	16a Legal fees			
	b Accounting fees Stmt 4	<b>3000.</b>	<b>1500.</b>	<b>1500.</b>
	c Other professional fees			
	17 Interest			
	18 Taxes			
	19 Depreciation and depletion			
	20 Occupancy			
	21 Travel, conferences, and meetings			
	22 Printing and publications			
23 Other expenses Stmt 5	<b>508.</b>	<b>0.</b>	<b>OGDEN, UT</b>	
24 Total operating and administrative expenses. Add lines 13 through 23	<b>3508.</b>	<b>1500.</b>	<b>2008.</b>	
25 Contributions, gifts, grants paid	<b>14407.</b>		<b>14407.</b>	
26 Total expenses and disbursements. Add lines 24 and 25	<b>17915.</b>	<b>1500.</b>	<b>16415.</b>	
27 Subtract line 26 from line 12:	<b>30943.</b>			
a Excess of revenue over expenses and disbursements				
b Net investment income (if negative, enter -0-)		<b>17970.</b>		
c Adjusted net income (if negative, enter -0-)			<b>N/A</b>	

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<b>Part II</b> <b>Balance Sheets</b>		Attached schedules and amounts in the description column should be for end-of-year amounts only	<b>Beginning of year</b>	<b>End of year</b>	
			<b>(a) Book Value</b>	<b>(b) Book Value</b>	<b>(c) Fair Market Value</b>
<b>Assets</b>	1 Cash - non-interest-bearing				
	2 Savings and temporary cash investments		49168.	79220.	79220.
	3 Accounts receivable ►				
	Less: allowance for doubtful accounts ►				
	4 Pledges receivable ►				
	Less: allowance for doubtful accounts ►				
	5 Grants receivable				
	6 Receivables due from officers, directors, trustees, and other disqualified persons				
	7 Other notes and loans receivable ►				
	Less: allowance for doubtful accounts ►				
	8 Inventories for sale or use				
	9 Prepaid expenses and deferred charges				
	10a Investments - U.S. and state government obligations				
	b Investments - corporate stock Stmt. 6		308839.	309730.	282946.
	c Investments - corporate bonds				
<b>Liabilities</b>	11 Investments - land, buildings, and equipment basis ►				
	Less accumulated depreciation ►				
	12 Investments - mortgage loans				
	13 Investments - other				
	14 Land, buildings, and equipment basis ►				
	Less accumulated depreciation ►				
	15 Other assets (describe ►)				
	16 Total assets (to be completed by all filers)		358007.	388950.	362166.
	17 Accounts payable and accrued expenses				
	18 Grants payable				
<b>Net Assets or Fund Balances</b>	19 Deferred revenue				
	20 Loans from officers, directors, trustees, and other disqualified persons				
	21 Mortgages and other notes payable				
	22 Other liabilities (describe ►)				
	23 Total liabilities (add lines 17 through 22)		0.	0.	
	Foundations that follow SFAS 117, check here ► <input type="checkbox"/>				
	and complete lines 24 through 26 and lines 30 and 31.				
	24 Unrestricted				
	25 Temporarily restricted				
	26 Permanently restricted				
<b>Net Assets or Fund Balances</b>	Foundations that do not follow SFAS 117, check here ► <input checked="" type="checkbox"/>				
	and complete lines 27 through 31.				
	27 Capital stock, trust principal, or current funds		0.	0.	
	28 Paid-in or capital surplus, or land, bldg., and equipment fund		0.	0.	
	29 Retained earnings, accumulated income, endowment, or other funds		358007.	388950.	
	30 Total net assets or fund balances		358007.	388950.	
	31 Total liabilities and net assets/fund balances		358007.	388950.	

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

1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1 358007.
2 Enter amount from Part I, line 27a	2 30943.
3 Other increases not included in line 2 (itemize) ►	3 0.
4 Add lines 1, 2, and 3	4 388950.
5 Decreases not included in line 2 (itemize) ►	5 0.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6 388950.

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

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)			(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a <b>SUBURBAN PROPANE</b>			P		
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 (loss) (e) plus (f) minus (g)	
a			287.	-287.	
b					
c					
d					
e					
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69				(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))	
(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		
a				-287.	
b					
c					
d					
e					
2 Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }			2	-287.
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter -0- in Part I, line 8	{ }			3	N/A

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

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

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

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?  Yes  No

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

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

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2008	17663.	329212.	.053652
2007	15261.	357086.	.042738
2006	14244.	312792.	.045538
2005	8724.	280226.	.031132
2004	14369.	241627.	.059468

2 Total of line 1, column (d)	2	.232528
3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	.046506
4 Enter the net value of noncharitable-use assets for 2009 from Part X, line 5	4	292891.
5 Multiply line 4 by line 3	5	13621.
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	180.
7 Add lines 5 and 6	7	13801.
8 Enter qualifying distributions from Part XII, line 4	8	16415.

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

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

1a	Exempt operating foundations described in section 4940(d)(2), check here ► <input type="checkbox"/> and enter "N/A" on line 1.	Date of ruling or determination letter: _____ (attach copy of letter if necessary-see instructions)	1	180.
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here ► <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b			
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) .....			
3	Add lines 1 and 2 .....		2	0.
4	Subtrah A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) .....		3	180.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- .....		4	0.
6	Credits/Payments:		5	180.
a	2009 estimated tax payments and 2008 overpayment credited to 2009 .....	6a		
b	Exempt foreign organizations - tax withheld at source .....	6b		
c	Tax paid with application for extension of time to file (Form 8868) .....	6c		
d	Backup withholding erroneously withheld .....	6d		
7	Total credits and payments. Add lines 6a through 6d .....		7	0.
8	Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached .....		8	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed .....		9	180.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid .....		10	
11	Enter the amount of line 10 to be: Credited to 2010 estimated tax ►		11	Refunded ►

**Part VII-A Statements Regarding Activities**

1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	Yes	No
1b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)? <i>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.</i>	Yes	No
1c	Did the foundation file Form 1120-POL for this year?	Yes	No
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. ► \$ <u>0.</u> (2) On foundation managers. ► \$ <u>0.</u>		
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ► \$ <u>0.</u>		
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? <i>If "Yes," attach a detailed description of the activities.</i>	Yes	No
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? <i>If "Yes," attach a conformed copy of the changes</i>	Yes	No
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	Yes	No
b	If "Yes," has it filed a tax return on Form 990-T for this year?	N/A	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? <i>If "Yes," attach the statement required by General Instruction T.</i>	Yes	No
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	Yes	No
7	Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col. (c), and Part XV.</i>	Yes	No
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ►		
	NY, 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	Yes	No
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)? If "Yes," complete Part XIV	Yes	No
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	Stmt. 7	Yes

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

11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions) .....  11  X

12 Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008? .....  12  X

13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? .....  13  X

Website address ► **WWW.JAMESBBOSKEYMEMORIAL.ORG**

14 The books are in care of ► **ADELE BOSKEY** Telephone no. ► **(973) 226-7463**  
Located at ► **4 WINDING WAY, NORTH CALDWELL, NJ** ZIP+4 ► **07006**

15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the year ► **15**  N/A

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

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

	Yes	No
1a During the year did the foundation (either directly or indirectly):		
(1) Engage in the sale or exchange, or leasing of property with a disqualified person? .....	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> X No
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? .....	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> X No
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? .....	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> X No
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? .....	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> 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)? .....	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> X No
(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) .....	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> X No
b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)? .....	N/A ► <input type="checkbox"/>	
Organizations relying on a current notice regarding disaster assistance check here .....		
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2009? .....	1c <input checked="" type="checkbox"/> X	
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)): .....		
a At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2009? .....	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> X No
If "Yes," list the years ► .....		
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions.) .....	N/A	
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. ► .....		
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? .....	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> X No
b If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2009.) .....	3b <input type="checkbox"/> 4a <input checked="" type="checkbox"/> X	
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? .....		
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2009? .....	4b <input checked="" type="checkbox"/> X	

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

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

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?  Yes  No

(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?  Yes  No

(3) Provide a grant to an individual for travel, study, or other similar purposes?  Yes  No

(4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (6), or section 4940(d)(2)?  Yes  No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?  Yes  No

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

N/A

5b



Organizations relying on a current notice regarding disaster assistance check here

c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?  Yes  No

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

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

Yes  No

6b

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

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

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

Yes  No

7b

b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?  Yes  No

N/A

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

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

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
See Statement 8		0.	0.	0.

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

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
N/A				
N/A	0.00	0.	0.	0.

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



0

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

**3 Five highest-paid independent contractors for professional services. If none, enter "NONE."**

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
N/A		0.

Total number of others receiving over \$50,000 for professional services ► 0

**Part IX-A Summary of Direct Charitable Activities**

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

1	N/A	Expenses
2		
3		
4		

**Part IX-B Summary of Program-Related Investments**

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.

1	N/A	Amount
2		
3		
Total. Add lines 1 through 3 ► 0.		

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

1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a Average monthly fair market value of securities	1a	237539.
b Average of monthly cash balances	1b	59812.
c Fair market value of all other assets	1c	
d Total (add lines 1a, b, and c)	1d	297351.
e Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	0.
2 Acquisition indebtedness applicable to line 1 assets	2	0.
3 Subtract line 2 from line 1d	3	297351.
4 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	4460.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	292891.
6 Minimum investment return. Enter 5% of line 5	6	14645.

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

1 Minimum investment return from Part X, line 6	1	14645.
2a Tax on investment income for 2009 from Part VI, line 5	2a	180.
b Income tax for 2009. (This does not include the tax from Part VI.)	2b	
c Add lines 2a and 2b	2c	180.
3 Distributable amount before adjustments. Subtract line 2c from line 1	3	14465.
4 Recoveries of amounts treated as qualifying distributions	4	0.
5 Add lines 3 and 4	5	14465.
6 Deduction from distributable amount (see instructions)	6	0.
7 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	14465.

**Part XII Qualifying Distributions** (see instructions)

1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26	1a	16415.
b Program-related investments - total from Part IX-B	1b	0.
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3 Amounts set aside for specific charitable projects that satisfy the:		
a Suitability test (prior IRS approval required)	3a	
b Cash distribution test (attach the required schedule)	3b	
4 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	16415.
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b	5	180.
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	16235.

**Note.** The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

Form 990-PF (2009)

THE JAMES B. BOSKEY MEMORIAL FOUNDATION  
INC.

Form 990-PF (2009)

22-3787050

Page 9

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

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI, line 7				14465.
2 Undistributed income, if any, as of the end of 2009.			14367.	
a Enter amount for 2008 only			0.	
b Total for prior years:				
3 Excess distributions carryover, if any, to 2009:				
a From 2004				
b From 2005				
c From 2006				
d From 2007				
e From 2008				
f Total of lines 3a through e		0.		
4 Qualifying distributions for 2009 from Part XII, line 4: ► \$ 16415.			14367.	
a Applied to 2008, but not more than line 2a			0.	
b Applied to undistributed income of prior years (Election required - see instructions)			0.	
c Treated as distributions out of corpus (Election required - see instructions)		0.		
d Applied to 2009 distributable amount				2048.
e Remaining amount distributed out of corpus		0.		
5 Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a).)		0.		0.
6 Enter the net total of each column as indicated below:		0.		
a Corpus Add lines 3f, 4c, and 4e Subtract line 5				
b Prior years' undistributed income. Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable amount - see instructions		0.		
e Undistributed income for 2008. Subtract line 4a from line 2a. Taxable amount - see instr.				0.
f Undistributed income for 2009. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2010				12417.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3)		0.		
8 Excess distributions carryover from 2004 not applied on line 5 or line 7		0.		
9 Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a		0.		
10 Analysis of line 9:				
a Excess from 2005				
b Excess from 2006				
c Excess from 2007				
d Excess from 2008				
e Excess from 2009				

Form 990-PF (2009)

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**THE JAMES B. BOSKEY MEMORIAL FOUNDATION  
INC.**

Form 990-PF (2009)

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**Part XIV | Private Operating Foundations** (see instructions and Part VII-A, question 9)

1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2009, enter the date of the ruling	► 04/01/02			
b Check box to indicate whether the foundation is a private operating foundation described in section	<input type="checkbox"/> 4942(j)(3) or <input type="checkbox"/> 4942(j)(5)			
2 a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed	Tax year			
	Prior 3 years			
	(a) 2009	(b) 2008	(c) 2007	(d) 2006
b 85% of line 2a				
c Qualifying distributions from Part XII, line 4 for each year listed				
d Amounts included in line 2c not used directly for active conduct of exempt activities				
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c				
3 Complete 3a, b, or c for the alternative test relied upon:				
a "Assets" alternative test - enter:				
(1) Value of all assets				
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)				
b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed				
c "Support" alternative test - enter:				
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)				
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(ii)				
(3) Largest amount of support from an exempt organization				
(4) Gross investment income				

**Part XV | Supplementary Information** (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see the instructions.)

**1 Information Regarding Foundation Managers:**

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

**See Statement 9**

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

**None**

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

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

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

**See Statement 10**

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

c Any submission deadlines:

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

THE JAMES B. BOSKEY MEMORIAL FOUNDATION  
INC.

Form 990-PF (2009)

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**Part XV Supplementary Information (continued)**

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a Paid during the year</b>				
ASSOCIATION FOR CONFLICT RESOLUTION	NONE		GENERAL PURPOSES	2000.
COMMUNITY COUNSELING CENTER	NONE		GENERAL PURPOSES	507.
CRU INSTITUTE	NONE		GENERAL PURPOSES	5000.
RESOLUTION SYSTEMS INSTITUTE	NONE		GENERAL PURPOSES	1000.
SETON HALL LAW	NONE		GENERAL PURPOSES	5200.
YIDDISH NATIONAL BOOK CENTER	NONE		GENERAL PURPOSES	700.
<b>Total</b>				► 3a 14407.
<b>b Approved for future payment</b>				
None				
<b>Total</b>				► 3b 0.

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Form 990-PF (2009)

THE JAMES B. BOSKEY MEMORIAL FOUNDATION  
INC.

Form 990-PF (2009)

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**Part XVI-A Analysis of Income-Producing Activities**

Enter gross amounts unless otherwise indicated.

1 Program service revenue:

a \_\_\_\_\_  
b \_\_\_\_\_  
c \_\_\_\_\_  
d \_\_\_\_\_  
e \_\_\_\_\_  
f \_\_\_\_\_

g Fees and contracts from government agencies .....

2 Membership dues and assessments .....

3 Interest on savings and temporary cash investments .....

4 Dividends and interest from securities .....

5 Net rental income or (loss) from real estate:

a Debt-financed property .....

b Not debt-financed property .....

6 Net rental income or (loss) from personal property .....

7 Other investment income .....

8 Gain or (loss) from sales of assets other than inventory .....

9 Net income or (loss) from special events .....

10 Gross profit or (loss) from sales of inventory .....

11 Other revenue:

a \_\_\_\_\_  
b \_\_\_\_\_  
c \_\_\_\_\_  
d \_\_\_\_\_  
e \_\_\_\_\_

12 Subtotal. Add columns (b), (d), and (e) .....

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

(See worksheet in line 13 instructions to verify calculations.)

	Unrelated business income		Excluded by section 512, 513, or 514	(e) Related or exempt function income
	(a) Business code	(b) Amount		
1 Program service revenue:				
a				
b				
c				
d				
e				
f				
g Fees and contracts from government agencies .....				
2 Membership dues and assessments .....				
3 Interest on savings and temporary cash investments .....				
4 Dividends and interest from securities .....				
5 Net rental income or (loss) from real estate:				
a Debt-financed property .....				
b Not debt-financed property .....				
6 Net rental income or (loss) from personal property .....				
7 Other investment income .....				
8 Gain or (loss) from sales of assets other than inventory .....				
9 Net income or (loss) from special events .....				
10 Gross profit or (loss) from sales of inventory .....				
11 Other revenue:				
a				
b				
c				
d				
e				
12 Subtotal. Add columns (b), (d), and (e) .....	0.	19183.	0.	
13 Total. Add line 12, columns (b), (d), and (e) .....			13	19183.

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

Line No.	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).
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**Schedule B**(Form 990, 990-EZ,  
or 990-PF)Department of the Treasury  
Internal Revenue Service**Schedule of Contributors**

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

OMB No. 1545-0047

**2009****Name of the organization****THE JAMES B. BOSKEY MEMORIAL FOUNDATION  
INC.****Employer identification number****22-3787050****Organization type (check one):****Filers of:** **Section:**Form 990 or 990-EZ  501(c)( ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organizationForm 990-PF  501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation**Check if your organization is covered by the General Rule or a Special Rule.****Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.**General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.**Special Rules** For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not 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. ► \$ \_\_\_\_\_**Caution.** An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions  
for Form 990, 990-EZ, or 990-PF.

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

Name of organization

THE JAMES B. BOSKEY MEMORIAL FOUNDATION  
INC.

Employer identification number

22-3787050

## Part I Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution	
1	<u>ADELE BOSKEY</u> <u>4 WINDING WAY</u> <u>NORTH CALDWELL, NJ 07006</u>	\$ _____	<input checked="" type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash	(Complete Part II if there is a noncash contribution.)
2	<u>ELIZABETH BOSKEY</u> <u>3 COPELAND DRIVE</u> <u>MONTEBELLO, NY 10901</u>	\$ _____	<input checked="" type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash	(Complete Part II if there is a noncash contribution.)
		\$ _____	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash	(Complete Part II if there is a noncash contribution.)
		\$ _____	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash	(Complete Part II if there is a noncash contribution.)
		\$ _____	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash	(Complete Part II if there is a noncash contribution.)
		\$ _____	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash	(Complete Part II if there is a noncash contribution.)

## THE JAMES B. BOSKEY MEMORIAL FOUNDATION

22-3787050

## Form 990-PF Interest on Savings and Temporary Cash Investments Statement 1

Source	Amount
RAYMOND JAMES	7911.
SUBURBAN PROPANE	48.
Total to Form 990-PF, Part I, line 3, Column A	7959.

## Form 990-PF Dividends and Interest from Securities Statement 2

Source	Gross Amount	Capital Gains Dividends	Column (A) Amount
RAYMOND JAMES	7101.	0.	7101.
Total to Fm 990-PF, Part I, ln 4	7101.	0.	7101.

## Form 990-PF Other Income Statement 3

Description	(a) Revenue Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income
SUBURBAN PROPANE L.P.	4410.	4410.	
Total to Form 990-PF, Part I, line 11	4410.	4410.	

## Form 990-PF Accounting Fees Statement 4

Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes
ACCOUNTING	3000.	1500.		1500.
To Form 990-PF, Pg 1, ln 16b	3000.	1500.		1500.

Form 990-PF	Other Expenses			Statement 5
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes
FEDERAL TAX	208.	0.		208.
PUBLICATIONS	120.	0.		120.
NEW JERSEY TAX	160.	0.		160.
BANK FEE	20.	0.		20.
To Form 990-PF, Pg 1, ln 23	508.	0.		508.

Form 990-PF	Corporate Stock		Statement 6
Description	Book Value	Fair Market Value	
1000 PUBLIC SERVICE ENT. GROUP	12054.	33250.	
23 ABBOTT LABS	1000.	1242.	
400 FLAHERTY & CRMNR	10004.	5808.	
800 VNB CAPITAL TRUST	21106.	19856.	
1000 SUBURBAN PROPANE	17838.	47080.	
1000 COHEN & STEERS UTIL	20004.	15950.	
1000 COMMONWEALTH FINANCIAL	13082.	4650.	
1000 CLIFTON SAVINGS	12243.	9370.	
800 CITIGROUP CAPITAL	19988.	14280.	
500 BANK OF AMERICA CAPITAL	12663.	9560.	
1000 NEW YORK COMMUNITY	17005.	14510.	
500 BANK OF AMERICA	23583.	7530.	
600 JP MORGAN CHASE	25132.	25002.	
1000 COUNTRYWIDE CAPITAL	25004.	21650.	
1000 BARCLAYS PLC	25004.	23830.	
500 COHEN & STEERS REIT	16512.	5175.	
1000 AIG SUB DEBS	25004.	13100.	
500 KEYCORP CAPITAL	12504.	11103.	
Total to Form 990-PF, Part II, line 10b	309730.	282946.	

Form 990-PF

List of Substantial Contributors  
Part VII-A, Line 10

Statement 7

## Name of Contributor

## Address

ADELE BOSKEY

4 WINDING WAY, NORTH CALDWELL, NJ 07006

ELIZABETH BOSKEY

3 COPELAND DR. MONTEBELLO, NY 10901

Form 990-PF

Part VIII - List of Officers, Directors  
Trustees and Foundation Managers

Statement 8

## Name and Address

Title and Avrg Hrs/Wk	Compen- sation	Employee Ben Plan Contrib	Expense Account
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ADELE L. BOSKEY  
4 WINDING WAY  
NORTH CALDWELL, NJ 07006

PRESIDENT/DIRECTOR

0.00

0.

0.

0.

ELIZABETH R. BOSKEY  
3 COPELAND DRIVE  
MONTEBELLO, NY 10901

DIRECTOR

0.00

0.

0.

0.

BARDIN LEVAVY  
80 MAIN STREET - 5TH FL.  
WEST ORANGE, NJ 07052

SECRETARY/DIRECTOR

0.00

0.

0.

0.

EILEEN DOMBROWSKY  
15 MCKINLEY  
WEST CALDWELL, NJ 07006

TREASURER/DIRECTOR

0.00

0.

0.

0.

J. GREGORY KINNETT  
3525 PRYTANIA STREET - SUITE 620  
NEW ORLEANS, LA 70115

DIRECTOR

0.00

0.

0.

0.

Totals included on 990-PF, Page 6, Part VIII

0.	0.	0.
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Form 990-PF

Part XV - Line 1a  
List of Foundation Managers

Statement 9

Name of Manager

ADELE L. BOSKEY  
ELIZABETH R. BOSKEY

Form 990-PF

Grant Application Submission Information  
Part XV, Lines 2a through 2d

Statement 10

## Name and Address of Person to Whom Applications Should be Submitted

ADELE BOSKEY - 4 WINDING WAY, NORTH CALDWELL, NJ 07006

## Telephone Number

## Form and Content of Applications

FORM OF APPLICATION IS BEING DEVELOPED BY THE FOUNDATION AND WILL BE  
AVAILABLE AT THE WEB-SITE IN THE NEAR FUTURE.

## Any Submission Deadlines

SEPTEMBER 15TH - ANNUALLY

## Restrictions and Limitations on Awards

AWARDS WILL BE IN THE U.S ONLY AND WILL SUPPORT RESEARCH AND EDUCATION IN  
THE FIELDS OF CHILDREN'S RIGHTS, PROTECTION OF FAMILY, ALTERNATIVE DISPUTE  
RESOLUTION, MEDICAL AND LEGAL ETHICS, REGULATION OF SCIENTIFIC MISCONDUCT,  
ORTHOPAEDIC, AND REPRODUCTIVE HEALTH RESEARCH.