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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

2009

Department of the Treasury  
Internal Revenue Service

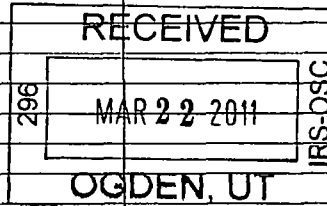
Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements.

For calendar year 2009, or tax year beginning APR 1, 2009, and ending MAR 31, 2010

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

|                                                                                                         |                                                                                                                                                                                                                                                  |                                                                                                                                           |                                                                                                                                                                             |
|---------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Use the IRS label. Otherwise, print or type See Specific Instructions                                   | Name of foundation<br><b>J. FLETCHER CREAMER FOUNDATION</b>                                                                                                                                                                                      |                                                                                                                                           | A Employer identification number<br><b>22-2335557</b>                                                                                                                       |
|                                                                                                         | Number and street (or P.O. box number if mail is not delivered to street address)<br><b>101 EAST BROADWAY</b>                                                                                                                                    |                                                                                                                                           | B Telephone number<br><b>(201) 488-9800</b>                                                                                                                                 |
|                                                                                                         | City or town, state, and ZIP code<br><b>HACKENSACK, NJ 07601</b>                                                                                                                                                                                 |                                                                                                                                           | C If exemption application is pending check here <input type="checkbox"/>                                                                                                   |
|                                                                                                         | H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation<br><input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation |                                                                                                                                           | D 1. Foreign organizations, check here <input type="checkbox"/><br>2. Foreign organizations meeting the 85% test check here and attach computation <input type="checkbox"/> |
| I Fair market value of all assets at end of year (from Part II, col (c), line 16)<br><b>\$ 702,898.</b> |                                                                                                                                                                                                                                                  | J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual<br><input type="checkbox"/> Other (specify) | E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>                                                               |
|                                                                                                         |                                                                                                                                                                                                                                                  |                                                                                                                                           | F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>                                                            |

| Part I Analysis of Revenue and Expenses<br>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) |                                                                                     | (a) Revenue and expenses per books | (b) Net investment income | (c) Adjusted net income | (d) Disbursements for charitable purposes (cash basis only) |
|----------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|------------------------------------|---------------------------|-------------------------|-------------------------------------------------------------|
| Revenue                                                                                                                                            | 1 Contributions, gifts, grants, etc., received                                      | 200,000.                           |                           |                         |                                                             |
|                                                                                                                                                    | 2 Check <input type="checkbox"/> if the foundation is not required to attach Sch. B |                                    |                           |                         |                                                             |
|                                                                                                                                                    | 3 Interest on savings and temporary cash investments                                | 21,750.                            | 21,750.                   |                         |                                                             |
|                                                                                                                                                    | 4 Dividends and interest from securities                                            | 4,368.                             | 4,368.                    |                         |                                                             |
|                                                                                                                                                    | 5a Gross rents                                                                      |                                    |                           |                         |                                                             |
|                                                                                                                                                    | b Net rental income or (loss)                                                       |                                    |                           |                         |                                                             |
|                                                                                                                                                    | 6a Net gain or (loss) from sale of assets not on line 10                            | -11,802.                           |                           |                         |                                                             |
|                                                                                                                                                    | b Gross sales price for all assets on line 6a                                       | 14,662.                            |                           |                         |                                                             |
|                                                                                                                                                    | 7 Capital gain net income (from Part IV, line 2)                                    |                                    | 0.                        |                         |                                                             |
|                                                                                                                                                    | 8 Net short-term capital gain                                                       |                                    |                           |                         |                                                             |
|                                                                                                                                                    | 9 Income modifications                                                              |                                    |                           |                         |                                                             |
|                                                                                                                                                    | 10a Gross sales less returns and allowances                                         |                                    |                           |                         |                                                             |
| b Less: Cost of goods sold                                                                                                                         |                                                                                     |                                    |                           |                         |                                                             |
| c Gross profit or (loss)                                                                                                                           |                                                                                     |                                    |                           |                         |                                                             |
| 11 Other income                                                                                                                                    | 912.                                                                                | 0.                                 | 0.                        | STATEMENT 1             |                                                             |
| 12 Total. Add lines 1 through 11                                                                                                                   | 215,228.                                                                            | 26,118.                            | 0.                        |                         |                                                             |
| Operating and Administrative Expenses                                                                                                              | 13 Compensation of officers, directors, trustees, etc.                              | 0.                                 | 0.                        | 0.                      | 0.                                                          |
|                                                                                                                                                    | 14 Other employee salaries and wages                                                |                                    |                           |                         |                                                             |
|                                                                                                                                                    | 15 Pension plans, employee benefits                                                 |                                    |                           |                         |                                                             |
|                                                                                                                                                    | 16a Legal fees                                                                      |                                    |                           |                         |                                                             |
|                                                                                                                                                    | b Accounting fees STMT 2                                                            | 1,560.                             | 780.                      | 0.                      | 780.                                                        |
|                                                                                                                                                    | c Other professional fees                                                           |                                    |                           |                         |                                                             |
|                                                                                                                                                    | 17 Interest                                                                         |                                    |                           |                         |                                                             |
|                                                                                                                                                    | 18 Taxes STMT 3                                                                     | 1,025.                             | 0.                        | 0.                      | 0.                                                          |
|                                                                                                                                                    | 19 Depreciation and depletion                                                       |                                    |                           |                         |                                                             |
|                                                                                                                                                    | 20 Occupancy                                                                        |                                    |                           |                         |                                                             |
|                                                                                                                                                    | 21 Travel, conferences, and meetings                                                |                                    |                           |                         |                                                             |
|                                                                                                                                                    | 22 Printing and publications                                                        |                                    |                           |                         |                                                             |
|                                                                                                                                                    | 23 Other expenses STMT 4                                                            | 187.                               | 162.                      | 0.                      | 25.                                                         |
|                                                                                                                                                    | 24 Total operating and administrative expenses. Add lines 13 through 23             | 2,772.                             | 942.                      | 0.                      | 805.                                                        |
|                                                                                                                                                    | 25 Contributions, gifts, grants paid                                                | 290,620.                           |                           |                         | 290,620.                                                    |
| 26 Total expenses and disbursements. Add lines 24 and 25                                                                                           | 293,392.                                                                            | 942.                               | 0.                        | 291,425.                |                                                             |
| 27 Subtract line 26 from line 12                                                                                                                   | -78,164.                                                                            |                                    |                           |                         |                                                             |
| a Excess or revenue over expenses and disbursements                                                                                                |                                                                                     | 25,176.                            |                           |                         |                                                             |
| b Net investment income (if negative, enter -0-)                                                                                                   |                                                                                     |                                    |                           |                         |                                                             |
| c Adjusted net income (if negative, enter -0-)                                                                                                     |                                                                                     |                                    | 0.                        |                         |                                                             |



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| Part II Balance Sheets      |                                                                                                                                        | Attached schedules and amounts in the description column should be for end-of-year amounts only |                |                       |
|-----------------------------|----------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------|----------------|-----------------------|
|                             |                                                                                                                                        | Beginning of year                                                                               | End of year    |                       |
|                             |                                                                                                                                        | (a) Book Value                                                                                  | (b) Book Value | (c) Fair Market Value |
| Assets                      | 1 Cash - non-interest-bearing                                                                                                          | 149,496.                                                                                        | 57,179.        | 57,179.               |
|                             | 2 Savings and temporary cash investments                                                                                               | 22,707.                                                                                         | 63,421.        | 63,421.               |
|                             | 3 Accounts receivable ▶                                                                                                                |                                                                                                 |                |                       |
|                             | Less: allowance for doubtful accounts ▶                                                                                                |                                                                                                 |                |                       |
|                             | 4 Pledges receivable ▶                                                                                                                 |                                                                                                 |                |                       |
|                             | Less: allowance for doubtful accounts ▶                                                                                                |                                                                                                 |                |                       |
|                             | 5 Grants receivable                                                                                                                    |                                                                                                 |                |                       |
|                             | 6 Receivables due from officers, directors, trustees, and other disqualified persons                                                   |                                                                                                 |                |                       |
|                             | 7 Other notes and loans receivable ▶                                                                                                   |                                                                                                 |                |                       |
|                             | Less: allowance for doubtful accounts ▶                                                                                                |                                                                                                 |                |                       |
|                             | 8 Inventories for sale or use                                                                                                          |                                                                                                 |                |                       |
|                             | 9 Prepaid expenses and deferred charges                                                                                                |                                                                                                 |                |                       |
|                             | 10a Investments - U.S. and state government obligations                                                                                |                                                                                                 |                |                       |
|                             | b Investments - corporate stock STMT 6                                                                                                 | 310,588.                                                                                        | 284,027.       | 425,158.              |
|                             | c Investments - corporate bonds STMT 7                                                                                                 | 150,727.                                                                                        | 150,727.       | 157,140.              |
| Liabilities                 | 11 Investments, land, buildings, and equipment basis ▶                                                                                 |                                                                                                 |                |                       |
|                             | Less: accumulated depreciation ▶                                                                                                       |                                                                                                 |                |                       |
|                             | 12 Investments - mortgage loans                                                                                                        |                                                                                                 |                |                       |
|                             | 13 Investments - other                                                                                                                 |                                                                                                 |                |                       |
|                             | 14 Land, buildings, and equipment, basis ▶                                                                                             |                                                                                                 |                |                       |
|                             | Less: accumulated depreciation ▶                                                                                                       |                                                                                                 |                |                       |
|                             | 15 Other assets (describe ▶)                                                                                                           |                                                                                                 |                |                       |
|                             | 16 Total assets (to be completed by all filers)                                                                                        | 633,518.                                                                                        | 555,354.       | 702,898.              |
|                             | 17 Accounts payable and accrued expenses                                                                                               |                                                                                                 |                |                       |
|                             | 18 Grants payable                                                                                                                      | 884,500.                                                                                        | 809,500.       |                       |
| Net Assets or Fund Balances | 19 Deferred revenue                                                                                                                    |                                                                                                 |                |                       |
|                             | 20 Loans from officers, directors, trustees, and other disqualified persons                                                            |                                                                                                 |                |                       |
|                             | 21 Mortgages and other notes payable                                                                                                   |                                                                                                 |                |                       |
|                             | 22 Other liabilities (describe ▶)                                                                                                      |                                                                                                 |                |                       |
|                             | 23 Total liabilities (add lines 17 through 22)                                                                                         | 884,500.                                                                                        | 809,500.       |                       |
|                             | Foundations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 24 through 28 and lines 30 and 31. |                                                                                                 |                |                       |
|                             | 24 Unrestricted                                                                                                                        | -250,982.                                                                                       | -254,146.      |                       |
|                             | 25 Temporarily restricted                                                                                                              |                                                                                                 |                |                       |
|                             | 26 Permanently restricted                                                                                                              |                                                                                                 |                |                       |
|                             | Foundations that do not follow SFAS 117, check here <input type="checkbox"/> 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                                                                       |                                                                                                 |                |                       |
|                             | 29 Retained earnings, accumulated income, endowment, or other funds                                                                    |                                                                                                 |                |                       |
|                             | 30 Total net assets or fund balances                                                                                                   | -250,982.                                                                                       | -254,146.      |                       |
|                             | 31 Total liabilities and net assets/fund balances                                                                                      | 633,518.                                                                                        | 555,354.       |                       |

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

|                                                                                                                                                                 |   |           |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------|---|-----------|
| 1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30<br>(must agree with end-of-year figure reported on prior year's return) | 1 | -250,982. |
| 2 Enter amount from Part I, line 27a                                                                                                                            | 2 | -78,164.  |
| 3 Other increases not included in line 2 (itemize) ▶ SEE STATEMENT 5                                                                                            | 3 | 75,000.   |
| 4 Add lines 1, 2, and 3                                                                                                                                         | 4 | -254,146. |
| 5 Decreases not included in line 2 (itemize) ▶                                                                                                                  | 5 | 0.        |
| 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30                                                         | 6 | -254,146. |

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

| (a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs MLC Co.) | (b) How acquired<br>P - Purchase<br>D - Donation | (c) Date acquired<br>(mo., day, yr.) | (d) Date sold<br>(mo., day, yr.) |
|-----------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------|--------------------------------------|----------------------------------|
| 1a 1,000 SHS CITIGROUP CAPITAL VIII                                                                                               | P                                                | 04/01/03                             | 07/14/09                         |
| b                                                                                                                                 |                                                  |                                      |                                  |
| c                                                                                                                                 |                                                  |                                      |                                  |
| d                                                                                                                                 |                                                  |                                      |                                  |
| e                                                                                                                                 |                                                  |                                      |                                  |

| (e) Gross sales price | (f) Depreciation allowed<br>(or allowable) | (g) Cost or other basis<br>plus expense of sale | (h) Gain or (loss)<br>(e) plus (f) minus (g) |
|-----------------------|--------------------------------------------|-------------------------------------------------|----------------------------------------------|
| a 14,662.             |                                            | 26,464.                                         | -11,802.                                     |
| b                     |                                            |                                                 |                                              |
| c                     |                                            |                                                 |                                              |
| d                     |                                            |                                                 |                                              |
| e                     |                                            |                                                 |                                              |

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

| (i) F M V. as of 12/31/69 | (j) Adjusted basis<br>as of 12/31/69 | (k) Excess of col. (i)<br>over col. (j), if any | (l) Gain (Col. (h) gain minus<br>col. (k), but not less than -0-) or<br>Losses (from col. (h)) |
|---------------------------|--------------------------------------|-------------------------------------------------|------------------------------------------------------------------------------------------------|
| a                         |                                      |                                                 | -11,802.                                                                                       |
| b                         |                                      |                                                 |                                                                                                |
| c                         |                                      |                                                 |                                                                                                |
| d                         |                                      |                                                 |                                                                                                |
| e                         |                                      |                                                 |                                                                                                |

|                                                                                 |                                                                                                                             |   |          |
|---------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------|---|----------|
| 2 Capital gain net income or (net capital loss)                                 | <div> <div>If gain, also enter in Part I, line 7</div> <div>If (loss), enter -0- in Part I, line 7</div> </div>             | 2 | -11,802. |
| 3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): | <div> <div>If gain, also enter in Part I, line 8, column (c)</div> <div>If (loss), enter -0- in Part I, line 8</div> </div> | 3 | N/A      |

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

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

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

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

☐ Yes ☒ No

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

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

| (a) Base period years<br>Calendar year (or tax year beginning in) | (b) Adjusted qualifying distributions | (c) Net value of noncharitable-use assets | (d) Distribution ratio<br>(col. (b) divided by col. (c)) |
|-------------------------------------------------------------------|---------------------------------------|-------------------------------------------|----------------------------------------------------------|
| 2008                                                              | 747,827.                              | 743,818.                                  | 1.005390                                                 |
| 2007                                                              | 835,596.                              | 747,957.                                  | 1.117171                                                 |
| 2006                                                              | 525,903.                              | 684,060.                                  | .768797                                                  |
| 2005                                                              | 621,117.                              | 872,771.                                  | .711661                                                  |
| 2004                                                              | 248,390.                              | 1,049,668.                                | .236637                                                  |

|                                                                                                                                                                                |   |          |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---|----------|
| 2 Total of line 1, column (d)                                                                                                                                                  | 2 | 3.839656 |
| 3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years | 3 | .767931  |
| 4 Enter the net value of noncharitable-use assets for 2009 from Part X, line 5                                                                                                 | 4 | 696,253. |
| 5 Multiply line 4 by line 3                                                                                                                                                    | 5 | 534,674. |
| 6 Enter 1% of net investment income (1% of Part I, line 27b)                                                                                                                   | 6 | 252.     |
| 7 Add lines 5 and 6                                                                                                                                                            | 7 | 534,926. |
| 8 Enter qualifying distributions from Part XII, line 4                                                                                                                         | 8 | 291,425. |

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

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

|    |                                                                                                                                                                                                                                    |    |      |
|----|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|------|
| 1a | Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1<br>Date of ruling or determination letter: _____ (attach copy of letter if necessary-see instructions) |    |      |
| b  | Domestic foundations that meet the section 4940(a) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b                                                                                    | 1  | 504. |
| 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  | 504. |
| 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  | 504. |
| 6  | Credits/Payments:                                                                                                                                                                                                                  |    |      |
| a  | 2009 estimated tax payments and 2008 overpayment credited to 2009                                                                                                                                                                  | 6a | 920. |
| b  | Exempt foreign organizations - tax withheld at source                                                                                                                                                                              | 6b |      |
| c  | Tax paid with application for extension of time to file (Form 8868)                                                                                                                                                                | 6c |      |
| d  | Backup withholding erroneously withheld                                                                                                                                                                                            | 6d |      |
| 7  | Total credits and payments. Add lines 6a through 6d                                                                                                                                                                                | 7  | 920. |
| 8  | Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached                                                                                                                  | 8  |      |
| 9  | Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed                                                                                                                                                      | 9  |      |
| 10 | Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid                                                                                                                                          | 10 | 416. |
| 11 | Enter the amount of line 10 to be credited to 2010 estimated tax                                                                                                                                                                   | 11 | 0.   |

**Part VII-A Statements Regarding Activities**

|                                                                                                                                                                                                                                                                                                                                           | Yes | No |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|
| 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?                                                                                                                                                                   |     | X  |
| 1b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?<br>If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities |     | X  |
| 1c Did the foundation file Form 1120-POL for this year?                                                                                                                                                                                                                                                                                   |     | X  |
| 2 Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:<br>(1) On the foundation <input type="checkbox"/> \$ 0. (2) On foundation managers <input type="checkbox"/> \$ 0.                                                                                                                    |     |    |
| e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers <input type="checkbox"/> \$ 0.                                                                                                                                                                     |     |    |
| 2 Has the foundation engaged in any activities that have not previously been reported to the IRS?<br>If "Yes," attach a detailed description of the activities.                                                                                                                                                                           |     | X  |
| 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                                                                                                              |     | X  |
| 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?                                                                                                                                                                                                                                            |     | X  |
| b If "Yes," has it filed a tax return on Form 990-T for this year?                                                                                                                                                                                                                                                                        |     |    |
| 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?<br>If "Yes," attach the statement required by General Instruction T                                                                                                                                                                      |     | X  |
| 6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:<br>• By language in the governing instrument, or<br>• 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?      | X   |    |
| 7 Did the foundation have at least \$5,000 in assets at any time during the year?<br>If "Yes," complete Part II, col. (c), and Part XV                                                                                                                                                                                                    | X   |    |
| 8a Enter the states to which the foundation reports or with which it is registered (see instructions) <input type="checkbox"/> NONE                                                                                                                                                                                                       |     |    |
| 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                                                                                                                             |     | X  |
| 9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," complete Part XIV                                                                                    |     | X  |
| 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses                                                                                                                                                                                                     |     | X  |

N/A

SEE STATEMENT 8

**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) |   | X |
| 12 | Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?                                                                   |   | X |
| 13 | Did the foundation comply with the public inspection requirements for its annual returns and exemption application?                                                                     | X |   |

Website address ► N/A

The books are in care of ► J. FLETCHER CREAMER FOUNDATION Telephone no ► 201-488-9800  
 Located at ► 101 EAST BROADWAY, HACKENSACK, NJ ZIP+4 ► 07601

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

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

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

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | Yes | No |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|
| 1a During the year did the foundation (either directly or indirectly)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |     |    |
| (1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                                                                                                                                                                                                                                                                                                                                                                                            |     |    |
| (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                                                                                                                                                                                                                                                                                                                                                                    |     |    |
| (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                                                                                                                                                                                                                                                                                                                                                                                        |     |    |
| (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                                                                                                                                                                                                                                                                                                                                                                                              |     |    |
| (5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                                                                                                                                                                                                                                                                                                                                     |     |    |
| (6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                                                                                                                                                                                                                                   |     |    |
| b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4947(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)? Organizations relying on a current notice regarding disaster assistance check here <input type="checkbox"/> N/A                                                                                                                                                                                                                 | 1b  |    |
| 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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                                                                                                                                                                                                                                                                                         | 1c  | X  |
| 2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))                                                                                                                                                                                                                                                                                                                                                                                       |     |    |
| a At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6a, Part XIII) for tax year(s) beginning before 2009? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>If "Yes," list the years ► _____                                                                                                                                                                                                                                                                                                           |     |    |
| b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                                                                                                                                                                       | 2b  |    |
| c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here<br>► _____                                                                                                                                                                                                                                                                                                                                                                                                                                          |     |    |
| 3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                                                                                                                                                                                                                                                                                                                                                     |     |    |
| b If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2009.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | 3b  |    |
| 4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                                                                                                                                                                                                                                                                                                                                                                | 4a  | X  |
| 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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                                                                                                                                                                                                                                               | 4b  | X  |

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

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

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?

☐ Yes ☒ No

(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?

☐ Yes ☒ No

(3) Provide a grant to an individual for travel, study, or other similar purposes?

☐ Yes ☒ No

(4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)?

☐ Yes ☒ No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?

☐ Yes ☒ No

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

N/A

5b

Organizations relying on a current notice regarding disaster assistance check here

☐

c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?

N/A

☐ Yes ☐ No

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

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

☐ Yes ☒ No

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

6b

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

X

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

☐ Yes ☒ No

b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?

N/A

7b

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

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

| (a) Name and address                                                  | (b) Title, and average hours per week devoted to position | (c) Compensation (If not paid, enter -0-) | (d) Contributions to employee benefit plans and deferred compensation | (e) Expense account, other allowances |
|-----------------------------------------------------------------------|-----------------------------------------------------------|-------------------------------------------|-----------------------------------------------------------------------|---------------------------------------|
| J. FLETCHER CREAMER<br>101 EAST BROADWAY<br>HACKENSACK, NJ 07601      | TRUSTEE P/T<br>0.00                                       | 0.                                        | 0.                                                                    | 0.                                    |
| J. FLETCHER CREAMER, JR.<br>101 EAST BROADWAY<br>HACKENSACK, NJ 07601 | TRUSTEE P/T<br>0.00                                       | 0.                                        | 0.                                                                    | 0.                                    |
| DALE A. CREAMER<br>101 EAST BROADWAY<br>HACKENSACK, NJ 07601          | TRUSTEE P/T<br>0.00                                       | 0.                                        | 0.                                                                    | 0.                                    |
|                                                                       |                                                           |                                           |                                                                       |                                       |
|                                                                       |                                                           |                                           |                                                                       |                                       |

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

| (a) Name and address of each employee paid more than \$50,000 | (b) Title, and average hours per week devoted to position | (c) Compensation | (d) Contributions to employee benefit plans and deferred compensation | (e) Expense account, other allowances |
|---------------------------------------------------------------|-----------------------------------------------------------|------------------|-----------------------------------------------------------------------|---------------------------------------|
| NONE                                                          |                                                           |                  |                                                                       |                                       |
|                                                               |                                                           |                  |                                                                       |                                       |
|                                                               |                                                           |                  |                                                                       |                                       |
|                                                               |                                                           |                  |                                                                       |                                       |
|                                                               |                                                           |                  |                                                                       |                                       |
|                                                               |                                                           |                  |                                                                       |                                       |

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

0

**Part VIII** Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**3** Five highest-paid independent contractors for professional services. If none, enter "NONE."

| (a) Name and address of each person paid more than \$50,000 | (b) Type of service | (c) Compensation |
|-------------------------------------------------------------|---------------------|------------------|
| NONE                                                        |                     |                  |
|                                                             |                     |                  |
|                                                             |                     |                  |
|                                                             |                     |                  |
|                                                             |                     |                  |
|                                                             |                     |                  |
|                                                             |                     |                  |
|                                                             |                     |                  |

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

0

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

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

|       | Expenses |
|-------|----------|
| 1 N/A |          |
|       |          |
| 2     |          |
|       |          |
| 3     |          |
|       |          |
| 4     |          |
|       |          |

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

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

|                                                         | Amount |
|---------------------------------------------------------|--------|
| 1 N/A                                                   |        |
|                                                         |        |
| 2                                                       |        |
|                                                         |        |
| All other program-related investments. See instructions |        |
| 3                                                       |        |
|                                                         |        |
| <b>Total.</b> Add lines 1 through 3                     | 0.     |

Form 990-PF (2009)

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

|   |                                                                                                             |    |          |
|---|-------------------------------------------------------------------------------------------------------------|----|----------|
| 1 | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: |    |          |
| a | Average monthly fair market value of securities                                                             | 1a | 575,697. |
| b | Average of monthly cash balances                                                                            | 1b | 131,159. |
| c | Fair market value of all other assets                                                                       | 1c |          |
| d | Total (add lines 1a, b, and c)                                                                              | 1d | 706,856. |
| e | Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)   | 1e | 0.       |
| 2 | Acquisition indebtedness applicable to line 1 assets                                                        | 2  | 0.       |
| 3 | Subtract line 2 from line 1d                                                                                | 3  | 706,856. |
| 4 | Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)   | 4  | 10,603.  |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4        | 5  | 696,253. |
| 6 | Minimum investment return. Enter 5% of line 5                                                               | 6  | 34,813.  |

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

|    |                                                                                                    |    |         |
|----|----------------------------------------------------------------------------------------------------|----|---------|
| 1  | Minimum investment return from Part X, line 6                                                      | 1  | 34,813. |
| 2a | Tax on investment income for 2009 from Part VI, line 5                                             | 2a | 504.    |
| b  | Income tax for 2009. (This does not include the tax from Part VI.)                                 | 2b |         |
| c  | Add lines 2a and 2b                                                                                | 2c | 504.    |
| 3  | Distributable amount before adjustments. Subtract line 2c from line 1                              | 3  | 34,309. |
| 4  | Recoveries of amounts treated as qualifying distributions                                          | 4  | 0.      |
| 5  | Add lines 3 and 4                                                                                  | 5  | 34,309. |
| 6  | Deduction from distributable amount (see instructions)                                             | 6  | 0.      |
| 7  | Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 | 7  | 34,309. |

**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 | 291,425. |
| b | Program-related investments - total from Part IX-B                                                                                | 1b | 0.       |
| 2 | Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes                         | 2  |          |
| 3 | Amounts set aside for specific charitable projects that satisfy the:                                                              |    |          |
| a | Suitability test (prior IRS approval required)                                                                                    | 3a |          |
| b | Cash distribution test (attach the required schedule)                                                                             | 3b |          |
| 4 | Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4                        | 4  | 291,425. |
| 5 | Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b | 5  | 0.       |
| 6 | Adjusted qualifying distributions. Subtract line 5 from line 4                                                                    | 6  | 291,425. |

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

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

|                                                                                                                                                                            | (a)<br>Corpus | (b)<br>Years prior to 2008 | (c)<br>2008 | (d)<br>2009 |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|----------------------------|-------------|-------------|
| 1 Distributable amount for 2009 from Part XI, line 7                                                                                                                       |               |                            |             | 34,309.     |
| 2 Undistributed income, if any, as of the end of 2009                                                                                                                      |               |                            |             |             |
| a Enter amount for 2008 only                                                                                                                                               |               |                            | 0.          |             |
| b Total for prior years                                                                                                                                                    |               | 0.                         |             |             |
| 3 Excess distributions carryover, if any, to 2009                                                                                                                          |               |                            |             |             |
| a From 2004                                                                                                                                                                | 199,141.      |                            |             |             |
| b From 2005                                                                                                                                                                | 577,814.      |                            |             |             |
| c From 2006                                                                                                                                                                | 493,014.      |                            |             |             |
| d From 2007                                                                                                                                                                | 798,626.      |                            |             |             |
| e From 2008                                                                                                                                                                | 712,432.      |                            |             |             |
| f Total of lines 3a through e                                                                                                                                              | 2,781,027.    |                            |             |             |
| 4 Qualifying distributions for 2009 from Part XII, line 4 ▶ \$                                                                                                             | 291,425.      |                            |             |             |
| a Applied to 2008, but not more than line 2a                                                                                                                               |               |                            | 0.          |             |
| b Applied to undistributed income of prior years (Election required - see instructions)                                                                                    |               | 0.                         |             |             |
| c Treated as distributions out of corpus (Election required - see instructions)                                                                                            | 0.            |                            |             |             |
| d Applied to 2009 distributable amount                                                                                                                                     |               |                            |             | 34,309.     |
| e Remaining amount distributed out of corpus                                                                                                                               | 257,116.      |                            |             |             |
| 5 Excess distributions carryover applied to 2009 (If an amount appears in column (d) the same amount must be shown in column (a))                                          | 0.            |                            |             | 0.          |
| 6 Enter the net total of each column as indicated below:                                                                                                                   |               |                            |             |             |
| a Corpus Add lines 3f, 4c, and 4e. Subtract line 5                                                                                                                         | 3,038,143.    |                            |             |             |
| b Prior years' undistributed income Subtract line 4b from line 2b                                                                                                          |               | 0.                         |             |             |
| c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed |               | 0.                         |             |             |
| d Subtract line 6c from line 6b. Taxable amount - see instructions                                                                                                         |               | 0.                         |             |             |
| e Undistributed income for 2008 Subtract line 4a from line 2a. Taxable amount - see instr.                                                                                 |               |                            | 0.          |             |
| f Undistributed income for 2009. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2010                                                              |               |                            |             | 0.          |
| 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3)                                                     | 0.            |                            |             |             |
| 8 Excess distributions carryover from 2004 not applied on line 5 or line 7                                                                                                 | 199,141.      |                            |             |             |
| 9 Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a                                                                                              | 2,839,002.    |                            |             |             |
| 10 Analysis of line 9.                                                                                                                                                     |               |                            |             |             |
| a Excess from 2005                                                                                                                                                         | 577,814.      |                            |             |             |
| b Excess from 2006                                                                                                                                                         | 493,014.      |                            |             |             |
| c Excess from 2007                                                                                                                                                         | 798,626.      |                            |             |             |
| d Excess from 2008                                                                                                                                                         | 712,432.      |                            |             |             |
| e Excess from 2009                                                                                                                                                         | 257,116.      |                            |             |             |



**Part XV** **Supplementary Information** (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

| Grants and Contributions Paid During the Year or Approved for Future Payment |                                     | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution | Amount        |
|------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------------------------------------------|--------------------------------|----------------------------------|---------------|
| Recipient                                                                    | Name and address (home or business) |                                                                                                           |                                |                                  |               |
| a Paid during the year                                                       |                                     |                                                                                                           |                                |                                  |               |
| SEE SCHEDULE ATTACHED                                                        |                                     | NONE                                                                                                      | N/A                            | CHARITABLE                       | 215,620.      |
| SEE SCHEDULE ATTACHED                                                        |                                     | NONE                                                                                                      | N/A                            | CHARITABLE                       | 75,000.       |
| Total                                                                        |                                     |                                                                                                           |                                |                                  | ▶ 3a 290,620. |
| b Approved for future payment                                                |                                     |                                                                                                           |                                |                                  |               |
| SEE SCHEDULE ATTACHED                                                        |                                     | NONE                                                                                                      | N/A                            | CHARITABLE                       | 809,500.      |
| Total                                                                        |                                     |                                                                                                           |                                |                                  | ▶ 3b 809,500. |



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

- |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |       |     |    |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|-----|----|
| <p><b>1</b> Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?</p> <p><b>a</b> Transfers from the reporting foundation to a noncharitable exempt organization of:</p> <p><b>(1)</b> Cash . . . . .</p> <p><b>(2)</b> Other assets . . . . .</p> <p><b>b</b> Other transactions:</p> <p><b>(1)</b> Sales of assets to a noncharitable exempt organization . . . . .</p> <p><b>(2)</b> Purchases of assets from a noncharitable exempt organization . . . . .</p> <p><b>(3)</b> Rental of facilities, equipment, or other assets . . . . .</p> <p><b>(4)</b> Reimbursement arrangements . . . . .</p> <p><b>(5)</b> Loans or loan guarantees . . . . .</p> <p><b>(6)</b> Performance of services or membership or fundraising solicitations . . . . .</p> <p><b>c</b> Sharing of facilities, equipment, mailing lists, other assets, or paid employees . . . . .</p> <p><b>d</b> If the answer to any of the above is "Yes," complete the following schedule. Column <b>(b)</b> should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column <b>(d)</b> the value of the goods, other assets, or services received.</p> |       | Yes | No |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |       |     |    |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 1a(1) |     | ✓  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 1a(2) |     | ✓  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 1b(1) |     | ✓  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 1b(2) |     | ✓  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 1b(3) |     | ✓  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 1b(4) |     | ✓  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 1b(5) |     | ✓  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 1b(6) |     | ✓  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 1c    |     | ✓  |

[illegible]

- 2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? . . . . . ☐ Yes ☒ No
- b** If "Yes," complete the following schedule.

| (a) Name of organization | (b) Type of organization | (c) Description of relationship |
|--------------------------|--------------------------|---------------------------------|
| N/A                      |                          |                                 |
|                          |                          |                                 |
|                          |                          |                                 |
|                          |                          |                                 |
|                          |                          |                                 |

**Sign Here** ☒ Robert J. Brown ☒ 3-16-11 **TRUSTEE**  
 Signature of officer or trustee Date Title

|                                       |                                                                 |                      |      |                                                 |      |
|---------------------------------------|-----------------------------------------------------------------|----------------------|------|-------------------------------------------------|------|
| <b>Paid<br/>Preparer<br/>Use Only</b> | Print preparer's name<br><b>LAWRENCE GRADZKI</b>                | Preparer's signature | Date | Check <input type="checkbox"/> if self-employed | PTIN |
|                                       | Firm's name ▶ <b>SAX MACY FROMM &amp; CO., PC</b>               |                      |      | Firm's EIN ▶                                    |      |
|                                       | Firm's address ▶ <b>855 VALLEY ROAD, CLIFTON, NJ 07013-2483</b> |                      |      | Phone no. <b>(973) 472-62</b>                   |      |

## Part XVII

**Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations**

- | 1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?                                                                                                                                                |  | Yes | No |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-----|----|
| <b>a Transfers from the reporting foundation to a noncharitable exempt organization of</b>                                                                                                                                                                                                                                                                                                           |  |     |    |
| (1) Cash                                                                                                                                                                                                                                                                                                                                                                                             |  |     | X  |
| (2) Other assets                                                                                                                                                                                                                                                                                                                                                                                     |  |     | X  |
| <b>b Other transactions:</b>                                                                                                                                                                                                                                                                                                                                                                         |  |     |    |
| (1) Sales of assets to a noncharitable exempt organization                                                                                                                                                                                                                                                                                                                                           |  |     | X  |
| (2) Purchases of assets from a noncharitable exempt organization                                                                                                                                                                                                                                                                                                                                     |  |     | X  |
| (3) Rental of facilities, equipment, or other assets                                                                                                                                                                                                                                                                                                                                                 |  |     | X  |
| (4) Reimbursement arrangements                                                                                                                                                                                                                                                                                                                                                                       |  |     | X  |
| (5) Loans or loan guarantees                                                                                                                                                                                                                                                                                                                                                                         |  |     | X  |
| (6) Performance of services or membership or fundraising solicitations                                                                                                                                                                                                                                                                                                                               |  |     | X  |
| <b>c Sharing of facilities, equipment, mailing lists, other assets, or paid employees</b>                                                                                                                                                                                                                                                                                                            |  |     | X  |
| <b>d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received</b> |  |     |    |

[illegible]

- 2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No
- b** If "Yes," complete the following schedule.

| (a) Name of organization | (b) Type of organization | (c) Description of relationship |
|--------------------------|--------------------------|---------------------------------|
| N/A                      |                          |                                 |
|                          |                          |                                 |
|                          |                          |                                 |
|                          |                          |                                 |
|                          |                          |                                 |

Under penalties of perjury, I declare that I have prepared this return including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge.

## PLEA

|                          |                                                                             |  |                               |  |                                                 |  |
|--------------------------|-----------------------------------------------------------------------------|--|-------------------------------|--|-------------------------------------------------|--|
| Sign Here                | Signature of officer or trustee <i>X [Signature]</i>                        |  | Date <i>X 7/12/10</i>         |  | Title <i>TRUSTEE</i>                            |  |
|                          | Preparer's signature <i>[Signature]</i>                                     |  | Date <i>7/8/10</i>            |  | Check if self-employed <input type="checkbox"/> |  |
| Paid Preparer's Use Only | Firm's name (or yours if self-employed) <i>SAX MACY FROMM &amp; CO., PC</i> |  | EIN <i>[Blank]</i>            |  | Preparer's identifying number                   |  |
|                          | address and ZIP code <i>855 VALLEY ROAD CLIFTON, NJ 07013-2483</i>          |  | Phone no. <i>973-472-6250</i> |  |                                                 |  |

**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

J. FLETCHER CREAMER FOUNDATION

22-2335557

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

☐ 501(c)( ) (enter number) organization

☐ 4947(a)(1) nonexempt charitable trust not treated as a private foundation

☐ 527 political organization

Form 990-PF

☒ 501(c)(3) exempt private foundation

☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation

☐ 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

**Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

**General Rule**

☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

**Special Rules**

☐ For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (i) \$5,000 or (ii) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II.

☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year. ▶ \$ \_\_\_\_\_

**Caution.** An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions  
for Form 990, 990-EZ, or 990-PF.

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

Name of organization

Employer identification number

J. FLETCHER CREAMER FOUNDATION

22-2335557

**Part I Contributors** (see instructions)

| (a)<br>No. | (b)<br>Name, address, and ZIP + 4                                            | (c)<br>Aggregate contributions | (d)<br>Type of contribution                                                                                                                                                 |
|------------|------------------------------------------------------------------------------|--------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1          | J. FLETCHER CREAMER & SON, INC.<br>101 EAST BROADWAY<br>HACKENSACK, NJ 07601 | \$ 200,000.                    | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II if there is a noncash contribution) |
|            |                                                                              |                                | Person <input type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II if there is a noncash contribution)            |
|            |                                                                              |                                | Person <input type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II if there is a noncash contribution)            |
|            |                                                                              |                                | Person <input type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II if there is a noncash contribution)            |
|            |                                                                              |                                | Person <input type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II if there is a noncash contribution)            |
|            |                                                                              |                                | Person <input type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II if there is a noncash contribution)            |
|            |                                                                              |                                | Person <input type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II if there is a noncash contribution)            |

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|-------------|--------------|-----------|---|
| FORM 990-PF | OTHER INCOME | STATEMENT | 1 |
|-------------|--------------|-----------|---|

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| DESCRIPTION                           | (A)<br>REVENUE<br>PER BOOKS | (B)<br>NET INVEST-<br>MENT INCOME | (C)<br>ADJUSTED<br>NET INCOME |
|---------------------------------------|-----------------------------|-----------------------------------|-------------------------------|
| FEDERAL EXCISE TAX REFUND             | 912.                        | 0.                                |                               |
| TOTAL TO FORM 990-PF, PART I, LINE 11 | 912.                        | 0.                                |                               |

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|-------------|-----------------|-----------|---|
| FORM 990-PF | ACCOUNTING FEES | STATEMENT | 2 |
|-------------|-----------------|-----------|---|

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| DESCRIPTION                  | (A)<br>EXPENSES<br>PER BOOKS | (B)<br>NET INVEST-<br>MENT INCOME | (C)<br>ADJUSTED<br>NET INCOME | (D)<br>CHARITABLE<br>PURPOSES |
|------------------------------|------------------------------|-----------------------------------|-------------------------------|-------------------------------|
|                              | 1,560.                       | 780.                              | 0.                            | 780.                          |
| TO FORM 990-PF, PG 1, LN 16B | 1,560.                       | 780.                              | 0.                            | 780.                          |

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|-------------|-------|-----------|---|
| FORM 990-PF | TAXES | STATEMENT | 3 |
|-------------|-------|-----------|---|

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| DESCRIPTION                 | (A)<br>EXPENSES<br>PER BOOKS | (B)<br>NET INVEST-<br>MENT INCOME | (C)<br>ADJUSTED<br>NET INCOME | (D)<br>CHARITABLE<br>PURPOSES |
|-----------------------------|------------------------------|-----------------------------------|-------------------------------|-------------------------------|
| FEDERAL EXCISE TAX          | 1,025.                       | 0.                                | 0.                            | 0.                            |
| TO FORM 990-PF, PG 1, LN 18 | 1,025.                       | 0.                                | 0.                            | 0.                            |

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|-------------|----------------|-----------|---|
| FORM 990-PF | OTHER EXPENSES | STATEMENT | 4 |
|-------------|----------------|-----------|---|

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| DESCRIPTION                 | (A)<br>EXPENSES<br>PER BOOKS | (B)<br>NET INVEST-<br>MENT INCOME | (C)<br>ADJUSTED<br>NET INCOME | (D)<br>CHARITABLE<br>PURPOSES |
|-----------------------------|------------------------------|-----------------------------------|-------------------------------|-------------------------------|
| NJ FILING FEES              | 25.                          | 0.                                | 0.                            | 25.                           |
| BANK SERVICE CHARGES        | 65.                          | 65.                               | 0.                            | 0.                            |
| INVESTMENT FEES             | 97.                          | 97.                               | 0.                            | 0.                            |
| TO FORM 990-PF, PG 1, LN 23 | 187.                         | 162.                              | 0.                            | 25.                           |

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|             |                                                |           |   |
|-------------|------------------------------------------------|-----------|---|
| FORM 990-PF | OTHER INCREASES IN NET ASSETS OR FUND BALANCES | STATEMENT | 5 |
|-------------|------------------------------------------------|-----------|---|

| DESCRIPTION                                        | AMOUNT  |
|----------------------------------------------------|---------|
| CURRENT FISCAL YEAR APPROVED FUTURE GRANT PAYMENTS | 75,000. |
| TOTAL TO FORM 990-PF, PART III, LINE 3             | 75,000. |

|             |                 |           |   |
|-------------|-----------------|-----------|---|
| FORM 990-PF | CORPORATE STOCK | STATEMENT | 6 |
|-------------|-----------------|-----------|---|

| DESCRIPTION                             | BOOK VALUE | FAIR MARKET VALUE |
|-----------------------------------------|------------|-------------------|
| EXXON MOBIL CORP                        | 29,885.    | 133,960.          |
| GENZYME CORP                            | 57,765.    | 103,660.          |
| BAC CAPITAL TRUST II                    | 27,044.    | 23,240.           |
| CITIGROUP CAPITAL VIII                  | 0.         | 0.                |
| MORGAN STANLEY CAP TR VII               | 92,500.    | 85,248.           |
| VIACOM SENIOR NOTES                     | 25,000.    | 24,970.           |
| WELLS FARGO CAP TR IV                   | 26,833.    | 25,190.           |
| FPL GROUP CAPITAL INC                   | 25,000.    | 28,890.           |
| TOTAL TO FORM 990-PF, PART II, LINE 10B | 284,027.   | 425,158.          |

|             |                 |           |   |
|-------------|-----------------|-----------|---|
| FORM 990-PF | CORPORATE BONDS | STATEMENT | 7 |
|-------------|-----------------|-----------|---|

| DESCRIPTION                             | BOOK VALUE | FAIR MARKET VALUE |
|-----------------------------------------|------------|-------------------|
| GENERAL ELECTRIC                        | 51,596.    | 52,647.           |
| HEWLETT-PACKARD CO                      | 49,131.    | 54,338.           |
| PSEG POWER LLC                          | 50,000.    | 50,155.           |
| TOTAL TO FORM 990-PF, PART II, LINE 10C | 150,727.   | 157,140.          |

|             |                                            |           |   |
|-------------|--------------------------------------------|-----------|---|
| FORM 990-PF | EXPLANATION CONCERNING PART VII-A, LINE 8B | STATEMENT | 8 |
|-------------|--------------------------------------------|-----------|---|

## EXPLANATION

THE STATE OF NEW JERSEY, NEW JERSEY OFFICE OF ATTORNEY GENERAL NO LONGER REQUIRES A FOUNDATION WHICH RECEIVED CHARITABLE CONTRIBUTION ONLY FROM THE FOUNDER AND RELATED ENTITIES TO REGISTER. THEREFORE NJ DOES NOT REQUIRE SUBMISSION OF THE FEDERAL FORM 990PF.

J Fletcher Creamer Foundation  
Contributions, Gifts, Grants Paid  
04/01/2009-03/31/2010

| Date       | Num  | Name                                      | Address                                   | City                     | State            | Zip Code   | Memo  |                              |
|------------|------|-------------------------------------------|-------------------------------------------|--------------------------|------------------|------------|-------|------------------------------|
| 04/02/2009 | 5255 | American Red Cross of Northern New Jersey | c/o Ana Oabronski                         | 209 Fairfield Road       | Fairfield        | NJ         | 07004 | Volunteer Disaster Respon    |
| 04/02/2009 | 5256 | The Gregory M. Hirsch Memorial Fund Inc   | c/o Fred hirsch                           | 304 Farnham Ave          | Lodi             | NJ         | 07644 | Education                    |
| 04/02/2009 | 5257 | Pony Power Therapies Inc                  | c/o Three Sisters Farm                    | 1170 Ramapo Valley Road  | Mahwah           | NJ         | 07430 | Children with Disabilities & |
| 04/06/2009 | 5258 | YCS Foundation                            | 235 Main Street 3rd FL                    | Hackensack               | NJ               | 07604      |       | Youth Consultation Servc     |
| 04/06/2009 | 5259 | March of Dimes                            | South Jersey Division                     | 3012 Main Street         | Voorhees         | NJ         | 08043 | March for Babies             |
| 04/06/2009 | 5261 | Friends of Anel                           | c/o Lisa Russo                            | 109 Eastern Way          | Rutherford       | NJ         | 07070 | Anel's cochlear implant      |
| 04/06/2009 | 5262 | Foundation for Free Enterprise            | South 61 Paramus Rd                       | Paramus                  | NJ               | 07652      |       | Education                    |
| 04/08/2009 | 5263 | The Little Orchestra Society              | 30 West 42nd St 12th FL                   | New York                 | NY               | 10036-6902 |       | Music Education & Public     |
| 04/08/2009 | 5264 | The Midland Foundation                    | Attn: Tom Vollers                         | P O BOX 5297             | North Branch     | NJ         | 08876 | Children with Disabilities   |
| 04/10/2009 | 5265 | Paisades Parks Conservancy                | Administration Building                   | Brear Mountain           | NY               | 10911-0427 |       | Community Parks              |
| 04/16/2009 | 5267 | Ridgewood YMCA                            | c/o Jennifer Botelli                      | 55 North Broad Street    | Ridgewood        | NJ         | 07450 | Child Development            |
| 04/20/2009 | 5260 | The 200 Club of Bergen County             | 560 Hudson Street                         | Hackensack               | NJ               | 07601      |       | Public Service Families      |
| 04/20/2009 | 5269 | Police Utility Tour Inc                   | P O BOX 528                               | Florham Park             | NJ               | 07932      |       | Law Enforcement Memon        |
| 04/20/2009 | 5270 | Joint Council #73 Scholarship Fund        | 150 Momss Ave Suite 204                   | Springfield              | NJ               | 07081      |       | Scholarships                 |
| 04/20/2009 | 5271 | Center for Food Action                    | c/o Nancy Sorrentino                      | 48 Carol Drive           | Englewood Cliffs | NJ         | 07632 | Feeding Homeless             |
| 04/20/2009 | 5272 | Fort Lee PBA # 245                        | c/o Fort Lee P D                          | 1327 16th Street         | Fort Lee         | NJ         | 07024 | Scholarships                 |
| 04/22/2009 | 5273 | Saint Cecilia Home and School Association | Attn: Julianne Law                        | 87 Halsey Avenue         | Rockaway         | NJ         | 07866 | Scholarship Fund             |
| 04/28/2009 | 5275 | Ralph A. Vuono Scholarship Fund           | Lyndhurst High School                     | 75 Union Avenue          | Rutherford       | NJ         | 07070 | Scholarships                 |
| 04/29/2009 | 5276 | The Newark Watershed Conservation & Dev   | 40 Clinton Street 4th Floor               | Newark                   | NJ               | 07102      |       | Environmental Awareness      |
| 05/05/2009 | 5277 | Hackensack F O P Lodge #16                | P O BOX 601                               | Hackensack               | NJ               | 07601      |       | Little League C.J. Fdnt. Sc  |
| 05/05/2009 | 5278 | MSAA                                      | MS Association of America                 | 706 Heddenfield Road     | Cherry Hill      | NJ         | 08002 | Multiple Sclerosis           |
| 05/05/2009 | 5279 | Columbia University Lung Transplant Resea | 100 Haven Avenue Suite 29-D               | New York                 | NY               | 10032      |       | Lung Transplant Research     |
| 05/05/2009 | 5280 | CSH Foundation                            | Children's Specialized Hospital Foundati  | 150 New Providence Road  | Mountainside     | NJ         | 07092 | Children's Rehab Healthr.    |
| 05/05/2009 | 5281 | Monmouth Council BSA                      | 705 Ginesi Drive                          | Morgenville              | NJ               | 07731      |       | Boy Scouts                   |
| 05/06/2009 | 5282 | West Bergen Mental Healthcare             | Attn: Carol Cohen                         | 120 Chestnut Street      | Ridgewood        | NJ         | 07450 | Health Care                  |
| 05/14/2009 | 5283 | Cystic Fibrosis Foundation                | 2 University Plaza Suite 312              | Hackensack               | NJ               | 07601      |       | Cystic Fibrosis              |
| 05/26/2009 | 5284 | UTCA/NJ                                   | P O Box 728                               | Allenwood                | NJ               | 08720      |       | Scholarship Fund             |
| 05/27/2009 | 5285 | The Billfish Foundation                   | 2161 E. Commercial Blvd - 2nd Fl          | FL Lauderdale            | FL               | 33308      |       | Education                    |
| 06/04/2009 | 5286 | Cusack Care Center                        | at St. Joseph Home For the Blind          | 537 Pavonia Avenue       | Jersey City      | NJ         | 07306 | Health Care                  |
| 06/08/2009 | 5288 | Hackensack University Medical Center Foun | 360 Essex Street, Suite 301               | Hackensack               | NJ               | 07601      |       | Health Care                  |
| 06/09/2009 | 5289 | Woodcliff Lake Fire Dept                  | 180 Pascack Rd.                           | Woodcliff Lake           | NJ               | 07677      |       | Scholarships                 |
| 06/09/2009 | 5290 | Holiday Express                           | 968 Shrewsbury Ave                        | Tinton Falls             | NJ               | 07724      |       | Education                    |
| 06/09/2009 | 5291 | St. Rocco Italian American Mutual Aid Soc | P O BOX 1736                              | Fort Lee                 | NJ               | 07024      |       | Community Needs              |
| 06/09/2009 | 5292 | Bergen LEADS Scholarship Fund             | Volunteer Center of B C                   | Hackensack               | NJ               | 07601      |       | Scholarships                 |
| 06/09/2009 | 5293 | PHI Community Foundation                  | Atlantic City Electric - Office of the Pr | 64 Passaic Street        | Hackensack       | NJ         | 07601 | Scholarships                 |
| 06/09/2009 | 5294 | The John Theurer Cancer Center @ HUMC     | 360 Essex St Suite 301                    | 5100 Harding Highway     | May's Landing    | NJ         | 08330 | Food Banks                   |
| 06/09/2009 | 5295 | Stevens Athletics                         | Anthony Brown                             | 1 Castle Point on Hudson | Hackensack       | NJ         | 07601 | Cancer Center                |
| 06/09/2009 | 5296 | The Leukemia & Lymphoma Society           | No NJ Chapter                             | 14 Commerce Drive        | Hoboken          | NJ         | 07030 | Student Athletics            |
| 06/22/2009 | 5297 | NJ Performing Arts Center                 | NIPAC Business Partners                   | 1 Center Street          | Cranford         | NJ         | 07016 | Leukemia & Lymphoma          |
| 06/22/2009 | 5298 | Hackensack University Medical Center Foun | 360 Essex Street Suite 301                | 1 Center Street          | Newark           | NJ         | 07102 | Performing Arts              |
| 07/09/2009 | 5299 | St. Vincent Hospital                      | 170 W 12th Street                         | Hackensack               | NJ               | 07601      |       | Scholarship - Everyone Ni    |
| 07/09/2009 | 5070 | Laborers Local 300 Scholarship Fund       | 515 Shatto Place                          | Crown Building 205       | New York         | NY         | 10011 | Void Ch 5070 1/15/08         |
|            |      |                                           |                                           |                          | Los Angeles      | CA         | 90020 | Scholarships                 |

J. Fletcher Creamer Foundation  
Contributions, Gifts, Grants Paid  
04/01/2009-03/31/2010

| Date       | Num  | Name                                       | Address                                             | City             | State | Zip Code   | Memo                       |
|------------|------|--------------------------------------------|-----------------------------------------------------|------------------|-------|------------|----------------------------|
| 07/16/2009 | 5300 | Alzheimer's Association                    | 400 Morris Avenue                                   | Denville         | NJ    | 07834      | Alzheimer's Research       |
| 07/20/2009 | 5301 | Arthritis Foundation                       | 200 Middlesex Turnpike                              | Iselin           | NJ    | 08830      | Arthritis Foundation       |
| 07/20/2009 | 5302 | American Heart Association Memorial        | 1 Union Street                                      | Robinsville      | NJ    | 08691      | Heart Assn                 |
| 07/22/2009 | 5303 | Troop "D" Blue and Gold                    | NJ State Police                                     | Cranbury         | NJ    | 08512      | NJ Special Olympics        |
| 07/30/2009 | 5304 | Friendly Sons of St. Patrick of the Jersey | P O Box 254                                         | Spinnng Lake     | NJ    | 07762      | Educational Grants         |
| 07/31/2009 | 5305 | RBC/Ned Robinson Memorial Fund             | P O Box 8431                                        | Red Bank         | NJ    | 07701      | Health Care                |
| 08/03/2009 | 5306 | Our Lady of Fatima Church                  | 82 Congress Street                                  | Newark           | NJ    | 07105      | Community Needs            |
| 08/04/2009 | 5307 | Embrace the Kids Foundation                | 121 Somerset Street                                 | New Brunswick    | NJ    | 08901      | Children with Cancer & E   |
| 08/04/2009 | 5308 | Contact We Care, Inc.                      | P O BOX 2376                                        | Westfield        | NJ    | 07091      | 24 Hr Crisis Hotline       |
| 08/13/2009 | 5309 | Cusack Care Center                         | at St. Joseph Home For the Blind                    | Jersey City      | NJ    | 07306      | Health Care                |
| 08/17/2009 | 5310 | The Arc of Bergen and Passaic Counties     | 223 Moore Street                                    | Hackensack       | NJ    | 07601      | Disabilities               |
| 08/17/2009 | 5311 | Ridgefield Park Elks                       | c/o Mike & Linda LeStrange                          | Paramus          | NJ    | 07652      | Handicapped Children &     |
| 08/17/2009 | 5312 | Merch of Dimes                             | South Jersey Division                               | Voorhees         | NJ    | 08043      | March for Babies           |
| 08/17/2009 | 5313 | Boy Scouts of America                      | 222 Columbia Turnpike                               | Florham Park     | NJ    | 07932      | Support                    |
| 08/26/2009 | 5314 | Valley Home Care Hospice Program           | The Kraft Center                                    | Paramus          | NJ    | 07652      | Home Health Program -      |
| 08/31/2009 | 5315 | Holiday Express                            | 968 Shrewsbury Ave                                  | Trinton Falls    | NJ    | 07724      | Education                  |
| 09/02/2009 | 5316 | Hudson Valley BSA                          | 6 Joanna Drive                                      | Newburgh         | NY    | 12550      | to support the Boys Scos   |
| 09/02/2009 | 5317 | Diocese of Meluchon / Flame of Chantry Di  | P O BOX 191                                         | Meluchon         | NJ    | 08840      | Catholic Chanties          |
| 09/02/2009 | 5318 | Hackensack University Medical Center Foun  | 360 Essex Street Suite 301                          | Hackensack       | NJ    | 07601      | Hospital                   |
| 09/02/2009 | 5320 | Toys for Tots Foundation                   | P O BOX 728                                         | Allenwood        | NJ    | 08720      | Toys for Needy             |
| 09/02/2009 | 5321 | The Molly Foundation                       | Attn Nick Minicico Jr                               | Allendale        | NJ    | 07401      | Diabetes                   |
| 09/08/2009 | 5323 | The 200 Club of Bergen County              | 560 Hudson Street                                   | Hackensack       | NJ    | 07601      | Public Service Families    |
| 09/08/2009 | 5324 | Juvenile Diabetes Research Foundation      | 120 Wall Street                                     | New York         | NY    | 10005-4001 | Juvenile Diabetes          |
| 09/08/2009 | 5325 | Police Chiefs Foundation of Rockland Coun  | P O BOX 664                                         | New City         | NY    | 10956      | Police Families            |
| 09/08/2009 | 5326 | Cosmos Club of Fair Lawn                   | 18-10 Fair Lawn Avenue                              | Fair Lawn        | NJ    | 07410      | Local Support              |
| 09/09/2009 | 5327 | D A R E New Jersey Inc                     | 292 Prospect Plains Road                            | Cranbury         | NJ    | 08512      | Drug & Violence Prevent    |
| 09/15/2009 | 5328 | St. Francis R C Church                     | 50 Lodi Street                                      | Hackensack       | NJ    | 07601      | Education                  |
| 09/15/2009 | 5329 | Pony Power Therapies Inc                   | c/o Three Sisters Farm                              | Mahwah           | NJ    | 07430      | Children with Disabilities |
| 09/15/2009 | 5330 | Bergen Community College-Women's Institut  | Cisco Learning Center                               | Hackensack       | NJ    | 07601      | Women's Institute          |
| 09/15/2009 | 5331 | Lakeland Bank Scholarship Golf Outing      | c/o Lenora McGure                                   | Oak Ridge        | NJ    | 07438      | College Scholarships       |
| 09/15/2009 | 5332 | St. Anthony's High School                  | 175 Eighth Avenue                                   | Jersey City      | NJ    | 07302      | Scholarship                |
| 09/15/2009 | 5333 | David S Zocchi Brain Tumor Center          | P O Box 508                                         | Sea Girt         | NJ    | 08750      | Brain Tumor                |
| 09/15/2009 | 5334 | Eva's Village                              | "Where Hope Begins" Headquarters                    | Scotch Plains    | NJ    | 07076      | Food for Homeless          |
| 09/15/2009 | 5335 | The 200 Club of Bergen County              | 560 Hudson Street                                   | Hackensack       | NJ    | 07601      | Public Service Families -  |
| 09/16/2009 | 5336 | BCC Foundation                             | 400 Paramus Rd - Scoskie Hall                       | Paramus          | NJ    | 07652-1595 | Scholarships               |
| 09/16/2009 | 5337 | Crusader Gndiron Club                      | c/o Matt Capuzzi                                    | Parsippany       | NJ    | 07054      | Child development          |
| 09/17/2009 | 5338 | Blythedale Children's Hospital             | Victoria Roach                                      | Yorktown Heights | NY    | 10598      | Children's Hospital        |
| 09/21/2009 | 5339 | Matheny Medical and Education Center       | 65 Highland Avenue                                  | Peapack          | NJ    | 07977      | Medical for people with C  |
| 09/21/2009 | 5340 | Boy Scouts of America                      | 222 Columbia Turnpike                               | Florham Park     | NJ    | 07932      | Support                    |
| 09/21/2009 | 5341 | Somerset Hills Handicapped Riding Center   | P O BOX                                             | Oldwick          | NJ    | 08856      | Handicap                   |
| 09/22/2009 | 5342 | HCST Foundation                            | 2000-85th Street                                    | North Bergen     | NJ    | 07047      | Education                  |
| 09/23/2009 | 5343 | The American Cancer Society                | P O BOX 22718                                       | Oklahoma City    | OK    | 73123-1718 | Breast Cancer walk 10/11   |
| 09/23/2009 | 5344 | Bergen Bike Tour                           | c/o Volunteer Center                                | Hackensack       | NJ    | 07601      | Childrens Fund             |
| 09/29/2009 | 5345 | Mahwah P B A Local 143                     | 115 Franklin Turnpike #140                          | Mahwah           | NJ    | 07430      | Police Families            |
| 09/29/2009 | 5346 | Shepherds of Youth Charitable Trust        | 90 Brooklake Road                                   | Florham Park     | NJ    | 07932      | Needy Youn                 |
| 09/30/2009 | 5347 | MMCF / Zocchi Brain Tumor Center           | The David S Zocchi Memorial Golf Outing P O BOX 508 | Sea Girt         | NJ    | 08750      | Brain Tumor Center         |
| 10/01/2009 | 5348 | Family of Loved Ones Magazine              | 310 Grant Ave                                       | Dumont           | NJ    | 07628      | Free Distrib of Magazine   |
| 10/08/2009 | 5349 | Gilda's Club Northern NJ                   | Attn Manssa Leonardi                                | Hackensack       | NJ    | 07601      | Cancer Families            |
| 10/08/2009 | 5350 | Central New Jersey Council BSA             | 2245 US Highway 130 Suite 106                       | Dayton           | NJ    | 08810-2420 | Boy Scouts                 |
| 10/14/2009 | 5351 | Paramus UNICO                              | P O BOX 595                                         | Paramus          | NJ    | 07652      | Educational                |

J Fletcher Creamer Foundation  
Contributions, Gifts, Grants Paid  
04/01/2009-03/31/2010

| Date       | Num  | Name                                      | Address                            | City            | State | Zip Code   | Memo                         |
|------------|------|-------------------------------------------|------------------------------------|-----------------|-------|------------|------------------------------|
| 10/19/2009 | 5353 | Troop "E" Golf Tournament                 | 300 Half Mile Road Suite 2         | Red Bank        | NJ    | 07701-5623 | Scouts                       |
| 10/27/2009 | 5354 | The Gregory M. Hirsch Memorial Fund Inc   | c/o Fred Hirsch                    | Lodi            | NJ    | 07644      | Education                    |
| 10/27/2009 | 5355 | BCC Foundation                            | 400 Paramus Rd - Scoskie Hall      | Paramus         | NJ    | 07652-1595 | Scholarships                 |
| 10/27/2009 | 5356 | Homes for Our Troops                      | c/o Knston Kosch                   | Mahwah          | NJ    | 07430      | Homes for Our Troops         |
| 10/29/2009 | 5357 | Boys & Girls Club of Clifton              | 822 Clifton Avenue                 | Clifton         | NJ    | 07015      | Boys & Girls Recreation      |
| 10/29/2009 | 5358 | Integrity House                           | Attn Susan Lyons                   | Newark          | NJ    | 07101      | Women & Children             |
| 11/06/2009 | 5359 | Project Literacy                          | 355 Main Street                    | Hackensack      | NJ    | 07601      | Literacy                     |
| 11/10/2009 | 5360 | St. Francis of Assisi Church & Friary     | 50 Lodi Street                     | Hackensack      | NJ    | 07601      | Friary & Church              |
| 11/10/2009 | 5361 | The Auxiliary of HUMC                     | c/o Ann Marie Saccaro              | Hackensack      | NJ    | 07601      | Holiday Brunch               |
| 11/24/2009 | 5362 | Integrity House                           | Attn Susan Lyons                   | Newark          | NJ    | 07101      | Education                    |
| 11/30/2009 | 5363 | Simon Youth Foundation                    | 225 West Washington St             | Indianapolis    | IN    | 46204      | Educational at risk Youth    |
| 11/30/2009 | 5364 | The Auxiliary of Hackensack University Me | C/O Mrs Patricia A. Ruggiero       | Paramus         | NJ    | 07652      | Holiday Decor Project 09     |
| 12/16/2009 | 5365 | Donald R. Waters Scholarship Foundation   | Rantan Center Plaza II             | Edison          | NJ    | 08837      | Scholarships                 |
| 12/23/2009 | 5366 | Whitney Weldon FOP Research Fund          | 3535 Market St Suite 750           | Philadelphia    | PA    | 19104-3309 | Fibrosyplasia Ossificans     |
| 12/31/2009 | 5367 | Hackensack University Medical Center Foun | 360 Essex Street Suite 301         | Hackensack      | NJ    | 07601      | Memorial Kathleen Kalaik     |
| 12/31/2009 | 5368 | American Heart Association                | 2550A U.S. Highway 1               | North Brunswick | NJ    | 08902      | Memorial Alfred Groffre      |
| 01/11/2010 | 5369 | McClusky Fund                             | c/o Tom Ieury                      | Rockaway        | NJ    | 07866      | Children's Education         |
| 01/18/2010 | 5370 | The John Theurer Cancer Center @ HUMC     | 360 Essex St Suite 301             | Hackensack      | NJ    | 07601      | Cancer Center                |
| 01/19/2010 | 5371 | ECLC of New Jersey                        | 302 North Franklin Turnpike        | Ho-Ho-Kus       | NJ    | 07423      | Learning Disabled            |
| 01/23/2010 | 5372 | ECLC of New Jersey                        | 302 North Franklin Turnpike        | Ho-Ho-Kus       | NJ    | 07423      | Learning Disabled            |
| 01/27/2010 | 5373 | St. Luke's Parish                         | 255 West Mill Road                 | Long Valley     | NJ    | 07853      | Community Needs              |
| 01/27/2010 | 5374 | Hunterdon Regional Cancer Center          | 2100 Westcott Drive                | Flemington      | NJ    | 08822      | Cancer                       |
| 01/28/2010 | 5375 | BCC Foundation                            | 400 Paramus Rd - Scoskie Hall      | Paramus         | NJ    | 07652-1595 | Scholarships                 |
| 02/02/2010 | 5376 | Ramsey Baseball Association               | C/O Sponsorship Program            | Ramsey          | NJ    | 07446      | Youth Baseball               |
| 02/02/2010 | 5377 | Friends Of Milton Capolo                  | 2628 Frederick Terrace             | Union           | NJ    | 07083      | Sick Soldier                 |
| 02/02/2010 | 5378 | Friendly Sons of St. Patrick of the Jerse | P.O. Box 254                       | Spring Lake     | NJ    | 07762      | Education Grants             |
| 02/04/2010 | 5380 | P.B.A. Local #1                           | P.O. BOX C                         | Paterson        | NJ    | 07509      | Police Families              |
| 02/04/2010 | 5381 | "WWTEF" Westwood Washington Twp Ed Fdn    | 345 Kinderkamack Road Suite H      | Westwood        | NJ    | 07675      | Education                    |
| 02/12/2010 | 5382 | Nottingham Little League                  | P.O. BOX 2521                      | Hemilton Square | NJ    | 08690      | Youth Baseball               |
| 02/12/2010 | 5383 | UNTAA - Upper Nazareth Athletic Assn      | c/o Brendon Rader                  | Nazareth        | PA    | 18064      | Youth Baseball               |
| 02/12/2010 | 5384 | Oasis - A Haven for Women and Children    | 59 Mill Street                     | Paterson        | NJ    | 07501      | Feed Protect Women & C       |
| 02/16/2010 | 5385 | WWTEF                                     | Westwood Washington Twp Ed Fd      | Westwood        | NJ    | 07675      | Education                    |
| 02/17/2010 | 5386 | Special Olympics - New Jersey             | Attn 2010 Polar Bear Plunge        | Lawrenceville   | NJ    | 08648      | Special Olympics             |
| 03/01/2010 | 5387 | Molly Foundation for Diabetes Research    | P.O. BOX 311                       | Allendale       | NJ    | 07401      | Diabetes Research            |
| 03/01/2010 | 5388 | HRPAC Inc                                 | Hudson Riverfront Perf Arts Center | Weehawken       | NJ    | 07086      | Performing Arts Center       |
| 03/01/2010 | 5389 | American Diabetes Association             | Center Point 11 Suite 103          | Englewood       | NJ    | 08807      | Diabetes                     |
| 03/01/2010 | 5390 | HUMC-Joseph M. Sanzani's Children's Hospi | c/o HUMC Foundation                | Hackensack      | NJ    | 07601      | Children's Hospital          |
| 03/01/2010 | 5391 | HUMC Foundation                           | 360 Essex Street                   | Hackensack      | NJ    | 07601      | Hospital                     |
| 03/04/2010 | 5392 | Boys' Towns of Italy Inc                  | 250 East 63rd Street               | New York        | NY    | 10065      | Homeless Youth               |
| 03/08/2010 | 5393 | Sis. Nicholas Constantine & Helen Bld Fd  | 510 Linden Place                   | Orange          | NJ    | 07050      | Community Church             |
| 03/09/2010 | 5395 | St. Rocco Italian American Mutual Aid Soc | P.O. BOX 1738                      | Fort Lee        | NJ    | 07024      | Community Needs              |
| 03/22/2010 | 5396 | American Cancer Society                   | 20 Mercer Street                   | Hackensack      | NJ    | 07601      | Cancer                       |
| 03/31/2010 | 5397 | The Gregory M. Hirsch Memorial Fund Inc   | c/o Fred Hirsch                    | Lodi            | NJ    | 07644      | Pediatric Heart Care & Re    |
| 03/31/2010 | 5398 | The 200 Club of Bergen County             | 560 Hudson Street                  | Hackensack      | NJ    | 07601      | Public Service Families      |
| 03/31/2010 | 5399 | Bergen County Golf Classic                | c/o Volunteer Center of BC         | Hackensack      | NJ    | 07601      | Volunteer Center of BC       |
| 03/31/2010 | 5400 | Pony Power Therapies Inc                  | c/o Three Sisters Farm             | Mahwah          | NJ    | 07430      | Children with Disabilities & |
| 03/31/2010 | 5401 | Girl Scouts of Northern New Jersey        | c/o Women of Achievement           | Riverdale       | NJ    | 07457      | Girl Scouts                  |
| 03/31/2010 | 5402 | Felician College                          | Founders Day Gate Event            | Lodi            | NJ    | 07644      | Education                    |

## Schedule 2

**J. Fletcher Creamer Foundation**  
**Grants Approved for Future Payment**  
**4/1/09 - 3/31/10**

22-2335557

PART 1, LINE 25, COLUMN A

\$ 215,620 00

Hackensack Health and Hospital Foundation  
 Sarkis Gabrellian Women's & Children's Pavilion Campaign  
 30 Prospect Avenue  
 Hackensack, NJ 07601

|                            |          |                |
|----------------------------|----------|----------------|
| Grant Payable Balance      | 03/31/07 | 990,000        |
| (Payable over three years) |          |                |
| Grant Paid                 | 12/21/07 | (330,000)      |
| Grant Paid                 | 12/15/08 | (330,000)      |
| Grant Payable 3/31/10      |          | <u>330,000</u> |

Holy Name Health Care Foundation  
 718 Teaneck Road  
 Teaneck, NJ 07666

|                                |          |                |        |
|--------------------------------|----------|----------------|--------|
| Grant Payable Balance          | 03/31/07 | 0              |        |
| Grant Payable over five years  | 04/01/07 | 1,000,000      |        |
| Grant Paid                     | 05/08/07 | (15,000)       |        |
| Grant Paid                     | 10/02/07 | (15,000)       |        |
| Grant Paid                     | 12/21/07 | (200,000)      |        |
| Grant Paid                     | 05/05/08 | (15,000)       |        |
| Grant Paid                     | 09/10/08 | (25,500)       |        |
| Grant Paid                     | 12/15/08 | (200,000)      |        |
| Grant Paid During Current Year | 06/08/09 | (15,000)       | 15,000 |
| Grant Paid During Current Year | 09/03/09 | (10,000)       | 10,000 |
| Grant Paid During Current Year | 10/19/09 | (25,000)       | 25,000 |
| Grant Payable 3/31/10          |          | <u>479,500</u> |        |

Villa Marie Claire Hospice Fund  
 718 Teaneck Road  
 Teaneck, NJ 07666

|                                |          |          |        |
|--------------------------------|----------|----------|--------|
| Grant Payable Balance          | 03/31/07 | 0        |        |
| Grant Payable over five years  | 01/01/08 | 50,000   |        |
| Grant Paid                     | 12/14/07 | (25,000) |        |
| Grant Paid During Current Year | 04/24/09 | (25,000) | 25,000 |
| Grant Payable 3/31/08          |          | <u>0</u> |        |

PART XV, LINE 3B, APPROVED FOR FUTURE PAYMENT

\$ 809,500.00

PART 1, LINE 25, COLUMN D

\$290,620