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Form 990-PF

Department of the Treasury

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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

Internal Revenue Service , and ending For calendar year 2009, or tax year beginning Final return Initial return of a former public charity G Check all that apply Initial return Amended return Name change A Employer identification number Name of foundation Use the IRS THE PIPER HILL FOUNDATION, INC. label. 26-0529679 C/O GRACE BERTONE, MCELROY, DEUTSCH, Otherwise, print Number and street (or P O box number if mail is not delivered to street address) Boom/suste B Telephone number (973) 425-8720 or type. 1300 MT. KEMBLE AVENUE See Specific City or town, state, and ZIP code C If exemption application is pending, check here Instructions D 1. Foreign organizations, check here MORRISTOWN, NJ 07962 Foreign organizations meeting the 85% test, check here and attach computation X Section 501(c)(3) exempt private foundation H Check type of organization Section 4947(a)(1) nonexempt charitable trust _____ Other taxable private foundation If private foundation status was terminated X Cash I Fair market value of all assets at end of year | J | Accounting method Accrual under section 507(b)(1)(A), check here Other (specify) (from Part II, col. (c), line 16) If the foundation is in a 60-month termination 229,866. (Part I, column (d) must be on cash basis, under section 507(b)(1)(B), check here ▶\$ Part | Analysis of Revenue and Expenses (d) Disbursements for chantable purposes (b) Net investment (c) Adjusted net (a) Revenue and (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) expenses per books income income (cash basis only) Contributions, gifts, grants, etc., received Check X if the foundation is not required to attach Sch. B 1,399 1,399.STATEMENT Interest on savings and temporary cash investments 1,399 4,225.STATEMENT 4,225 4,225 Dividends and interest from securities 5a Gross rents Net rental income or (loss) 0 6a Net gain or (loss) from sale of assets not on line 10 Revenue Gross sales price for all assets on line 6a 10,000. 0. 7 Capital gain net income (from Part IV, line 2) 0 Net short-term capital gain Income modifications
Gross sales less refunds
and allowances Less Cost of goods sold c Gross president or (losse C 06 000 493.STATEMENT 493. 493 Other income 6,117. 6,117. 6,117. Total. Add imes 1 through 1. Compensation of officers, directors 0. 0 Ο. Other employee salaries and wages SCANNED DEC Pension plans, employee benefits Administrative Expenses 16a Legal fees 0. 0. STMT 4 1,400. 0. b Accounting fees 565. 0. 0. STMT 5 c Other professional fees 17 Interest 18 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings Operating and Printing and publications 23 Other expenses 24 Total operating and administrative 0. 0 0. 1,965 expenses. Add lines 13 through 23 15,000. 15,000. 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. <u> 15,000</u>. 16,965 0 0 Add lines 24 and 25 27 Subtract line 26 from line 12 <10,848. 2 Excess of revenue over expenses and disbursements 6,117 b Net investment income (if negative, enter -0-) 6,117. c Adjusted net income (if negative, enter -0-) LHA For Privacy Act and Paperwork Reduction Act Notice, see the instructions

Form **990-PF** (2009)

THE PIPER HILL FOUNDATION, INC.

MCELROY,

DEUTSCH,

MUL

'C/O GRACE BERTONE,

Form 990-PF (2009)

Balance Sheets Attached schedules and amounts in the description End of year Beginning of year (b) Book Value (c) Fair Market Value (a) Book Value Cash - non-interest-bearing 2 Savings and temporary cash investments 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 229,866. 229,866. 240,714. STMT 6 **b** investments - corporate stock c Investments - corporate bonds 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 229,866. 229,866. 240,714. 16 Total assets (to be completed by all filers) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable 22 Other liabilities (describe 0. 23 Total liabilities (add lines 17 through 22) ▼ X Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. Balances 240,714. 229,866. 24 Unrestricted 25 Temporarily restricted 26 Permanently restricted Fund 1 Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. 27 Capital stock, trust principal, or current funds 28 Paid-in or capital surplus, or land, bldg, and equipment fund Retained earnings, accumulated income, endowment, or other funds 229,866. 240,714. Net 30 Total net assets or fund balances 229,866 240,714. 31 Total liabilities and net assets/fund balances Part III Analysis of Changes in Net Assets or Fund Balances Total net assets or fund balances at beginning of year - Part II, column (a), line 30 240,714. (must agree with end-of-year figure reported on prior year's return) <10,848. 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) 229,866. 4 Add lines 1, 2, and 3 Decreases not included in line 2 (itemize) ▶ 229,866. 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 Form 990-PF (2009)

26-0529679

Page 2

(a) List and descri	tend Losses for Tax on be the kind(s) of property sold (ehouse, or common stock, 200	(e g , real estate,	income	` P	low acqu - Purcha - Donati	se '	Date ac		(d) Date sold (mo , day, yr)
	AL FINANCIAL (Ť	P		2/11	708	12/18/09
b									
<u>c</u>				<u> </u>					
<u>d</u> e				 					
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale					n or (loss (f) minus (
a 10,000.			10,00	0.					
b						_			
<u>C</u>				_		- · ·			
d e			· · · · · · · · · · · · · · · · · · ·						
Complete only for assets showing	gain in column (h) and owned	by the foundation	on 12/31/69					l (h) gain	
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col (1) col (j), if any					ot less that from col (
a	<u> —</u>								
<u>b</u>				-					
d d									
e									
2 Capital gain net income or (net cap	If gain, also e	nter in Part I, line r -0- in Part I, line	7	}	2			_	
3 Net short-term capital gain or (loss	`		•						
If gain, also enter in Part I, line 8, of (loss), enter -0- in Part I, line 8	column (c)			}	3				
Part V Qualification U	nder Section 4940(e)	for Reduced	I Tax on Net	Inv	estme	ent Inco	me		
(For optional use by domestic private	foundations subject to the secti	on 4940(a) tax on	i net investment in	come	∌)				
If section 4940(d)(2) applies, leave th	is part blank								
Was the foundation liable for the secti	on 4942 tax on the distributable	amount of any ve	ear in the base pei	rıod?					Yes X
If "Yes," the foundation does not qualr		• •	•						
1 Enter the appropriate amount in e	ach column for each year, see ir	nstructions before	making any entri			_	T		(d)
Base period years Calendar year (or tax year beginnin	(b) Adjusted qualifying	distributions	Net value of no	(c) ncha	ritable-us	se assets	,	Distrit	(d) oution ratio rided by col (c))
2008	9 , , , , , ,	24,296.				,804.	<u>\</u>	(5) (5)	.1075
2007		0.			244	,820.			.0000
2006							ļ		
2005				_					
2004							 		
2 Total of line 1, column (d)							2		.1075
3 Average distribution ratio for the 5	-year base period - divide the to	ital on line 2 by 5,	or by the number	of ye	ars				
the foundation has been in existen	ce if less than 5 years						3		.0537
4 Enter the net value of noncharitable	e-use assets for 2009 from Part	X, line 5					4		240,71
5 Multiply line 4 by line 3							5		12,950
6 Enter 1% of net investment incom	e (1% of Part I, line 27b)						6		6
7 Add lines 5 and 6							7		13,01
8 Enter qualifying distributions from					a, a		_8		15,000
If line 8 is equal to or greater than See the Part VI instructions	IIII e 7, check the box in Part VI,	une 10, and comp	nete that part usin	y a 1	% (ax rat				

	THE PIPER HILL FOUNDATION, INC.				
Form		5-0529			age 4
Pa	rt VII Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 494	<u>8 - see</u>	instru	ctior	<u>1S)</u>
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1				
	Date of ruling or determination letter (attach copy of letter if necessary-see instructions)				
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🗶 and enter 1%	1		· · · · · · · · ·	61.
	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-)	2			0.
3	Add lines 1 and 2	3		- 1	61.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4			0.
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	5			61.
6	Credits/Payments				
а	2009 estimated tax payments and 2008 overpayment credited to 2009 6a 21.				
b	Exempt foreign organizations - tax withheld at source 6b 225.				
C	Tax paid with application for extension of time to file (Form 8868)				
d	Backup withholding erroneously withheld 6d 5d				
7	Total credits and payments Add lines 6a through 6d	7		2	<u>46.</u>
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8			
		9			
10		10		1	85.
11	Enter the amount of line 10 to be Credited to 2010 estimated tax ▶ 185 • Refunded ▶ 1	11			0.
Pa	rt 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			Yes	
	any political campaign?		1a		_X_
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?		1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published of	or			
	distributed by the foundation in connection with the activities.				
C	Did the foundation file Form 1120-POL for this year?		10		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year				
	(1) On the foundation ► \$ O . (2) On foundation managers ► \$ O .				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation				
	managers ▶ \$ 0 •				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		X
	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
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a_		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	N/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5		X
	If "Yes," attach the statement required by General Instruction T.				
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either				
	By language in the governing instrument, or				
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state larger than the st	w			
	remain in the governing instrument?		6		_X_
7	Did the foundation have at least \$5,000 in assets at any time during the year?		7	X	<u> </u>
	If "Yes," complete Part II, col. (c), and Part XV.				
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)				
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)				
	of each state as required by General Instruction G? If "No," attach explanation		8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendary	ar			
	year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," complete Part XIV		9	Х	
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		10		<u> </u>

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	art 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		<u> X</u>
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► N/A			
14	The books are in care of ► TAXPAYER Telephone no ► (973)	425	-87	20
	Located at ►AS LISTED, MORRISTOWN, NJ ZIP+4 ►07	962		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here			$\cdot \square$
	and enter the amount of tax-exempt interest received or accrued during the year	N	<u>/A</u>	
Pŧ	art 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
18	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person? Yes X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	if the foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days)			
ŧ	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	1b		
	Organizations relying on a current notice regarding disaster assistance check here			
	: Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			
	before the first day of the tax year beginning in 2009?	10		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))			
â	At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
	before 2009? Yes X No			
	If "Yes," list the years \blacktriangleright			
t	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	2b		
(: If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	>			
38	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?			
t	o 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		L
48	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
t	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		<u> </u>
	Fo	m 990	-PF	(2009)

THE PIPER HILL FOUNDATION				
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Part VII-B Statements Regarding Activities for Which	Form 4720 May Be F	Required (continu	ued)	
5a During the year did the foundation pay or incur any amount to				
(1) Carry on propaganda, or otherwise attempt to influence legislation (sectio			s X No	
(2) Influence the outcome of any specific public election (see section 4955), or	or to carry on, directly or indire	ectly,		
any voter registration drive?			s X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes	37	Ye	s X No	
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section		[
509(a)(1), (2), or (3), or section 4940(d)(2)?		Ye	s X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary	, or educational purposes, or t	or		
the prevention of cruelty to children or animals?		Ye	s X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un	der the exceptions described i	n Regulations	İ	
section 53 4945 or in a current notice regarding disaster assistance (see instri		•	N/A s	ib
Organizations relying on a current notice regarding disaster assistance check l				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption is		ned	_	
expenditure responsibility for the grant?		/A 🗀 Ye	s 🗆 No	
If "Yes," attach the statement required by Regulations section 53.494				
6a Did the foundation, during the year, receive any funds, directly or indirectly, to			ļ	
	pay premiums on	□ v _o	s X No	
a personal benefit contract?	namanal hanafit aantraat?			Sb X
b Did the foundation, during the year, pay premiums, directly or indirectly, on a	personal benefit contract?			70 71
If "Yes" to 6b, file Form 8870.			s X No	
7a At any time during the tax year, was the foundation a party to a prohibited tax				
b If yes, did the foundation receive any proceeds or have any net income attributed in the foundation receive any proceeds or have any net income attributed in the foundation receive any proceeds or have any net income attributed in the foundation receive any proceeds or have any net income attributed in the foundation receive any proceeds or have any net income attributed in the foundation receive any proceeds or have any net income attributed in the foundation receive any proceeds or have any net income attributed in the foundation receive any proceeds or have any net income attributed in the foundation receive any proceeds or have any net income attributed in the foundation received i				7b
Part VIII Information About Officers, Directors, Trust	lees, Foundation Ma	nagers, Higniy	/	
1 List all officers, directors, trustees, foundation managers and their	compensation.			
	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	and deferred compensation	account, other allowances
JOHN T. MCHUGH	PRESIDENT	0,10,0	Comparation	
21 KINGSBROOK COURT				
MENDHAM, NJ 07945	0.00	0.	0.	0.
AMY L. MCHUGH	TREASURER		-	
21 KINGSBROOK COURT	TREADORER			
MENDHAM, NJ 07945	0.00	0.	0.	0.
JAMES S. MARPE	DIRECTOR			
	DIRECTOR			
		0.	0.	0.
MORRISTOWN, NJ 07962	0.00	-	0.	<u></u>
	_			
O O O O O O O O O O O O O O O O O O O	aboded on the d\ Manage	anton UNONE II		
2 Compensation of five highest-paid employees (other than those in	(b) Title, and average	enter "NONE."	(d) Contributions to	(a) Evpense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
	devoted to position	<u> </u>	compensation	allowances
NONE	_			
	4			
		 		
	4			
	_			
	<u> </u>	<u></u>	<u> </u>	
Total number of other employees hald over \$50,000			▶	0

THE PIPER HILL FOUNDATION, INC.

C/O GRACE BERTONE, MCELROY, DEUTSCH, MUL 26-0529679

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Part VIII Information About Officers, Directors, Trustees, Foundar Paid Employees, and Contractors (continued)	tion Managers, Highly	
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
NONE		
		
		
	_	
Total number of others receiving over \$50,000 for professional services		<u>▶</u> 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statist number of organizations and other beneficiaries served, conferences convened, research papers produced.	ical information such as the	Expenses
1 N/A	beed, etc	
1,71		
2		
3		
A		
· · · · · · · · · · · · · · · · · · ·		
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	Amount
1 N/A		
2		· · · · · · · · · · · · · · · · · · ·
2		
All other program-related investments. See instructions		
3	· · · · · · · · · · · · · · · · · · ·	
Total. Add lines 1 through 3	>	0 . Form 990-PF (2009)

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Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) 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 1h b Average of monthly cash balances 240, c Fair market value of all other assets 1c 240,715 1d d Total (add lines 1a, b, and c) e Reduction claimed for blockage or other factors reported on lines 1a and 0. 1c (attach detailed explanation) 1e Acquisition indebtedness applicable to line 1 assets 2 3 Subtract line 2 from line 1d 4 Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions) 240,715. 5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4. 6 Minimum investment return. Enter 5% of line 5 Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain Minimum investment return from Part X, line 6 1 Tax on investment income for 2009 from Part VI, line 5 2a Income tax for 2009 (This does not include the tax from Part VI) 2c c Add lines 2a and 2b 3 Distributable amount before adjustments Subtract line 2c from line 1 Recoveries of amounts treated as qualifying distributions 4 5 Add lines 3 and 4 Deduction from distributable amount (see instructions) 6 Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1 7 Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes 1 15,000. a Expenses, contributions, gifts, etc - total from Part I, column (d), line 26 1a 1b b Program-related investments - total from Part IX-B Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes 2 Amounts set aside for specific charitable projects that satisfy the a Suitability test (prior IRS approval required) 3а b Cash distribution test (attach the required schedule) 3b 15,000. Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b 14,939. 6 Adjusted qualifying distributions. Subtract line 5 from line 4 Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section

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4940(e) reduction of tax in those years

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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				0.
2 Undistributed income, if any, as of the end of 2009	· · · · · · · · · · · · · · · · · · ·	r niu-n. Innew≏amu-ri		
a Enter amount for 2008 only			0.	
b Total for prior years	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·		m - m + + + + + + + + + + + + + + + + +
,		0.		
3 Excess distributions carryover, if any, to 2009	, , , , , , , , , , , , , , , , , , ,		· r. b	
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 ►\$ N/A				
a Applied to 2008, but not more than line 2a			0.	
b Applied to undistributed income of prior			пиоматанция	
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus	·		-1 -'1 -1:- '	
(Election required - see instructions)	0.			
d Applied to 2009 distributable amount				0.
e Remaining amount distributed out of corpus	0.	······		
5 Excess distributions carryover applied to 2009	0.	/************************************		0.
(if an amount appears in column (d), the same amount must be shown in column (a))	~ •			<u>.</u>
6 Enter the net total of each column as indicated below:				
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
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		0.		
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				0.
7 Amounts treated as distributions out of		· · · · · · · · · · · · · · · · · · ·	. ''.:! ':! mtnln	
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.			
-				~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
O Analysis of line 9				
a Excess from 2005				
b Excess from 2006				
c Excess from 2007	***************************************			
d Excess from 2008				
e Excess from 2009				

Page 10

P	art XIV Private Operating F	oundations (see in:	structions and Part VII-	A, question 9)		
1 :	a If the foundation has received a ruling o	r determination letter that	it is a private operating			
	foundation, and the ruling is effective for	r 2009, enter the date of t	he ruling	▶		
ı	b Check box to indicate whether the found	lation is a private operatir	ng foundation described in	section X	1942(J)(3) or 494	42(j)(5)
2 ;	a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
	income from Part I or the minimum	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total
	investment return from Part X for	İ				
	each year listed	6,117.	2,274. 1,933.	0.	0.	8,391. 7,132.
- 1	b 85% of line 2a	5,199.	1,933.	0.	0.	7,132.
-	c Qualifying distributions from Part XII,				_	22 522
	line 4 for each year listed	15,000.	24,500.	0.	0.	39,500.
1	d Amounts included in line 2c not					
	used directly for active conduct of					0
	exempt activities	0.	0.	0.	0.	
	e Qualifying distributions made directly					
	for active conduct of exempt activities	15 000	24 500			20 500
	Subtract line 2d from line 2c	15,000.	24,500.	0.	0.	39,500.
3	Complete 3a, b, or c for the alternative test relied upon					
	a "Assets" alternative test - enter			044 000		244 020
	(1) Value of all assets			244,820.		244,820.
	(2) Value of assets qualifying			244 020		244 920
	under section 4942(j)(3)(B)(i)			244,820.		244,820.
	b "Endowment" afternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year					0.
	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					0.
	and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(III)					0.
	(3) Largest amount of support from					
	an exempt organization		<u> </u>			0.
_	(4) Gross investment income	<u> </u>	<u></u>			0.
P	art XV Supplementary Info at any time during t			if the foundation	had \$5,000 or mo	ore in assets
1	Information Regarding Foundation	on Managers:				
	a List any managers of the foundation wh year (but only if they have contributed r			ributions received by the f	oundation before the clos	se of any tax
	EE STATEMENT 7				· · · · · · · · · · · · · · · · · · ·	
	b List any managers of the foundation wh other entity) of which the foundation ha			or an equally large portion	n of the ownership of a pa	artnership or
NO	ONE	-	<u> </u>			
2	Information Regarding Contribut Check here $\nearrow X$ if the foundation of the foundation makes gifts, grants, etc	only makes contributions	to preselected charitable	organizations and does no		
		.`			inplete items 2a, b, c, and	
	a The name, address, and telephone num	iber of the person to who	m applications should be	addressed		
	b The form in which applications should t	be submitted and informa	tion and materials they sh	nould include		
	c Any submission deadlines					
	d Any restrictions or limitations on award	s such as hy nangraphic	al areas, charitable fields	kinds of institutions, or of	ther factors	
	w mily restrictions of minitations on award	o, odon ao oy goograpino	ai aivas, enaritable nelus,	av or montations, or o		

C/O GRACE BERTONE, MCELROY, DEUTSCH, MUL

26-0529679 Page 11

Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual. Recipient Purpose of grant or contribution Foundation show any relationship to Amount status of any foundation manager Name and address (home or business) or substantial contributor recipient a Paid during the year 1,500. ALZHEIMER'S ASSOCIATION GENERAL OPERATIONS OF GREATER NJ 400 MORRIS AVENUE, SUITE DENVILLE, NJ 07834 1,500. BIG BROTHERS/BIG SISTERS GENERAL OF BERGEN/PASSAIC/MORRIS OPERATIONS COUNTIES - 1259 ROUTE 46 EAST, BLDG, 3 1,500. THE VALERIE FUND GENERAL OPERATIONS 100 MADISON AVENUE, BOX MORRISTOWN, NJ 07960 MORRIS HABITAT FOR GENERAL 1,500. OPERATIONS HUMANITY 102 IRON MOUNTAIN ROAD, SUITE H MINE HILL, NJ 7,500. TRI-COUNTY SCHOLARSHIP GENERAL OPERATIONS **FUND** 4 CENTURY DRIVE PARSIPPANY, NJ 07054 1,500. STAMFORD SYMPHONY GENERAL DEVELOPMENT DEPARTMENT OPERATIONS 263 TRESSER BOULEVARD STAMFORD, CT 06901 15,000. ➤ 3a Total b Approved for future payment NONE 0.

Total 923611 02-02-10

Form 990-PF (2009)

Form **990-PF** (2009)

▶ 3b

· C/O GRACE BERTONE, MCELROY, DEUTSCH, MUL 26-0529679

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

Enter gross amounts unless otherwise indicated	Unrelated	business income		ded by section 512, 513, or 514	(e)
	(a) Business	(b) Amount	(C) Exclu- sion	(d)	Related or exempt function income
1 Program service revenue	code	Amount	code	Amount	Tunction income
a	_		_		
b	_		ļ		··· ·
C	_		1		
d	_				
e					
f	_				
g Fees and contracts from government agencies					···
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments					1,399 4,225
4 Dividends and interest from securities					4,225
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					493
8 Gain or (loss) from sales of assets other than inventory					
9 Net income or (loss) from special events					
IO Gross profit or (loss) from sales of inventory					
11 Other revenue					
a					
b					
C					
d	l l				
е					
12 Subtotal Add columns (b), (d), and (e)		0	•	0.	
13 Total. Add line 12, columns (b), (d), and (e)				13	6,117
(See worksheet in line 13 instructions to verify calculations)				

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

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)
THE INTEREST INCOME COVERED A PORTION OF THE FOUNDATION'S OPERATIONAL
EXPENSES IN 2008.
THE DIVIDEND INCOME COVERED THE REMAINDER OF THE FOUNDATION'S
OPERATIONAL EXPENSES IN 2008.
THE CAPITAL GAIN INCOME WAS A MAJOR COMPONENT OF THE CHARITABLE
DISTRIBUTIONS MADE BY THE FOUNDATION IN 2008.

Form **990-PF** (2009)

C/O GRACE BERTONE, MCELROY, DEUTSCH, MUL

Pi	art XVII Information Re Exempt Organ		To and Transactions a	nd Relationships With Non	charitable				
1	Did the organization directly or indi		owing with any other organization	n described in section 501(c) of	Yes	No			
•	the Code (other than section 501(c		• •						
а	Transfers from the reporting found	· · · · ·	· ·						
_	(1) Cash				1a(1)	X			
	(2) Other assets				1a(2)	X			
b	Other transactions								
	(1) Sales of assets to a noncharita	able exempt organization			1b(1)	<u> </u>			
	(2) Purchases of assets from a no	oncharitable exempt organization	on		1b(2)	X			
	(3) Rental of facilities, equipment,	or other assets			1b(3)	X			
	(4) Reimbursement arrangements	;			1b(4)	X			
	(5) Loans or loan guarantees				1b(5)	X			
	(6) Performance of services or me	embership or fundraising solic	itations		1b(6)	X			
C	Sharing of facilities, equipment, ma	ailing lists, other assets, or paid	d employees		1c	<u> </u>			
d	•			vays show the fair market value of the go					
	• • • •			e in any transaction or sharing arrangem	ent, show in				
, ,	column (d) the value of the goods,								
(a)	Line no (b) Amount involved	1	table exempt organization	(0) Description of transfers, transactions	s, and sharing arranger	rents			
		N/	A						
									
									
		-	 	-					
		 							
		 	*						
-	· ·	 							
						-			
									
			· · · · · · · · · · · · · · · · · · ·						
2a	Is the foundation directly or indirec	ctly affiliated with, or related to	, one or more tax-exempt organiz	zations described					
	in section 501(c) of the Code (othe	er than section 501(c)(3)) or in	section 527?		Yes 🖸	X No			
b	If "Yes," complete the following sch	redule		<u> </u>					
	(a) Name of org	ganization	(b) Type of organization	(c) Description of rela	itionship				
	N/A	 <u></u>		<u> </u>					
	 								
_									
ļ	Under penalties of perjury, I declare that I I and complete Declaration of preparer (oth			ents, and to the best of my knowledge and belie has any knowledge	if, it is true, correct,				
ĺ	I. I Im	l = l + l + l + l + l + l + l + l + l +							
ا ۾	Something of a trust and a state of a state	100	<u> </u>	SECRETARY					
Sign Here	Signature of officer or trustee		Dafe /	Title ate Check if F	reparer's identifying nu	ımber			
5	Preparer's	16 Questo	7 1/2/	self-	126-17.	-162			
:ნ	signature S	ONV C MOTHOUSE		1/01/10 employed ► X .	110012	iai			
	Preparer's signature Firm's name (or yours it self-employed).	RTY & MÉINTYRE IANOVER ROAD,		EIN ► 22 - 3	40300>				
	address, and ZIP code FT, OR	RHAM PARK, NJ		Phone no 97	3-822-099	99			

					
FORM 990-PF INTEREST ON SAVI	NGS AND TE	MPORARY CASH	INVESTMENTS	STATEMENT	1
SOURCE				AMOUNT	
MERRILL LYNCH			•	1,39	9.
TOTAL TO FORM 990-PF, PART I,	LINE 3, C	OLUMN A		1,39	9.
FORM 990-PF DIVIDEND	S AND INTE	REST FROM SEC	URITIES	STATEMENT	2
SOURCE	GROS		PITAL GAINS DIVIDENDS	COLUMN (A) AMOUNT	
ACCENTURE DIVIDEND MERRILL LYNCH		1,500. 2,725.	0.	1,50 2,72	
TOTAL TO FM 990-PF, PART I, L	N 4	4,225.	0.	4,22	5.
FORM 990-PF	OTHER	INCOME		STATEMENT	3
DESCRIPTION		(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME		
OTHER INCOME - MERRILL LYNCH	_	493.	493	. 49	3.
TOTAL TO FORM 990-PF, PART I,	LINE 11 =	493.	493	. 49	3.
FORM 990-PF	ACCOUNT	ING FEES		STATEMENT	4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME			
ACCOUNTING FEES	1,400	. 0		0.	0.
TO FORM 990-PF, PG 1, LN 16B	1,400	. 0		0.	0.

FORM 990-PF C	THER PROFES	STATEMENT 5					
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(C) ADJUSTED NET INCOME		(D) CHARITABLE PURPOSES	
INVESTMENT MANAGEMENT FEES	565.		0.		0.	0.	
TO FORM 990-PF, PG 1, LN 16C	565.		0.		0.		0.
DESCRIPTION			вос	OK VALUE		R MARKE VALUE	Т
DESCRIPTION 3,000 ACCENTURE SCA CLASS I U	ND ECED TOWER	COMMON	BO0	OK VALUE			T
SHARES MERRILL LYNCH ACCOUNT		104,910. 124,956.		104,910. 124,956.			
TOTAL TO FORM 990-PF, PART I	229,866.			229,866.			
							
FORM 990-PF LIST	PART XV - L OF FOUNDATI		RS		STA	FEMENT	7

NAME OF MANAGER

JOHN T. MCHUGH AMY L. MCHUGH

Form **8868**. (Rev. April 2009)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No. 1545-1709

■ If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box ■ If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (propage 2 of this form). Do not complete Part II unless you have afleady been granted an automatic 3-month extension on a previously filed Form 8868. Part I	internal Heve	enue Service			riie a sepa	arate application is	each return.				
Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8888. Part	-	-						n page 2 of this	form).		▶ X
A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file incorne tax returns. Electronic Filing (e-file), Generally, you can electronically file Form 8686 it you want a 3-month automatic extension of time to file one of the returns noted below for months for a corporation required to file Form 9807), However, you cannot file Form 8686 electronically file (1) you want to a 3-month automatic extension of time to file one of the returns noted below for months for a corporation required to file Form 9807, However, you cannot file Form 8686 electronically file (1) you want to a 3-month automatic extension of time to file one of the returns noted below for months for a corporation of time to file one of the returns noted for the file of the file of Chartzee & Monzoffits.										m 8868.	
All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (in months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL. 6099, or 8870, group returns, or a composate or consolidated Form 990-Ti. Instead, you must submit the fully completed and signed page (2 Part II) of Form 8868. For more details on the electronic filing of this form, visit www.rs. gov/efile and click on e-file for Charities & Nonprotits. Type or Imperoval for the fole of Charities & Nonprotits. Type or Imperoval forms of Exempt Corporation (1) for MCI. CO. GRACE BERTONE, MCELROY, DEUTSCH, MUL. 26-0529679 Number, street, and room or sure no. If a P.O. box, see instructions. NORRISTOWN, NJ 07962 Check type of return to be filed (file a separate application for each return): Form 990-BL Form 990-Ti (corporation) Form 990-ED Form 990-Ti (corporation) Form 990-Form 990-Form 990-Form 990-Ti (corporation) Form 990-Form 990-Form 990-Form 990-Ti (corporation) Form 990-Form 990-Form 990-Form 8870 **Taxpayare** **The books are in the care of **P AS LISTED - MORRISTOWN, NJ 07962 Telephone No **P (973) 425-8720 Form 990-Form 990-Form 8870 **If this is for a foreign address in the United States, check this box If this is for a foreign element the organization's four digit Group Exemption Number (EP) If this a for a foreign element the organization's four digit Group Exemption Number (EP) If it is a foreign element to the form 990-BL governor in equired to file Form 990-Ti extension of time until AUGUS	Part I	Automati	c 3-Mon	th Extension	of Time.	Only submit origi	nal (no copies i	needed).			
to file income tax returns. Electronic Filing 6-file). Generally, you can electronically file Form 9808 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Form 990-T (soe9) or 8870, group returns, or a composate or consolidated Form 990-T instead, you must submit the fully completed and signed page 2 (Part II) of Form 8888. For more details on the electronic filing of this form, visit waw.is.gov/elle and click on e-file for Charitree & Rongrofits. Type or The PIPPER HILL FOUNDATION, INC. C/O GRACE BERTONE, MCELROY, DEUTSCH, MUL **COO on or post office, state, and ZIP code. For a foreign address, see instructions. **MORRISTOWN, NJ 07962** **Check type of return to be filed (file a separate application for each return): Form 990 Form 990 Form 990-T (corporation) Form 990-Form 990-T (corporation) Form 990-Form 990-Form 990-T (corporation) Form 990-Form 990-Form 990-T (corporation) Form 990-Form 990-Form 990-Torder 990-T (see. 401(a) or 408(a) trust) Form 990-Form 990-Form 990-Form 990-Torder 990-Torde	•	•	e Form 990)-T and requestin	g an autom	natic 6-month exter	ision - check th	is box and com	plete		▶ □
noted below (6 months for a corporation required to file Form 990-1, however, you cannot file Form 8868 electronically if (1) you want the additional (not automatic)			ding 1120-	C filers), partners	hips, REMi	Cs, and trusts mus	t use Form 700	04 to request an	exten	sion of time	
Type or print THE PIPER HILL FOUNDATION, INC. C/O GRACE BERTONE, MCELROY, DEUTSCH, MUL 26-0529679 Number, street, and room or suite no. If a P.O. box, see instructions. 1300 MT. KEMBLE AVENUE City, town or post office, state, and ZIP code. For a foreign address, see instructions. MORRISTOWN, NJ 07962 Check type of return to be filed (file a separate application for each return): Form 990-BL Form 990-T (corporation) Form 4720 Form 990-BL Form 990-T (rest other than above) Form 6870 TAXPAYER The books are in the care of ▶ AS LISTED - MORRISTOWN, NJ 07962 Telephone No ▶ (973) 425-8720 FAX No. ▶ If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box If the organization's return for:	noted bel (not autor you must	ow (6 months for a matic) 3-month ext submit the fully co	a corporation ension or (ompleted a	on required to file 2) you file Forms ind signed page 2	Form 990- 990-BL, 60 2 (Part II) of	T). However, you o 69, or 8870, group	annot file Form returns, or a c	n 8868 electroni composite or coi	cally if nsolida	(1) you want to ated Form 990	the additional I-T. Instead,
C/O GRACE BERTONE, MCELROY, DEUTSCH, MUL 26-0529679 Number, street, and room or suite no. If a P.O. box, see instructions. 1300 MT. KEMBLE AVENUE City, town or post office, state, and ZIP code. For a foreign address, see instructions. MORRISTOWN, NJ 07962 Check type of return to be filed (file a separate application for each return): Form 990-BL		Name of Exemp	ot Organiza	tion				<u> </u>	Empl	oyer identific	ation number
Number, street, and room or suite no. If a P.O. box, see instructions. 1300 MT	print				•		MIIT.)	6_05296	79
City, town or post office, state, and ZIP code. For a foreign address, see instructions. MORRISTOWN, NJ 07962 Check type of return to be filed (file a separate application for each return): Form 990	due date for	Number, street	, and room	or suite no. If a P	O. box, se		поп			0 03230	
Form 990 Form 990-T (corporation) Form 4720 Form 990-BL Form 990-T (sec. 401(a) or 408(a) trust) Form 5227 Form 990-EZ Form 990-T (trust other than above) Form 6069 X Form 990-PF Form 1041-A Form 8870 TAXPAYER The books are in the care of AS LISTED - MORRISTOWN, NJ 07962 Telephone No (973) 425-8720 FAX No. If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time until AUGUST 15, 2010 , to file the exempt organization return for the organization named above. The extension is for the organization's return for: X calendar year 2009 or Tax year beginning , and ending , and ending , and ending . If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System).	return See	City, town or po	ost office, s	tate, and ZIP coo		reign address, see	instructions.				
Form 990-BL	Check ty	pe of return to be	filed (file a	separate applica	ation for ea	ch return):					
Form 990-BL	For	m 990	·	Form 990-T (corporation	n)		Form 47	20		
Form 990-EZ Form 990-PF Form 1041-A TAXPAYER The books are in the care of AS LISTED - MORRISTOWN, NJ 07962 Telephone No (973) 425-8720 FAX No. If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for part of the group, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for part of the group, check this box If this is for part of the group, check this box If the organization of time until AUGUST 15, 2010 Is for the organization's return for: X calendar year 2009 Tax year beginning If this tax year is for less than 12 months, check reason: Initial return Final return Change in accounting period If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System).			Ĭ								
TAXPAYER The books are in the care of ► AS LISTED - MORRISTOWN, NJ 07962 Telephone No ► (973) 425-8720 FAX No. ► If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box If it is for part of the group, check this box ► and attach a list with the names and ElNs of all members the extension will cover. I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time until AUGUST 15, 2010 , to file the exempt organization return for the organization named above. The extension is for the organization's return for: X Calendar year 2009 or	=		Ī	—				Form 60	069		
The books are in the care of ► AS LISTED - MORRISTOWN, NJ 07962 Telephone No ► (973) 425-8720 FAX No. ► If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box If this is for part of the group, check this box ► and attach a list with the names and EINs of all members the extension will cover. I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time until AUGUST 15, 2010 , to file the exempt organization return for the organization named above. The extension is for the organization's return for: X calendar year 2009 or The interver organization is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System).	X For	m 990-PF		Form 1041-A				Form 88	370		
Telephone No ► (973) 425-8720 FAX No. ► If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box If it is for part of the group, check this box ► and attach a list with the names and EINs of all members the extension will cover. I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time until AUGUST 15, 2010, to file the exempt organization return for the organization named above. The extension is for the organization's return for: X calendar year 2009 or Lax year beginning, and ending If this tax year is for less than 12 months, check reason: Initial return Final return Change in accounting period If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions							0.70.6				
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Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.	Caution	If you are coince	n make on	electronic fund w	thdrawel 14	with this Form 8869	see Form 845	3-FO and Form	8879.	FO for navme	nt instructions

LHA For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

Form 8868 (Rev 4-2009)