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Form 990-PF

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

OMB No 1545-0052

Department of the Treasury

2009

intern	iai R	evenue	Service	Note: /he to	oundation i	nay be able to use a copy of the		ting requirements				
For	cal	endai	year 2009, or tax y	ear beginni	ing	, 2009	, and ending	,				
G	Che	ck al	I that apply	nitial return	Init	ial Return of a former p	ublic charity		inal return			
_	0110	on a	· · · · · —				· -		mar rotani			
			<i>P</i>	Amended ref	urn	Address						
Us	se th	ne					A	Employer identification	number			
IRS label. BRIAN & JOELLE KELLY FAMI					/ FAM	ILY FOUNDATION		26-6139249				
Otherwise, 225 HIGHWAY #35 102C					2		la la	B Telephone number (see the instructions)				
Print RED BANK N.T. 07701				07701			-	732-345-830	'n			
or type.							-					
See Specific Instructions.							c		ı ıs pending, check here 🕨 🔲			
							D	1 Foreign organizations, of	check here			
Н	CI	heck	type of organization	n: XSe	ction 50	1(c)(3) exempt private f	foundation	2 Foreign organizations m	neeting the 85% test, check			
	Γ	ີ∣Sed	ction 4947(a)(1) nor	nexempt cha	aritable	trust Other taxable i	private foundation	here and attach comput	tation -			
						counting method X C						
•			rt II, column (c), line 16)		ڪُن ا	Other (specify)		under section 507(b)(1)				
					با م ا		F	.,				
	<u> </u>	- A 1 W	18,695,68		(Paπ i	, column (d) must be or	n cash basis )	under section 507(b)(1)	(B), check here			
gar	<b>T</b> (1)		nalysis of Reve			(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements			
		E	(penses (The total	al of amoun	ts ın	expenses per books	income	income	for charitable			
		co	lumns (b), (c), and	(d) may not	neces-	'			purposes			
			rily equal the amou se the instructions)		ın (a)				(cash basis only)			
	$\neg$	1	Contributions, gifts, grani		(all aals)	14,304,491.	2 1 2 4 2 2 4 1 2 4 2	0 2 7 7 2 8 8 1 1 8 8 1 1 1 1 1 1 1 1 1 1 1 1 1				
							<u> </u>		A M. A. A.			
		2	<u> </u>	n is <b>not</b> req to a		(意の動物 動物の動物の後の	8 8 4 2 · · · A · · · A · · · · · · · · · · ·	4 & 5 - \$7 - y - y - y - y - y - y - y - y - y -				
		3	Interest on savings cash investments	s and tempo	rary	4,592.	4,592	. 4,592				
						31,951.	31,951	. 31,951				
		- 4	Dividends and interest f	rom securiues		31,951.	31,951	. 31,951				
			Gross rents. Net rental income					(3235 >> 275 - 275				
			or (loss)						<u> </u>			
R	:		Net gain/(loss) from sale			-461,145.						
E	;	D	Gross sales price for all assets on line 6a	8,038	,867.							
Ě	.	7	Capital gain net income (	(from Part IV, III	ne 2).		0	. 105				
Ē		8	Net short-term cap	ital gain	•		3 2 3 37 3-30 3 3 3	4				
U		9	Income modification	-			8 15 15 15 15 15 15	2 1				
Ĕ		10a	Gross sales less			1	73 - 43 2 3 4 5 5 5 5 7 5 7 5		DATE NEW YORK			
			returns and allowances.									
		b	Less Cost of									
		_	goods sold					4 T \$3500 \$5700 \$ 55 \ 2800 \$				
			Gross profit/(loss) (att	•				<u>. 1</u>				
	İ	11	Other income (atta	ich schedule	?)							
		12	Total. Add lines 1			13,879,889.	36,543	. 36,543	B			
		13	Compensation of officers	, directors, trust	ees, etc	0.						
		14	Other employee salaries	and wages		6,100.			6,100.			
		15	Pension plans, em	<del>ploye</del> e bene	efits							
1	A	16a	LEGAT PRES (AND GENERAL)	lule) SEE	ST 1	4,600.	196		4,404.			
	OM M	h	Accounting lees (attach			6,571.	327	- 1	6,244.			
	M.		Other prof fees (attach	WN SEE	C.L. 3	2,564.	2,564		0,211.			
0	K	1	Althorage & 6 2010		31 3	· .		· <del> </del>	<del></del>			
P	5]	11/				1.	1					
O P E R A T	ď	រ [[8	Taxes (attach schedule)(see inst		51M 4	1,043.	10	•	1,033.			
Ą	¥	ہوا	Depreciation (alter	7 l								
- 1	1	المما	sch and papleton	<u>u</u>			***		* A&''%* *			
N G	E		<del>Occupancy</del>									
			Travel, conference		ings			<del> </del>	<del> </del>			
A N D	E X P	22	Printing and public						<del>- </del>			
D	PE	23	Other expenses (a									
	N		SEE	STATEM	LNT 5	1,435.	_	ļ.	1,435.			
	S	24	Total operating an						10.075			
	Š		expenses. Add line			22,314.	3,098	•	19,216.			
			Contributions, gifts, grai	•		107,130.	- <u>(                                    </u>		107,130.			
		26	Total expenses an	d disburser	nents.			_				
	]		Add lines 24 and 2	25		129,444.	3,098	.  0	126,346.			
	J		Subtract line 26 fro			S-3	I Sama a da	Jan. 2 Marie				
		а	Excess of revenue	over exper	ises	12 750 445						
	-	_	and disbursement			13,750,445.	At the state of th	`\```` <u> </u>				
	-	b	Net investment income (	if negative, ente	er -0-)		33,445	• ***	\$ \$ \$ \$			
		с	Adjusted net income (if	negative, enter	-0-)	\$		36,543				
DAA		- D-1	a Ask and Dane.	manuel Deele	-A! A	t Notice see the instru		EADEDAL 03/03/10	Form 990-PE (2009)			

Dar	b211' -	Balance Sheets	Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	E	nd c	of year
r,ar	<b>1311</b> , <i>∑</i>	Daiance Sheets	(See instructions )	(a) Book Value	(b) Book Value		(c) Fair Market Value
	1	Cash - non-interest	-bearing				
	2	Savings and tempora	ary cash investments	94,077.	7,197,29	2.	7,197,292.
	3	Accounts receivable	<b>-</b>		gradio radio regionario de la descripción del descripción de la de	i G	
		Less: allowance for	doubtful accounts				
	4	Pledges receivable	<b>&gt;</b>			¥,4	\$ \$ 4 P. W.
		Less allowance for o	doubtful accounts				
	5	Grants receivable					
	6	Receivables due from offic disqualified persons (attac	ers, directors, trustees, and other th schedule) (see the instructions)				
	7	Other notes and loans rece	ervable (attach sch)				
Ą	ì	Less: allowance for o	doubtful accounts ►				
Š	8	Inventories for sale of	or use				
A S S E T	9	Prepaid expenses ar	nd deferred charges				
Ś	10 a	Investments – U.S. obligations (attach s	and state government chedule)				
	ı	Investments — corporate :	stock (attach schedule)	1,883,520.	10,186,58	1.	10,186,581.
	(	c Investments — corporate I	oonds (attach schedule)				
	11	Investments – land, equipment: basis	buildings, and				
		Less: accumulated depreci (attach schedule).	ation				
	12	Investments - morto	gage loans				
	13	Investments - other	(attach schedule)	857,434.	1,307,27	6.	1,307,276.
	14	Land, buildings, and e	quipment: basis 🕒			ا مشداسته	<u> </u>
		Less: accumulated deprect (attach schedule)	<b>&gt;</b>				
		Total assets (to be o	be ► SEE STATEMENT 6 ) completed by all filers —	0.005.001	4,53		4,532.
			o, see page 1, item l)	2,835,031.	18,695,68		18,695,681.
ŀ	<ul><li>17 Accounts payable and accrued e.</li><li>18 Grants payable</li></ul>		d accrued expenses		1,08	υ.	
A B					•		
Î	19			05 040			
Ļ	20		ors, trustees, & other disqualified persons.	85,348.			
Ŧ	21	Mortgages and other notes	,				
ı	22	Other liabilities (descri	be)				
E S	23	Total liabilities (add	lines 17 through 22)	85,348.	1,08	0.	
		Foundations that fol	low SFAS 117, check here X4 through 26 and lines 30 and 31.				
N F	24	Unrestricted		2,749,683.	18,694,60	1.	
N F E U T N	25	Temporarily restricte	d.	,,	, <u>- ,</u>		
D	26	Permanently restricte					
ASSETS		-	not follow SFAS 117. check here ►		1.00		
ĔĻ	27	Capital stock, trust n	rincipal, or current funds				
T A S N	28		or land, building, and equipment fund.				
С	29	• • • •	lated income, endowment, or other funds				
O E R S	30		und balances (see the instructions)	2,749,683.	18,694,60	1	
	31		net assets/fund balances	2,835,031.	18,695,68		
Part	<b>[ [ [ ]</b>	Analysis of Chan	ges in Net Assets or Fund Balanc				
1	Total end-	net assets or fund ba of-year figure reported	lances at beginning of year — Part II, colu on prior year's return)	ımn (a), line 30 (must a		1	2,749,683.
2	Ente	r amount from Part I,	line 27a			2	13,750,445.
3	Other	increases not included in lin	e 2 (Itemize) SEE STATEMENT	. <u>7</u> _ <b></b>		3	2,194,473.
4		lines 1, 2, and 3				4	18,694,601.
5		ases not included in line 2 (i				5	
6	<u>Total</u>	net assets or fund ba	lances at end of year (line 4 minus line 5)	- Part II, column (b), I	ine 30	6	18,694,601.

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Part VI instructions

8 Enter qualifying distributions from Part XII, line 4

126,346.

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

Forn	n 990-PF (2009) BRIAN & JOELLE KELLY FAMILY FOUNDATION 20	5-61392	49	Page 4
	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – s			- r age -
	a Exempt operating foundations described in section 4940(d)(2), check here			
	Date of ruling or determination letter: (attach copy of letter if necessary - see instr.)			
ı	b Domestic foundations that meet the section 4940(e) requirements in Part V,	1		334.
	check here ► X 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, column (b)		4	3 %
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		334.
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		334.
6	Credits/Payments.	ļ ķ		
	a 2009 estimated tax pmts and 2008 overpayment credited to 2009  6a 3, 195	<u>5.</u>    *		**
	Exempt foreign organizations – tax withheld at source	4 1		
	c Tax paid with application for extension of time to file (Form 8868)			* *2
	d Backup withholding erroneously withheld . 6d	-  <u>-</u>  -̂	<u> </u>	
_	Total credits and payments Add lines 6a through 6d	7		3,195.
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here if Form 2220 is attached	8		^
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9		0.
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid  Enter the amount of line 10 to be: Credited to 2010 estimated tax.  2,861.  Refunded	► 10 ► 11	<del></del>	2,861. 0.
	t VII-A Statements Regarding Activities	<u> </u>		0.
				res No
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		1a	X
t	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?		1 b	х
	If the answer is 'Yes' to <b>1a</b> or <b>1b</b> , attach a detailed description of the activities and copies of any materials or distributed by the foundation in connection with the activities	published	2 2 3 X	1 · 6
(	Did the foundation file Form 1120-POL for this year?		1c	X
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			<del>-   :  </del>
	(1) On the foundation $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$		0.	* *, &
E	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax impose	ed on	' '   '	
2	foundation managers \$ 0.		2	X
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?  If 'Yes,' attach a detailed description of the activities		-	1
	•			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, article of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes	les	3	X
4=	a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a	$\frac{x}{x}$
	o If 'Yes,' has it filed a tax return on Form 990-T for this year?		4b	N/A
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5	X
	If 'Yes,' attach the statement required by General Instruction T		20, 10	
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?	Commet	6	X
7	Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV		7	X
88	Enter the states to which the foundation reports or with which it is registered (see the instructions)			
	NY			
t	o 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		- A.	X
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If 'Yes,' comp	or 4942(j)	(5) <b>9</b>	$-\frac{1}{x}$
	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their		, v   <del>3</del>	
	and addresses.		10	X

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Form **990-PF** (2009)

Form 990-PF (2009) BRIAN & JOELLE KELLY FAMILY FOUNDATION	26-613924	19	Р	age <b>5</b>
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		Х
12 Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?		12		Х
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption Website address ► N/A	application?	13	Х	_
	no. ► <u>732-3</u> 07701	45-8	300	 
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here	<u> </u>	_N/A		MI / N
and enter the amount of tax-exempt interest received or accrued during the year	<u> </u>			N/A
Part VII-B   Statements Regarding Activities for Which Form 4720 May Be Required			<b>V</b> I	NI -
File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.		B.c.	Yes	No
1 a During the year did the foundation (either directly or indirectly):  (1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes X No		,%,	
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	Yes X No			
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes X No		•	~
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes X No			
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	Yes X No		ζ,	<
(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)	Yes X No			e •
<b>b</b> If any answer is 'Yes' to 1a(1)-(6), did <b>any</b> 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 the instruction	ns)?	1 b	N	/A
Organizations relying on a current notice regarding disaster assistance check here	▶ 📗	1 1	ł	
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	<u> </u>	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)).			<b>%</b>	
a At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2009?	Yes X No	<b>*</b>		,
If 'Yes,' list the years ► 20 , 20 , 20 , 20			į, ,	<b>%</b>
<b>b</b> Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a) <b>all</b> years listed, answer 'No' and attach statement — see the instructions)	n)(2) n(2) to	2 b	N	į.
c If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years he 20, 20, 20	ere	2.0	- N	
3a Did the foundation hold more than a 2% direct or indirect interest in any business	Yes 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	<u></u>			K. WASHING
determine if the foundation had excess business holdings in 2009.)		3ь	N	<u>/A</u>
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4a		х
<b>b</b> Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2009?		4b		X
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Form 990-PF (2009) BRIAN & JOELLE KE				139249	Page <b>6</b>			
Part VII-B Statements Regarding Activit	<u>ies for Which Forn</u>	<u>n 4720 May Be Req</u>	uired (continued)					
5a During the year did the foundation pay or incu	•	on (continue 404E(n))2	□vaa N	No				
(1) Carry on propaganda, or otherwise attempt	-		∐ Yes ⊉	7 NO				
<ul><li>(2) Influence the outcome of any specific public on, directly or indirectly, any voter registration.</li><li>(3) Provide a grant to an individual for travel,</li></ul>	ation drive?	•	Yes X	_ 1 1				
(4) Provide a grant to an organization other t in section 509(a)(1), (2), or (3), or section	No	*						
(5) Provide for any purpose other than religio		ŝ						
educational purposes, or for the prevention	∐No      }	×						
b If any answer is 'Yes' to 5a(1)-(5), did any of described in Regulations section 53 4945 or in (see instructions)?	5b	N/A						
Organizations relying on a current notice rega								
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?  N/A Yes No. 1f 'Yes,' attach the statement required by Regulations section 53 4945-5(d).								
6a Did the foundation, during the year, receive an on a personal benefit contract?			∐Yes ∑	No No				
<b>b</b> Did the foundation, during the year, pay prem If 'Yes' to 6b, file Form 8870.	iums, directly or indirec	ctly, on a personal bene	fit contract?	6b	X			
7a At any time during the tax year, was the found	dation a party to a proh	nibited tax shelter transa	action? Yes 2	No				
<b>b</b> If yes, did the foundation receive any proceed				7b	N/A			
Part VIII Information About Officers, D				Employees				
and Contractors	· · · · · · · · · · · · · · · · · · ·				<u> </u>			
1 List all officers, directors, trustees, foundation	n managers and their	compensation (see inst	ructions).					
(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense other allo				
BRIAN G. KELLY	TRUSTEE	0.	0.		0.			
C/O CHADWICK & CO 225 ROUTE 35 RED BANK, NJ 07701	10.00							
JOELLE S. KELLY	TRUSTEE	0.	0.		0.			
C/O CHADWICK & CO 225 ROUTE 35 RED BANK, NJ 07701	10.00							
2 Compensation of five highest-paid employee	s (other than those inc	luded on line 1- see ir	structions). 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 other allo				
NONE			,					
	_							
Total number of other employees paid over \$50,000	)			•	0			
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Form 990-PF (2009) BRIAN & JOELLE KELLY FAMILY FOUNDATION 26-61	
Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid I and Contractors (continued)	Employees,
3 Five highest-paid independent contractors for professional services — (see instructions). If none, enter 'NONE.'	<del></del>
(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.	0
Part IX-A Summary of Direct Charitable Activities	
	<u> </u>
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 <u>N/A</u>	
2	
3	
4	
Part IX-B Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1 <u>N/A</u>	
2	
All other program-related investments. See instructions	
3	
Total. Add lines 1 through 3	0.

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Part X Minimum Investment Return (All domestic foundations must complete this part. F see instructions.)	oreign	foundations,
1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes.		11 100 000
a Average monthly fair market value of securities	1a	11,130,220.
<b>b</b> Average of monthly cash balances	16	2,458,864.
c Fair market value of all other assets (see instructions)	1 c	10.500.004
d Total (add lines 1a, b, and c)	1 d	13,589,084.
e Reduction claimed for blockage or other factors reported on lines 1a and 1c		
(attach detailed explanation) 1e 0	i I	_
2 Acquisition indebtedness applicable to line 1 assets	2	0.
3 Subtract line 2 from line 1d	3	13,589,084.
4 Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	203,836.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	13,385,248.
6 Minimum investment return. Enter 5% of line 5	6	669,262.
Part XI ✓ Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operand certain foreign organizations check here ► ☐ and do not complete this p		foundations
1 Minimum investment return from Part X, line 6	1	669,262.
2a Tax on investment income for 2009 from Part VI, line 5.	. 2.2	
<b>b</b> Income tax for 2009. (This does not include the tax from Part VI.)	7 1	
c Add lines 2a and 2b	2 c	334.
3 Distributable amount before adjustments. Subtract line 2c from line 1	3	668,928.
4 Recoveries of amounts treated as qualifying distributions	4	
5 Add lines 3 and 4	5	668,928.
6 Deduction from distributable amount (see instructions)	6	·
7 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	668,928.
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	126,346.
<b>b</b> Program-related investments — total from Part IX-B	1 b	
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>b</b> Cash distribution test (attach the required schedule)	36	
4 Qualifying distributions Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	126,346.
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions)	5	334.
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	126,012.
Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating who qualifies for the section 4940(e) reduction of tax in those years.	ther the	foundation
BAA		Form 990-PF (2009)

## Part XIII Undistributed Income (see instructions)

	<b>(a)</b> Corpus	(b) Years prior to 2008	<b>(c)</b> 2008	<b>(d)</b> 2009
1 Distributable amount for 2009 from Part XI, line 7				668,928.
2 Undistributed income, if any, as of the end of 2009:	₩.~		<b>.</b>	3 3
a Enter amount for 2008 only .	\$\$*.		95,074.	
<b>b</b> Total for prior years. 20 , 20 , 20		0.		
3 Excess distributions carryover, if any, to 2009:		x.		
<b>a</b> From 2004		,	` ` `	**
<b>b</b> From 2005	] ,			
<b>c</b> From 2006				
<b>d</b> From 2007			<b>4 4 3 3</b>	i
e From 2008				\$ % <b>* * * * * * * * * *</b>
f Total of lines 3a through e	0.	* *		
4 Qualifying distributions for 2009 from Part				
XII, line 4 ► \$ 126, 346.				
a Applied to 2008, but not more than line 2a	` `	*	95,074.	18"
<b>b</b> Applied to undistributed income of prior years (Election required — see instructions).		o.	i i	
c Treated as distributions out of corpus	· · · · · · · · · · · · · · · · · · ·		* *	
(Election required — see instructions)	0.	ř.	*	
d Applied to 2009 distributable amount	, ex		¥	31,272.
e Remaining amount distributed out of corpus	0.			\$ 2223,
5 Excess distributions carryover applied to 2009	0.	<b>₹</b>	.** :	0.
(If an amount appears in column (d), the same amount must be shown in column (a).)	*	ž **	' "	
(,	4			* - * - * - * - * *
6 Enter the net total of each column as				
indicated below:				.*
a Corpus. Add lines 3f, 4c, and 4e Subtract line 5	0.		<u> </u>	2.2
<b>b</b> Prior years' undistributed income. Subtract line 4b from line 2b	· · · · · · · · · · · · · · · · · · ·	0.		
c Enter the amount of prior years' undistribut-	,		· · · · · · · ·	
ed income for which a notice of deficiency has been issued, or on which the section			i.	ر نیخ ا
4942(a) tax has been previously assessed		0.	, t	
d Subtract line 6c from line 6b. Taxable	**		, op	
amount - see instructions	·	0.	*	
e Undistributed income for 2008. Subtract line 4a from			0	
line 2a. Taxable amount — see instructions.	***	77	U.	* V
f Undistributed income for 2009 Subtract lines			*	
4d and 5 from line 1 This amount must be distributed in 2010	٠,٠٠٠			637,656.
7 Amounts treated as distributions out of		```	<u> </u>	**
corpus to satisfy requirements imposed				
by section 170(b)(1)(F) or 4942(g)(3) (see instructions)	0.			
·	<u> </u>		j	* ***
8 Excess distributions carryover from 2004 not applied on line 5 or line 7 (see instructions).	0.			
9 Excess distributions carryover to 2010.				
Subtract lines 7 and 8 from line 6a	0.	š. <u>*</u>	» <u>%</u>	
10 Analysis of line 9:				- Control of the Cont
a Excess from 2005		and the second s		
b Excess from 2006 c Excess from 2007	à	<i>#</i>	*	
d Excess from 2007	¥	Ĩ	`	
e Excess from 2009				
C EACESS HOTH 2007	<u> </u>			

Form 990-PF (2009) BRIAN & JOELLE KI			/II A guestian (	26-613924	
Part XIV   Private Operating Foundation				<del></del>	N/A
1a If the foundation has received a ruling or one is effective for 2009, enter the date of the	ruling	·	-		<del></del>
b Check box to indicate whether the foundat		erating foundation d		4942(j)(3) or	4942(j)(5)
2a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year	(1) 0000	Prior 3 years	445 0000	4
investment return from Part X for each year listed	(a) 2009	<b>(b)</b> 2008	(c) 2007	(d) 2006	(e) Total
<b>b</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					
<ul> <li>Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c</li> </ul>	_				
3 Complete 3a, b, or c for the alternative test relied upon.					
a 'Assets' alternative test — enter					
(1) Value of all assets	_				
(2) Value of assets qualifying under section 4942(j)(3)(B)(i).					
b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c 'Support' alternative test — enter:					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income .		<u> </u>		<u>_</u>	
Supplementary Information assets at any time during the			organization ha	d \$5,000 or mor	e in
1 Information Regarding Foundation Manag a List any managers of the foundation who had close of any tax year (but only if they have NONE	ave contributed me	ore than 2% of the t than \$5,000). (See	total contributions resection 507(d)(2).)	eceived by the found	dation before the
<b>b</b> List any managers of the foundation who ca partnership or other entity) of which the NONE	own 10% or more of foundation has a 1	f the stock of a corp 0% or greater intere	poration (or an equa est	ally large portion of	the ownership of
2 Information Regarding Contribution, Gran		• • • •			
Check here \( \begin{align*}					
a The name, address, and telephone numbe	r of the person to	whom applications s	should be addressed	i	
<b>b</b> The form in which applications should be s	submitted and infor	mation and materia	ls they should inclu	de	-
c Any submission deadlines			<del>-</del>		
				··	
d Any restrictions or limitations on awards, s	uch as by geograp	hical areas, charitat	ole fields, kinds of i	nstitutions, or other	factors
BAA	TFI	EA0310L 07/06/09		F	orm <b>990-PF</b> (2009)

Page **11** 

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	Purpose of grant or contribution	Amount					
Name and address (home or business)	substantial contributor	Tecipient							
a Paid during the year SEE STATEMENT 9									
			▶ 3a	107,130.					
Total	T	I	<u>► 3a</u>	107,130.					
b Approved for future payment									
Total			► 3b	<del></del>					

	Unrelated	business income	Excluded by	section 512, 513, or 514	
	(a) Business code	<b>(b)</b> Amount	(c) Exclu- sion	<b>(d)</b> Amount	(e) Related or exempt function income
1 Program service revenue.  a b c			code		(see the instructions
d e					
g Fees and contracts from government agencies  Membership dues and assessments.					
Interest on savings and temporary cash investments  Dividends and interest from securities			14	4,592. 31,951.	
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			14	-461,145.	
Net income or (loss) from special events     Gross profit or (loss) from sales of inventory     Other revenue.		, 6			
ab					
c d e					
Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  ee worksheet in the instructions for line 13 to verify ca	alculations)		* *	-424,602. 13	-424,602
rt XVI-B Relationship of Activities to the		hment of Exemp	t Purpose	es .	
ine No. Explain below how each activity for which in accomplishment of the foundation's exempt	ncome is report purposes (other	ted in column (e) of Fer than by providing f	Part XVI-A co unds for suc	ontributed important h purposes). (See t	ly to the ne instructions)
N/A					
	<u>.                                    </u>				
	-				

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

										Yes	No
	1 Did ti desci	ne organization directly ribed in section 501(c) (	or indirectly e of the Code (o	ingage in any of the ther than section 50	following with (c)(3) organi	n any othe izations) c	er organization er in section !	in 527.			
	relati	ng to political organizat	tions?		, (e)(e) e. ga			,	~		
	a Trans	sfers from the reporting	foundation to	a noncharitable exe	empt organiza	ition of.			<u> </u>		
	(1) Cash								1a (1)		<u>X</u>
	(2) Other assets								1a (2)		X
	<b>b</b> Other transactions									ļ	
	(1) Sales of assets to a noncharitable exempt organization								1b(1)	ļ	X
	(2) Purchases of assets from a noncharitable exempt organization								1b (2)		X
(3) Rental of facilities, equipment, or other assets									1b (3)	<u> </u>	<u>X</u>
(4) Reimbursement arrangements									. 1b (4)		X
	(5) Loans or loan guarantees  (6) Performance of services or membership or fundraising solicitations								1b (5)		X
	` '			•					1b (6)		X
	c Shari	ng of facilities, equipme	ent, mailing lis	sts, other assets, or	paid employe	es			1c	l	
	the a	answer to any of the a oods, other assets, or s ransaction or sharing a	services aiven	by the reporting fou	ındatıon. If the	e foundation	on received I	ess than fair mai	ket value in	ue of	
	) Line no.	(b) Amount involved	T	of noncharitable exempt of				sfers, transactions, a		ngement	:s
_	/A	1	1 7,7	•							
_											
_											
_		. <u></u>	ļ								
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_											
_							_				
_							-				
_									<del></del>		
	·	_	L						<u> </u>		
	2a Is the descr	foundation directly or the foundation directly or the foundation section 501(c) or the foundation for the foundation directly or the foundation directly directly or the foundation directly dir	indirectly affiliate from the code (of	ated with, or related ther than section 50	to, one or mo	ore tax-ex section 52	empt organiz	zations	□Yes	X	No
		s,' complete the following	•		(-/(-// -						
		(a) Name of organizati	on	<b>(b)</b> Type of	organization		(c	) Description of r	elationship		
N	/A										
		1									
_											
_		//									
	Under pena	alties of perjury I declare that I Declaration of greparer (other t	I have examined the	is return, including accomp uciary) is based on all info	panying schedules rmation of which p	and statement	nts, and to the be any knowledge	st of my knowledge an	d belief, it is true	e, correc	t, and
	/		, ,	•	·		, ,				
s	<b>&gt;</b> /	· / // /				1		► TRUSTEE			
S I G	<del>/</del> Şign	ature of officer or trustee				Date	<del></del>	Title			
G	1-,	T	747			Date	$\overline{I}$ $I$	Pr	eparer's Identify	ing numi	ber
Ħ	Paid	Preparer's signature	/ City	DESTRUCTION CDA	$\overline{}$	7	13 10	self.	ee Signature in	tne instr	s)
HERE	Pre- parer's	ROBE		DWICK CPA COMPANY CPAS,	PC '	/		37.43	/A		
	Use	vours if self-		5 SUITE 102C	<u>, FC</u>			EIN ► N/A			
	Only		BANK, NJ			· <u>-</u>		Phone no ► 73	32-345-8	300	
BA	\A		,	<u> </u>					Form <b>99</b>		2009)

#### ' 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		Employer identification number
BRIAN & JOELLE KELLY FAMILY I	FOUNDATION	26-6139249
Organization type (check one)		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as	a private foundation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a pi	ivate foundation
	501(c)(3) taxable private foundation	
Check if your organization is covered by the G	ieneral Rule or a Special Rule. ganization can check boxes for both the General Rule and a	Special Bule. See instructions
Note: Only a section 501(c)(7), (8), or (10) org	ganization can check boxes for both the General Rule and a	Special Rule. See Instructions
General Rule -		
<del></del>	Z, 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 )	E, or 330 f f that 1000 food, during the year, 40,000 of more	(iii money or property) mone any one
Special Rules —		
<del>_</del>	Form 990 or 990-EZ, that met the 33-1/3% support test of t	he regulations under sections
509(a)(1)/170(b)(1)(A)(vi) and received from an	y one contributor, during the year, a contribution of the greater of	
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 of the section 51 (c)	zation filing Form 990 or 990-EZ, that received from any or 00 for use <i>exclusively</i> for religious, charitable, scientific, lite	e contributor, during the year,
prevention of cruelty to children or animals	s. Complete Parts I, II, and III	rary, or educational purposes, or the
For a section 501(c)(7), (8), or (10) organi	zation filing Form 990 or 990-EZ, that received from any or	e contributor, during the year.
contributions for use <i>exclusively</i> for religion	us, charitable, etc. purposes, but these contributions did no	ot aggregate to more than \$1,000 If
purpose. Do not complete any of the parts	ontributions that were received during the year for an exclusion unless the <b>General Rule</b> applies to this organization becau	sively religious, charitable, etc, use it received nonexclusively
religious, charitable, etc. contributions of \$		▶\$
990-PF) but it must answer 'No' on Part IV. Iir	by the General Rule and/or the Special Rules does not file Sine 2 of their Form 990, or check the box on line H of its For	m 990-EZ, or on line 2 of its Form
990-PF, to certify that it does not meet the filling	ng requirements of Schedule B (Form 990, 990-EZ, or 990-	PF).
BAA For Privacy Act and Paperwork Reduct	ion Act Notice, see the Instructions Sched	Ile B (Form 990, 990-EZ, or 990-PF) (2009)
for Form 990, 990EZ, or 990-PF.		

Schedule I	В	(Form	990,	990-EZ,	or	990-PF)	(2009)
Name of orga	ni	zation					

of Part I

BRIAN & JOELLE KELLY FAMILY FOUNDATION

Page 1 of 1
Employer identification number

26-6139249

Part I	Contributors (see instructions )		
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1_	BRIAN & JOELLE KELLY  C/O CHADWICK&CO, 225 ROUTE 35N  RED BANK, NJ 07701	\$2,685,801.	(Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
2	RED BANK, NJ 07701	\$ <u>4,775,650.</u>	Person Payroll Noncash X (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
3	BRIAN & JOELLE KELLY  C/O CHADWICK&CO, 225 ROUTE 35N  RED BANK, NJ 07701		Person Payroll Noncash X (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
4	BRIAN & JOELLE KELLY  C/O CHADWICK&CO, 225 ROUTE 35N  RED BANK, NJ 07701	\$1,514,794.	Person Payroll Noncash X (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
5	BRIAN & JOELLE KELLY  C/O CHADWICK&CO, 225 ROUTE 35N  RED BANK, NJ 07701	\$ <u>1,187,000.</u>	Person Payroll Noncash X (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)

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

Page Employer identification number

of 1

of Part II

Name of organization

BRIAN & JOELLE KELLY FAMILY FOUNDATION

26-6139249

Part II Noncas	Property (see	instructions.)
----------------	---------------	----------------

(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
260,000 SHARES OF ACTIVISION BLIZZARD (ATVI) COMMON STOCK.		
	\$ 2,685,801.	3/06/09
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
457,000 SHARES OF ACTIVISION BLIZZARD (ATVI) COMMON STOCK.		
	\$ 4,775,650.	3/23/09
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
357,004 SHARES OF ACTIVISION BLIZZARD (ATVI) COMMON STOCK.		
	\$ 4,141,246.	5/15/09
(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
124,880 SHARES OF ACTIVISION BLIZZARD (ATVI) COMMON		
	\$ 1,514,794.	6/01/09
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
100,000 SHARES OF ACTIVISION BLIZZARD (ATVI) COMMON STOCK.		
	\$ 1,187,000.	11/18/09
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		<u> </u>
	Description of noncash property given  260,000 SHARES OF ACTIVISION BLIZZARD (ATVI) COMMON STOCK.  Description of noncash property given  457,000 SHARES OF ACTIVISION BLIZZARD (ATVI) COMMON STOCK.  Description of noncash property given  357,004 SHARES OF ACTIVISION BLIZZARD (ATVI) COMMON STOCK.  Description of noncash property given  124,880 SHARES OF ACTIVISION BLIZZARD (ATVI) COMMON STOCK.  Description of noncash property given  100,000 SHARES OF ACTIVISION BLIZZARD (ATVI) COMMON STOCK.	260,000 SHARES OF ACTIVISION BLIZZARD (ATVI) COMMON STOCK.    Description of noncash property given   FMV (or estimate) (see instructions)

	<b>3</b> (Form 990, 990-EZ, or 990-PF) (2009)		Page 1	of 1	of Part III	
Name of organ		T AN			Employer identifica	
Part III	S JOELLE KELLY FAMILY FOUNDA Exclusively religious, charitable, e		ns to secti	on 501/cV	$\frac{ 26-6139249}{(7)(8)(7)(10)}$	
i aitiii	organizations aggregating more th	nan \$1,000 for the year.(C	complete cols	(a) through (	(e) and the follow	ng line entry)
	For organizations completing Part III, enter contributions of \$1,000 or less for the year.	total of <i>exclusively</i> religious, c (Enter this information once –	haritable, etc, see instruction	ons )	<b>►</b> \$	N/A
(a)	(b)	(c)			(d)	
No. from Part I	Purpose of gift	Use of gift	į	Desc	ription of how gi	t is held
	N/A					
		<u> </u>				
		(0)				<u> </u>
	Transferee's name, addres	(e) Transfer of gift ss, and ZIP + 4	Rela	tionship of	transferor to tran	sferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	<b>-</b>	Desc	(d) ription of how git	t is held
		(e) Transfer of gift				
	Transferee's name, addres	Relationship of transferor to transferee				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	:	Desc	(d) ription of how gif	t is held
	Transferee's name, addres	(e) Transfer of gift s, and ZIP + 4	Rela	tionship of t	transferor to tran	sferee
(a) No. from	(b) Purpose of gift	(c) Use of gift		Desci	(d) ription of how gif	t is held
Part I						
	Transferee's name, addres	(e) Transfer of gift s, and ZIP + 4	Rela	tionship of t	ransferor to trans	sferee
BAA			Schad	lule <b>R</b> (Form	990 990-F7 or	200.PE) (2000)

2009	FEDERAL STATEMENTS	PAGE 1
CLIENT KELLYFDN BR	AN & JOELLE KELLY FAMILY FOUNDATION	26-6139249
7/13/10		05:57PM
STATEMENT 1 FORM 990-PF, PART I, LINE 16A LEGAL FEES		
CEFI K-1 LINE 13-K -LEGAL	(A) (B) NET (C) EXPENSES INVESTMENT ADJUSTED PER BOOKS INCOME NET INCOME \$ 196. \$ 196.	(D) CHARITABLE PURPOSES
LEGAL FEES	TOTAL \$ 4,404. \$ 196. \$ 0.	\$ 4,404. \$ 4,404.
STATEMENT 2 FORM 990-PF, PART I, LINE 16B ACCOUNTING FEES		
ACCOUNTING FEES ACCOUNTING FEES	(A) (B) NET (C) EXPENSES INVESTMENT ADJUSTED PER BOOKS INCOME NET INCOME  \$ 327. \$ 327. 6,244.  TOTAL \$ 6,571. \$ 327. \$ 0.	(D) CHARITABLE PURPOSES  \$ 6,244. \$ 6,244.
STATEMENT 3 FORM 990-PF, PART I, LINE 16C OTHER PROFESSIONAL FEES		
K-1 MANAGEMENT FEES	(A) (B) NET (C) EXPENSES INVESTMENT ADJUSTED INCOME NET INCOME  \$ 2,564. \$ 2,564. \$ 2,564. \$ 0.	(D) CHARITABLE PURPOSES  \$ 0.
STATEMENT 4 FORM 990-PF, PART I, LINE 18 TAXES		
CEFI-KI - LINE 13-K - TAXE	(A) (B) NET (C) EXPENSES INVESTMENT ADJUSTED PER BOOKS INCOME NET INCOME  S \$ 10. \$ 10.	(D) CHARITABLE PURPOSES
PAYROLL TAX STATE TAX	758. 275.	\$ 758. 275. \$ 1,033.

2009	FEDERAL STATEMENTS	PAGE 2
CLIENT KELLYFDN	BRIAN & JOELLE KELLY FAMILY FOUNDATION	26-6139249
7/13/10  STATEMENT 5  FORM 990-PF, PART I, LINE OTHER EXPENSES	: 23	05.57PM
ADVERTISING BANK CHARGES INSURANCE INTERNET ACCESS. NETWORK DOMAIN FEE OFFICE EXPENSE SUPPLIES	(A) (B) NET (COME EXPENSES INVESTMENT ADJUSTMENT NET INCOME NET IN	
STATEMENT 6 FORM 990-PF, PART II, LINE OTHER ASSETS	E 15	
ACCRUED INTEREST ACCRUED INTEREST ROUNDING		\$ 4,532. 1. 1.
STATEMENT 7 FORM 990-PF, PART III, LINI OTHER INCREASES  ACCRUED INTEREST INCOM ROUNDING TAX EXEMPT INTEREST CE UNREALIZED GAIN ON INV	IE CFI K1 (18A); (18B) VESTMENTS	\$ 4,511. 3. 542. 2,189,417. FAL \$ 2,194,473.
STATEMENT 8 FORM 990-PF, PART IV, LINI CAPITAL GAINS AND LOSS	E 1 ES FOR TAX ON INVESTMENT INCOME	
TTEM	DESCRIPTION	DATE UIRED SOLD 9/24/2009 9/24/2009 9/24/2009 10/06/2009 13/2002 6/04/2009 33/2002 6/11/2009 33/2002 8/18/2009 33/2002 8/18/2009 33/2002 11/13/2009 7ARIOUS VARIOUS

## **FEDERAL STATEMENTS**

PAGE 3

**CLIENT KELLYFON** 

**BRIAN & JOELLE KELLY FAMILY FOUNDATION** 

26-6139249

7/13/10

05:57PM

STATEMENT 8 (CONTINUED)
FORM 990-PF, PART IV, LINE 1
CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)
	GROSS	DEPREC.	COST	GAIN	FMV	ADJ. BAS.	EXCESS	GAIN
ITEM	SALES	ALLOWED	<u>BASIS</u>	(LOSS)	12/31/69	_12/31/69	(I) - (J)	(LOSS)
1	245,000.		245,000.	0.				\$ 0.
2	245,000.		245,000.	0.				0.
3	245,000.		245,000.	0.				0.
4	1226963.		1739161.	-512,198.				-512,198.
5	1301961.		1739161.	-437,200.				-437,200.
6	222,395.		312,699.	-90,304.				-90,304.
7	1645279.		1363772.	281,507.				281,507.
8	2907269.		2603869.	303,400.				303,400.
9	0.		6,350.	-6,350.				-6,350.
							TOTAL	\$-461,145.

# **FEDERAL STATEMENTS**

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**CLIENT KELLYFON** 

#### **BRIAN & JOELLE KELLY FAMILY FOUNDATION**

26-6139249

7/13/10

05:57PM

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT		AMOUNT
COLUMBIA U 475 RIVERSIDE DRIVE NEW YORK, NY 10115	NONE		THE NAOMI BERRIE DIABETES CENTER AT COLUMBIA UNIVERSITY MEDICAL CENTER AIM IS TO CREATE A WORLD-CLASS CENTER FOR DIABETES CARE AND RESEARCH IN NEW YORK CITY. IN THIS TIME, THE BERRIE CENTER HAS BECOME RECOGNIZED NATIONALLY AND INTERNATIONALLY FOR EXCELLENCE AND INNOVATION IN PATIENT CARE AND RESEARCH IN DIABETES AND ITS ALLIED DISORDERS, AND IS WELL ON ITS WAY TO ACHIEVING OUR VISION.  UNRESTRICTED GIFTS ARE USED TO SUPPORT BOTH OUR CLINICAL AND RESEARCH PROGRAMS, WITH 50% OF THE FUNDS GOING TO SUPPORT THE UN-REIMBURSED CLINICAL CARE OF CHILDREN AND ADULTS WITH DIABETES, AND 50% DEDICATED TO BASIC AND TRANSLATIONAL RESEARCH PROGRAMS AIMED AT ULTIMATELY CURING DIABETES.	Ş	100

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# FEDERAL STATEMENTS

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**CLIENT KELLYFON** 

### **BRIAN & JOELLE KELLY FAMILY FOUNDATION**

26-6139249

7/13/10

05.57PM

STATEMENT 9 (CONTINUED)	
FORM 990-PF, PART XV, LINE 3A	
RECIPIENT PAID DURING THE YEAR	

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	 AMOUNT
BIG BROTHERS BIG SISTERS 174 MAIN STREET EATONTOWN, NJ 07724	NONE		ALL BIG BROTHERS BIG SISTERS ORGANIZATIONS SHARE ONE MISSION: TO HELP AT-RISK YOUNG PEOPLE ACHIEVE THEIR FULL POTENTIAL THROUGH PROFESSIONALLY SUPPORTED ONE-TO-ONE MENTORING WITH MEASURABLE OUTCOMES.	\$ 50
KENMARE HIGH SCHOOL 89 YORK STREET JERSEY CITY, NJ 07302	NONE		EDUCATION AND SCHOLARSHIP	200.
NYPD GAELIC FOOTBALL CLUB MANHATTAN COLLEGE BRONX, NY 10475	NONE		THE NYPD GAELIC FOOTBALL CLUB IS A NONPROFIT ORGANIZATION. WE MAKE ANNUAL CONTRIBUTIONS TO SEVERAL OTHER CHARITIES INCLUDING PROJECT CHILDREN, THE PBA WIDOWS AND CHILDREN FUND, AND THE DAMIAN MEEHAN FOUNDATION.	1,000
CATHEDRAL OF SAINT PATRICK 460 MADISON AVENUE NEW YORK, NY 10022	NONE		TO HELP PRESERVE THE CATHEDRAL FOR FUTURE GENERATIONS AND TO SUPPORT CATHEDRAL'S MANY ACTIVITIES INCLUDING DIABETES AWARNESS EVENTS THAT ARE SCHEDULED THROUGHOUT THE YEAR.	100.

# **FEDERAL STATEMENTS**

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**CLIENT KELLYFON** 

### **BRIAN & JOELLE KELLY FAMILY FOUNDATION**

26-6139249

7/13/10

05 57PM

STATEMENT 9 (CONTINUED)
FORM 990-PF, PART XV, LINE 3A
RECIPIENT PAID DURING THE YEAR

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	 AMOUNT
RESERVE AID , INC. PO BOX 803451 DALLAS, TX 75380	NONE		RESERVE AID IS A 501 (C) (3) NONPROFIT ORGANIZATION COMMITTED TO PROVIDING FINANCIAL SUPPORT TO THE FAMILIES OF RESERVE SERVICE MEMBERS FROM ALL SERVICES, WHO HAVE BEEN CALLED TO ACTIVE DUTY AND ARE EXPERIENCING FINANCIAL DIFFICULTY.	\$ 15,000.
CHURCH OF ST. IGNATIUS LOYOLA 980 PARK AVENUE NEW YORK, NY 10028	NONE		OPERATING WITHIN THE FRAMEWORK OF IGNATIAN SPIRITUALITY AND THE JESUIT TRADITION, SEEK AND SHARED MINISTRY AS A TRUE COMMUNITY OF DISCIPLES, GATHERED IN PRAYER AND WORSHIP, SHARING THE UNIVERSAL CHURCH'S MISSION OF EVANGELIZATION AND SERVICE. TO CONDUCT AND ADDRESS SOCIAL AND HEALTH ACTIVITIES/ISSUE S IN THE COMMUNITY.	1,400.

# **FEDERAL STATEMENTS**

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**CLIENT KELLYFON** 

#### **BRIAN & JOELLE KELLY FAMILY FOUNDATION**

26-6139249

7/13/10

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NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	AMOUNT	
FORDHAM LAW SCHOOL 888 7TH AVENUE, 7TH FLOOR NEW YORK, NY 10102	NONE		ENABLE FORDHAM LAW SCHOOL TO SUPPORT MANY OF THE ACTIVITIES OF THE SCHOOL, INCLUDING: THE STUDENT JOURNALS, SCHOLARSHIPS, AND THE PUBLIC SERVICE ACTIVITIES. TO BRING PUBLIC AWARENESS TO SUITS LINK TO DIABETES AND ITS DRUGMAKERS.	\$ 1,00	00.
FRANCISCAN MISSION ASSOCIATES P.O. BOX 598 MOUNT VERNON, NY 10551	NONE		IT PROMOTES INFORMATION ABOUT AND INTEREST IN THE MISSIONARIES AND THEIR PEOPLE - PARTICULARLY IN THE FRANCISCAN MISSIONS OF CENTRAL AMERICA, BUT ALSO IN THE INNER CITIES OF THE UNITED STATES AND CANADA AS WELL AS EVERY CONTINENT IN THE WORLD. OUR MISSION IS: EXCELLENCE IN THE PROVISION OF HEALTHCARE THEIR FAMILY MEMBERS, NURSING ASSOCIATES, HOSPITAL ASSOCIATES.		50.

2009 FEDERAL STATEMENTS PAGE 8 **CLIENT KELLYFON BRIAN & JOELLE KELLY FAMILY FOUNDATION** 26-6139249 7/13/10 05:57PM STATEMENT 9 (CONTINUED) FORM 990-PF, PART XV, LINE 3A RECIPIENT PAID DURING THE YEAR FOUND-PURPOSE OF DONEE ATION **STATUS GRANT** AMOUNT NAME AND ADDRESS RELATIONSHIP FREEDOMWORKS 100. \$ FREEDOM WORKS NONE RECRUITS, 601 PENNSYLVANIA AVE NW, N BLDG, 700 EDUCATES, TRAINS AND MOBILIZES WASHINGTON, DC 20004 HUNDREDS OF THOUSANDS OF VOLUNTEER ACTIVISTS TO FIGHT FOR LESS GOVERNMENT, LOWER TAXES, AND MORE FREEDOM. SEEKING HEALTH CARE REFORMS AND PROMOTE LESS **GOVERNMENT** INTERVENTION.

# **FEDERAL STATEMENTS**

PAGE 9

**CLIENT KELLYFON** 

#### **BRIAN & JOELLE KELLY FAMILY FOUNDATION**

26-6139249

7/13/10

05·57PM

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	-	AMOUNT
HANCE FAMILY FOUNDATION P.O. BOX 20795 FLORAL PARK, NY 11002	NONE		THE HANCE FAMILY FOUNDATION HAS BEEN FOUNDED TO HONOR THE MEMORIES OF EMMA, ALYSON AND KATE HANCE, WHO DIED IN A TRAGIC CAR ACCIDENT ON JULY 26, 2009 AT AGES 8, 7 AND 5.  THE FUNDS RAISED FOR THIS FOUNDATION WILL BE USED TO SUPPORT CHILDREN'S ENDEAVORS, WITH AN INITIAL EMPHASIS ON SERVING THE CHILDREN OF THE VILLAGE OF FLORAL PARK. THE INTENTION OF THE FOUNDATION IS TO HONOR THE MEMORIES OF THESE EXTRAORDINARY GIRLS BY HELPING AS MANY CHILDREN AS POSSIBLE, IN AS MANY WAYS AS POSSIBLE.	\$	500.

# **FEDERAL STATEMENTS**

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**CLIENT KELLYFON** 

#### **BRIAN & JOELLE KELLY FAMILY FOUNDATION**

26-6139249

7/13/10

05 57PM

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	AM	OUNT
IMMACULATE CONCEPTION HIGH SCHOOL 33 COTTAGE PLACE MONTCLAIR, NJ 07042	NONE	·	GIFTS TO THE ANNUAL FUND COMPRISE OUR MOST SIGNIFICANT SOURCE OF SUPPORT AND ARE DIRECTED TO AREAS WITH THE GREATEST NEED AND GREATEST POTENTIAL FOR IMPACT, INCLUDING TUITION ASSISTANCE, TECHNOLOGICAL ADVANCEMENTS, FACULTY AND CURRICULUM DEVELOPMENT, AND FACILITY ENHANCEMENTS. TO HELP RAISE AWARENESS ABOUT JUVENILE DIABETES.	\$	500
JDRF, THE EASTMANS 110 RIVERSIDE DRIVE, APT 3A NEW YORK, NY 10024	NONE		JDRF CONTINUES TO MAKE PROGRESS TOWARD A CURE FOR TYPE 1 DIABETES. YOUR DONATION WILL MAKE A DRAMATIC IMPACT AS JDRF MOVES LIFE ALTERING RESEARCH OUT OF THE LAB AND INTO HUMAN CLINICAL TRIALS. TYPICALLY, MORE THAN 85 PERCENT OF JDRF'S EXPENDITURES DIRECTLY SUPPORT RESEARCH AND RESEARCH-RELATED EDUCATION.		500

# **FEDERAL STATEMENTS**

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**CLIENT KELLYFON** 

# **BRIAN & JOELLE KELLY FAMILY FOUNDATION**

26-6139249

7/13/10

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NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	. <u></u>	AMOUNT
JUVENILE DIABETES CURE ALLIANCE C/O 654 MADISON AVENUE, SUITE #1606 NEW YORK , NY 10065	NONE		THE ORGANIZATION IS DEDICATED TO FINDING A CURE FOR JUVENILE DIABETES. THE ORGANIZATION WILL ACHIEVE ITS EXEMPT PURPOSE THROUGH DEVELOPING INNOVATIVE IDEAS AND APPROACHES TO CHALLENGE AND FACILITATE THE RESEARCH COMMUNITY TO FIND A CURE FOR JUVENILE DIABETES. THESE APPROACHES WILL INCLUDE BUT NOT BE LIMITED TO (I) INTERNAL PROJECTS TO EVALUATE HOW JUVENILE DIABETES RESEARCH IS BEING CONDUCTED AND THE EFFECTIVENESS OF THE CURRENT RESEARCH APPROACH. (II) DEVELOP PROGRAMS TO EVALUATE AND IDENTIFY THE MOST PROMISING JUVENILE DIABETES RESEARCH PROJECTS, (III) DEVELOP PROGRAMS TO EVALUATE AND IDENTIFY THE MOST PROMISING JUVENILE DIABETES RESEARCH PROJECTS, (III) DEVELOP PROGRAMS TO MOBILIZE THOSE INTERESTED IN FINDING A CURE FOR JUVENILE DIABETES AS ONE UNIFIED VOICE AND ECONOMIC RESOURCE TO INFLUENCE JUVENILE DIABETES	\$	65,000

**FEDERAL STATEMENTS PAGE 12** 2009 **BRIAN & JOELLE KELLY FAMILY FOUNDATION CLIENT KELLYFON** 26-6139249 7/13/10 05 57PM STATEMENT 9 (CONTINUED) FORM 990-PF, PART XV, LINE 3A RECIPIENT PAID DURING THE YEAR FOUND-DONEE ATION PURPOSE OF RELATIONSHIP GRANT AMOUNT NAME AND ADDRESS **STATUS** RESEARCH FOR PROJECTS THAT SHOW THE GREATEST POTENTIAL FOR A CURE (IV) POSSIBLY PROVIDING GRANTS TO ORGANIZATIONS CONDUCTING RESEARCH AND **TESTING** DIRECTING TOWARD CURING DIABETES AND (II) POSSIBLY CREATING A PLATFORM TO FACILITATE THE DEVELOPMENT OF A **COOPERATIVE** COMMUNITY CENTERED AROUND THE NEED FOR A CURE FOR DIABETES. W ORANGE COUNCIL 5519 NONE OUR COUNCIL HAS 50. KNIGHTS OF COLUMBU P.O. BOX 3202 TCB WEST ORANGE , NJ 07052 RAISED FUNDS FOR CHARITABLE CAUSES AND DONATED MONEY AND SERVICE TO ORGANIZATIONS WITH NEED.

# **FEDERAL STATEMENTS**

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**CLIENT KELLYFON** 

#### **BRIAN & JOELLE KELLY FAMILY FOUNDATION**

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NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	AM	OUNT
LONG ISLAND ALZHEIMER'S FOUNDATION 5 CHANNEL DRIVE PORT WASHINGTON, NY	NONE		SUPPORT FAMILIES AND FRIENDS THROUGHOUT NASSAU, SUFFOLK, BROOKLYN AND QUEENS WITH HANDS-ON PROGRAMS AND SERVICES DIRECTLY WITH CLIENT AND CAREGIVER SUPPORT GROUPS, A SOCIAL MODEL ADULT DAY PROGRAM, COGNITIVE STIMULATION AND SOCIALIZATION PROGRAMS AND IN-HOME RESPITE, NEWSLETT ER, CONFERENCES, WORKSHOPS AND SPECIAL EVENTS. WE ARE HERE TO ANSWER YOUR QUESTIONS, PROVIDE GUIDANCE AS YOU COPE WITH DIAGNOSIS AND TREATMENT OF ALZHEIMER'S DISEASE, AND GIVE YOU REFERRALS TO THE SERVICES YOU NEED, WHETHER MEDICAL, LEGAL OR OTHER SERVICES REQUIRED.	\$	400.

# **FEDERAL STATEMENTS**

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**CLIENT KELLYFON** 

#### **BRIAN & JOELLE KELLY FAMILY FOUNDATION**

26-6139249

7/13/10

05 57PM

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	AM	OUNT
MARCH OF DIMES P.O. BOX 5041 WHITE PLAINS , NY 10602	NONE		OUR MISSION IS TO IMPROVE THE HEALTH OF BABIES BY PREVENTING BIRTH DEFECTS, PREMATURE BIRTH, AND INFANT MORTALITY. WE CARRY OUT THIS MISSION THROUGH RESEARCH, COMMUNITY SERVICES, EDUCATION AND ADVOCACY TO SAVE BABIES' LIVES. MARCH OF DIMES RESEARCHERS, VOLUNTEERS, EDUCATORS, OUTREACH WORKERS AND ADVOCATES WORK TOGETHER TO GIVE ALL BABIES A FIGHTING CHANCE AGAINST THE THREATS TO THEIR HEALTH: PREMATURITY, BIRTH DEFECTS, LOW BIRTHWEIGHT.	\$	20.
MARINE SGT. EDDIE RYAN 207 WINTISH ROAD ELLENVILLE, NY 12428	NONE		TO HELP, AID AND SUPPORT WOUNDED MARINE SGT. EDDIE RYAN TASK OF GETTING HIM BACK ON HIS FEET.		5,000.

# FEDERAL STATEMENTS

**PAGE 15** 

**CLIENT KELLYFON** 

#### **BRIAN & JOELLE KELLY FAMILY FOUNDATION**

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NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	AMOUN	<u>T</u>
MARK'S RUN DEVEL. OFFICE, PERKINS HOUSE 6101 WILSON LANE BETHESDA , MD	NONE		TO SUPPORT THE ETHICAL, INTELLECTUAL, PHYSICAL AND SOCIAL DEVELOPMENT OF BOYS. TO BUILD A STRONG SENSE OF PERSONAL HONOR AND RESPECT TO GUIDE AND ENRICH STUDENTS' LIVES AND TO PROVIDES A MODEL FOR DAILY ETHICAL CONDUCT. PROMOTE COMMUNITY ACTIVITIES SUCH AS SPOT BLOOD PRESSURE AND DIABETES SCREENINGS.	\$ 5,	000.
NATIONAL REVIEW INSTITUTE 233 PENNSYLVANIA AVENUE, SE 3RD FL WASHINGTON , DC 20003	NONE		TO CONTINUE THE LEGACY OF WILLIAM F. BUCKLEY JR. OF ADVANCE THE CONSERVATIVE PRINCIPLES THROUGH POLICY DEVELOPMENT, PUBLIC EDUCATION, AND ADVOCACY. TO SUPPORT MORE EDUCATIONAL PROGRAMS SUCH AS DIABAETE PREVENTION AND MANAGEMENT WITH LESS INTERVENTIONS.	1,	000.

# **FEDERAL STATEMENTS**

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**CLIENT KELLYFON** 

#### **BRIAN & JOELLE KELLY FAMILY FOUNDATION**

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NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	 AMOUNT
OUR LADY OF PEACE 237 EAST 62ND STREET NEW YORK , NY 10065	NONE		TO WORSHIP THAT MAINTAINS THE RICH TRADITIONS OF THE ROMAN CATHOLIC CHURCH. TO PROIVDE PEOPLE SEEKING INSPIRATION, COMFORT, OR TO PRAY. TO PROMOTE DIABETES AWARENESS AND PROVIDE SUPPORTS.	\$ 80.
SAINT BARNABAS MEDICAL CENTER FOUNDATION 94 OLD SHORT HILLS ROAD LIVINGSTON , NJ 07039	NONE		A CHARITABLE ORGANIZATION DEDICATED TO NURTURING PHILANTHROPIC SUPPORT FOR THE PROGRAMS AND SERVICES OF SAINT BARNABAS MEDICAL CENTER. THE PEDIATRIC SPECIALTY CENTER OF SAINT BARNABAS, LOCATED AT SAINT BARNABAS AMBULATORY CARE CENTER, OFFERS A WEALTH OF OUTSTANDING PEDIATRIC SPECIALTIES, ADVANCED TECHNOLOGIES AND A FULL SCOPE OF PROGRAMS AND SERVICES IN AN OUTPATIENT SETTING.	100.

# **FEDERAL STATEMENTS**

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**CLIENT KELLYFON** 

#### **BRIAN & JOELLE KELLY FAMILY FOUNDATION**

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NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	AMOUNT
SAINT IGNATIUS LOYOLA SCHOOL ANNUAL FUND 48 EAST 84TH STREET NEW YORK , NY 10028	NONE		TO HELP CONTINUES THE ORGANIZATION 'S LEGACY OF TRANSFORMING BOYS FROM ALL WALKS OF LIFE INTO MEN FOR OTHERS - IN THEIR FAMILIES, THEIR COMMUNITIES AND OUR WORLD. TO SUPPORT FUND RAISING AND OUT REACH EVENTS SUCH AS STEP UP TO FIGHT DIABETES.	\$ 500.
ST. CATHERINE'S - ST. MARGARET'S PARISH 215 ESSEX AVENUE SPRING LAKE , NJ 07762	NONE		WE, THE CATHOLIC COMMUNITY OF ST. CATHARINE - ST. MARGARET, GATHER IN CHRIST'S NAME TO NURTURE SPIRITUAL GROWTH THROUGH THE VARIOUS STAGES AND CHALLENGES OF LIFE. WE ARE COMMITTED - THROUGH LITURGY, SACRAMENTS AND PARISH ACTIVITIES - TO PROCLAIM THE MESSAGE OF THE GOSPEL, TO PROVIDE A QUALITY CATHOLIC EDUCATION FOR CHILDREN AND ADULTS, TO CONTINUE TO BUILD COMMUNITY AND TO SERVE THOSE IN NEED.	80.

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# **FEDERAL STATEMENTS**

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**CLIENT KELLYFON** 

#### **BRIAN & JOELLE KELLY FAMILY FOUNDATION**

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NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	 AMOUNT
ST. IGNATIUS LOYOLA DAY NURSERY 240 EAST 84 STREET NEW YORK, NY 10028	NONE		THE DAY NURSERY OFFERS A CHALLENGING PRESCHOOL PROGRAM THAT FOCUSES ON EACH CHILD'S UNIQUENESS AND THEIR SOCIAL, EMOTIONAL AND COGNITIVE GROWTH.	\$ 100.
ST. JUDE MEDAL & NOVENA FOLDER BOX 598 MT. VERNON , NY 10051	NONE		OUR MISSION IS TO COMMUNICATE THE WORD OF GOD THROUGH PREACHING, THEOLOGICAL EDUCATION, AND THE PROMOTION OF JUSTICE AND PEACE.	50.
ST. PATRICK'S OLD CATHEDRAL 200TH ANNIV 263 MULBERRY STREET NEW YORK , NY 10012	NONE		TO SUPPORT AND INVOLVE ALL PARISHONERS IN SOME FACET OF OUR CHURCH COMMUNITY BEYOND GATHERING FOR SUNDAY MASS. TO INITIATE NEW ACTIVITIES TO ENCOURAGE INTEGRALCOMMUNITY AND FAITH-BUILDING EVENTS INVOLVEMENT.	500.

# **FEDERAL STATEMENTS**

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**CLIENT KELLYFON** 

### **BRIAN & JOELLE KELLY FAMILY FOUNDATION**

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NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	A	MOUNT
STANFORD CANCER CENTER DEVELOP. OFFICE 2700 SAND HILL ROAD MENLO PARK , CA 94025	NONE		TO DEVELOP NEW THERAPIES, PREVENTION STRATEGIES AND METHODS OF EARLY DETECTION THAT REDUCE THE OCCURRENCE AND IMPACT OF CANCER. TO ADVANCE PROMISING NEW RESEARCH AND TREATMENT PROGRAMS, TRAIN FUTURE GENERATIONS OF PHYSICIANS AND SCIENTISTS, EXPAND VITAL SUPPORT SERVICES AND SHARE KNOWLEDGE WITH THE COMMUNITY.	\$	5,000.

# **FEDERAL STATEMENTS**

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**CLIENT KELLYFON** 

#### **BRIAN & JOELLE KELLY FAMILY FOUNDATION**

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NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	AMOUNT
TEMPLE B'NAI OR 60 OVERLOOK ROAD MORRISTOWN , NJ 07960	NONE		THE TEMPLE IS A MAJOR SUPPORTER OF THE LOCAL SOUP KITCHEN AND INTERFAITH COALITION FOR THE HOMELESS; HAS HOUSED THE FEDERATION'S PATHWAYS PROGRAM WHICH IS FOR INTERMARRIED FAMILIES WHO HAVE NOT IDENTIFIED WITH EITHER SPOUSES RELIGION; HOLDS AN ANNUAL "MITZVAH DAY," AND URGES ONE NIGHT OF HANUKKAH BE A NIGHT OF GIVING TO LOCAL CAUSES. THROUGH THE YEARS, TEMPLE HAS RECEIVED GRANTS FOR SPECIAL PROJECTS FOCUSING ON SENIORS AND THE ECOLOGY AND RECOGNITION FOR ITS DEVOTION TO INTERFAITH FAMILIES AND VICTIMS OF DOMESTIC ABUSE.	\$ 2,500
THE FRIEDMAN FOUNDATION FOR EDUCATIONAL ONE AMERICAN SQUARE, SUITE 2420 INDIANAPOLIS , IN 46282	NONE		TO ADVANCING MILTON AND ROSE FRIEDMAN'S VISION OF AN EDUCATION SYSTEM WHERE ALL PARENTS ARE FREE TO CHOOSE, BRING AN UNSURPASSED CLARITY OF PURPOSE TO THE EDUCATION REFORM DEBATE.	100

# **FEDERAL STATEMENTS**

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**CLIENT KELLYFON** 

#### **BRIAN & JOELLE KELLY FAMILY FOUNDATION**

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NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	 AMOUNT
THE FUND FOR AMERICAN STUDIES 1706 NEW HAMPSHIRE AVENUE, NW WASHINGTON , DC 20009	NONE		TWELVE INSTITUTES AROUND THE WORLD BRING COLLEGE STUDENTS TOGETHER FOR EDUCATIONAL PROGRAMS ENGAGING THEM IN A RIGOROUS EXAMINATION OF ECONOMIC CONCEPTS, POLITICAL SYSTEMS AND MORAL PHILOSOPHY.	\$ 200.
THE HERITAGE FOUNDATION 214 MASSACHUSETTS AVENUE, NE WASHINGTON , DC 20002	NONE		TO MAKE SIGNIFICANT PROGRESS IN IMPLEMENTING TRUE CONSUMER-CENTERE D AND PATIENT-CENTERED HEALTH REFORMS.	200.
THE LUSTGARTEN FOUNDATION 1111 STEWART AVENUE BETHPAGE , NY 11714	NONE		THE LUSTGARTEN FOUNDATION IS A NOT-FOR-PROFIT ORGANIZATION CREATED IN 1998 TO ADVANCE THE SCIENCE RELATED TO THE DIAGNOSIS, TREATMENT, CURE AND PREVENTION OF PANCREATIC CANCER.	500.

# FEDERAL STATEMENTS

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**CLIENT KELLYFON** 

#### **BRIAN & JOELLE KELLY FAMILY FOUNDATION**

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TOTAL \$ 107,130.

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NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	AMC	DUNT
YORKVILLE YOUTH ATHLETIC ASSOCIATION P.O. BOX 1556 NEW YORK , NY	NONE		THE YORKVILLE YOUTH ATHLETIC ASSOCIATION EXISTS TO SERVE THE CHILDREN OF NEW YORK CITY. TO SEEK AND TO TO ENCOURAGE POSITIVE ATTITUDES AND GROWTH THROUGH TEAMWORK AND SPORTSMANSHIP, ATTENDANCE, FAIR PLAY, RESPECT FOR ALL, HARD WORK, INTEGRITY AND FUN IN SPORTS, MUSIC AND DRAMA PROGRAMS, LEAGUES, AND CAMPS.	\$	250.

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

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

OMB No 1545-1709

Internal Revenue			► File a sepa	arate application for e	each return.					
If you are	e filing for an	Automatic 3-Monti	h Extension, com	plete only Part I and	check this box				► [X]	
-	-			Extension, complete		page 2 of the	s form).		لــا	
•	•	•	•	an automatic 3-mon	•		-	1 8868		
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•	-			itomatic 6-month exte				<del>-</del>		
All other corp income tax re		udıng 1120-C filers	s), partnerships, R	EMICS, and trusts m	ust use Form 70	004 to requesi	t an exter	nsion of tim	e to file	
returns noted the additiona Form 990-T	l below (6 mo: l (not automat Instead, you n	nths for a corporat	tion required to file ision or (2) you file illy completed and	Form 8868 if you wan e Form 990-T). Howev e Forms 990-BL, 6069 signed page 2 (Part s & Nonprofits	ver, you cannot or 8870, group	file Form 886 returns, or a	8 electror	nically if (1) ite or conso	you want lidated	
	Name of Exempt	Organization					Employer	identification n	umber	
Type or print										
print	BRIAN &	JOELLE KELLY	Y FAMILY FOU	JNDATION			26-6139249			
File by the due date for	Number, street, a	nd room or suite number	r If a P O box, see inst	ructions						
filing your return See	225 HIGH	WAY #35 1020	C							
instructions	City, town or post	office, state, and ZIP co	ode For a foreign addres	ss, see instructions		-				
	RED BANK	, NJ 07701								
Check type o	f return to be	filed (file a separa	ate application for	each return):						
Form 990	)	ſ	Form 990-T (co	orporation)		Form 472	720			
Form 990	-BL		Form 990-T (se	ection 401(a) or 408(a	) trust)	Form 522	7			
Form 990			Form 990-T (tr	ust other than above)		Form 606	9			
X Form 990	-PF		Form 1041-A			Form 887	0			
Telephone If the orga If this is for check this	No. ► 732- anization does or a Group Re	not have an office turn, enter the org If it is for part of t	e or place of busing	FAX No. ► 732- ness in the United Sta git Group Exemption this box ► and a	ites, check this l Number (GEN)	If				
			the for a corporatu	on required to file For	m 990 T) avtan	rion of time				
			-	nization return for the						
	<del></del>	ne organization's re		nzation retain for the	organization ne	irrica above				
	calendar year	•	cturrior.							
	tax year begin		20	and ending	, 20					
L)'	ax year begin	'''' <sup>'</sup> '	, 20,		· · · · 20   - ·	:				
2 If this ta	x year is for le	ess than 12 month	ns, check reason:	Initial return	Final retui	rn CI	nange in	accounting	period	
3a If this ap	oplication is fo ndable credits	r Form 990-BL, 99 See instructions	90-PF, 990-T, 4720	), or 6069, enter the t	entative tax, les	s any	3a \$		731.	
<b>b</b> If this apmade. In	pplication is fo iclude any pri	r Form 990-PF or or year overpayme	990-T, enter any i ent allowed as a c	refundable credits and redit	d estimated tax	payments	3ь\$		3,195.	
	with FTD coup			payment with this form Electronic Federal Ta			3c \$		0.	
aution. If you ayment instru	u are going to uctions.	make an electron	nic fund withdrawa	with this Form 8868	see Form 8453	I-EO and Forr	n 8879-E	O for		
BAA For Priv	acy Act and P	aperwork Reducti	ion Act Notice, se	e instructions.			For	m <b>8868</b> (Re	v. 4-2009)	