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Return of Private Foundation

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

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

OMB No 1545-0052

2010

Forc	ale	ndar year 2010, or tax year beginning	·	, and ending		
		k all that apply Initial return	Initial return of a fo	ormer public charity	Final retur	
u 0	1100	Amended return	Address chan	· ·	Name change	•
Nam	18 0	f foundation			A Employer identification	n number
		JOSEPH & ARLENE TAUB	 	· · · · · · · · · · · · · · · · · · ·	22-6104545	5
Num	ber a	and street (or P O box number if mail is not delivered to stree	•	Room/suite	B Telephone number	
-		C/O WISS & CO.LLP,354	EISENHOWER	PKWY	973-676-50	
		own, state, and ZIP code LIVINGSTON, NJ 07039			D 1. Foreign organization 2. Foreign organizations in	s, check here
H_C	•	k type of organization X Section 501(c)(3) e	• •		Foreign organizations m check here and attach co	omputation .
		ection 4947(a)(1) nonexempt charitable trust arket value of all assets at end of year J Account	Other taxable private foundating method: X Cash	Accrual	E If private foundation sta	
		· · · · · · · · · · · · · · · · · · ·	ther (specify)	Accidal	under section 507(b)(1	
<i>(nc</i>		15,718,074. (Part I, colu		basis.)	F If the foundation is in a under section 507(b)(1	
Pa		Analysis of Revenue and Expenses	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
1.0.00		(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	expenses per books	income	Income	for chantable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received	125,000.		N/A	(
	2	Check If the foundation is not required to attach Sch. B		***************************************		
	3	Interest on savings and temporary cash investments				***************************************
	4	Dividends and interest from securities	368,825.	368,825.		STATEMENT 1
	5a	Gross rents				
	b	Net rental Income or (loss)		~~~~**********************************	1.4	
<u>o</u>	6a	Net gain or (loss) from sale of assets not on line 10	341,335.	······		
eun	b	Gross sales price for all assets on line 6a 2,726,279.	· · · · · · · · · · · · · · · · · · ·	1	,	{
Revenue	7			341,335.		
_	[8-	Net short-term-capital-gam Income modifications	·· · · · · · · · · · · · · · · · · ·		 	HIII 'Introllementiilere en en en en en
2	9	Gross sales less returns		······		ļ
2011	10a (G	and allowances		<u>''''''''''''</u>		}
e	10			······································		
—ı l	Į C	h	607.	607.		STATEMENT 2
≥	10 10	Other income En UT	835,767.	710,767.		STATEMENT Z
A CR	13	Compensation of officers, directors, trustees, etc	0.	0.		0.
	14	Other employee salaries and wages				•
\overline{n}	15	Pension plans, employee benefits		· · · · · · · · · · · · · · · · · · ·		, .
NAME ON THE ON	16a	Legal fees STMT 3	30,000.	15,000.		15,000.
Ser	b	Accounting fees STMT 4	6,500.	3,250.		3,250.
<u> </u>	C	Other professional fees				
ا جِزراك	17	Interest				
tra	18	TaxesSTMT 5	16,697.	4,095.		6,602.
inis	19	Depreciation and depletion				
튀	20	Occupancy	6,840.	0.	·	6,840.
ΨP	21	Travel, conferences, and meetings				
a l	22	Printing and publications	07.061	07.061		
ting	23	Other expenses STMT 6	97,061.	97,061.		0.
SC/	24	Total operating and administrative	157,098.	119,406.		21 602
8	25	expenses. Add lines 13 through 23 Contributions, gifts, grants paid	717,725.	119,400.		31,692. 717,725.
- 1	26	Total expenses and disbursements.	11171230	***************************************		111,123.
		Add lines 24 and 25	874,823.	119,406.		749,417.
<u></u>	27	Subtract line 26 from line 12		<u> </u>		147/4110
Į.		Excess of revenue over expenses and disbursements	-39,056.	:		
		Net investment income (if negative, enter -0-)		591,361.	' · · · · · · · · · · · · · · · · · · ·	
	C	Adjusted net income (if negative, enter -0-)			N/A	<u> </u>
02350 ⁻ 12-07-		LHA For Paperwork Reduction Act Notice, see	the instructions.		A . C .	Form 990-PF (2010)

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P	art	Balance Sheets Column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
_			10,591.	71,481.	
	1	Cash - non-interest-bearing	64 220	/1,401	/1,401.
		Savings and temporary cash investments	64,339.	···········	,
	3	Accounts receivable 393,047.	705 005	222 245	200 245
		Less allowance for doubtful accounts	725,095.	393,047.	393,047.
	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	i		
	١.				
Assets	1	Inventories for sale or use	4,932.	 	
SS	1	Prepaid expenses and deferred charges	4,932.		
•	10a	Investments - U S and state government obligations	10 100 050	11 604 000	
	b	Investments - corporate stock STMT 8	12,193,850.	11,634,829.	
	C	Investments - corporate bonds	78,725.	305,250.	330,513.
	11	Investments - land, buildings, and equipment: basis			
		Less: accumulated depreciation			
	12	Investments - mortgage loans		. , <u>.</u> , <u> </u>	
	13	Investments - other			
	1	Land, buildings, and equipment basis			
	' -	Less. accumulated depreciation			†
	4.	Other assets (describe OTHER ASSETS	71,250.	70,327.	70,327.
	15	Other assets (describe - OTHER ADDLES	7172300	10,327.	10,321.
	l		12 140 702	12 474 024	15 710 074
	1	Total assets (to be completed by all filers)	13,140,702.	12,474,934.	15,718,074.
		Accounts payable and accrued expenses			
	18	Grants payable			_
es	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
ap	21	Mortgages and other notes payable			j
	22	Other liabilities (describe STATEMENT 10)	0.	1,065.	
	ĺ				
	23	Total liabilities (add lines 17 through 22)	0.	1,065.	
		Foundations that follow SFAS 117, check here		······································	
		and complete lines 24 through 26 and lines 30 and 31.			
ces	24	Lie readynated	13.148.782	12,473,869.	
	25	Temporarily restricted	20/210//021	12/1/0/005	
ğ	26				
Fund Balan	20	Permanently restricted			
ڄ		Foundations that do not follow SFAS 117, check here			
<u>-</u>		and complete lines 27 through 31.			
Net Assets or	27	Capital stock, trust principal, or current funds			
SSe	28	Paid-in or capital surplus, or land, bldg, and equipment fund		······································	
Ž	29	Retained earnings, accumulated income, endowment, or other funds			
ž	30	Total net assets or fund balances	13,148,782.	12,473,869.	
			1		
	31	Total liabilities and net assets/fund balances	13,148,782.	12,474,934.	
P	art	Analysis of Changes in Net Assets or Fund Ba		-	
-	Tota	I not accepte or fund halanges at hoggestes of year. Dod II column (a) line	20	· ·	-
1		I net assets or fund balances at beginning of year - Part II, column (a), line	30		12 140 702
_	-	st agree with end-of-year figure reported on prior year's return)	•	1	13,148,782.
		r amount from Part I, line 27a	•	. 2	-39,056.
		r increases not included in line 2 (itemize)	<u></u>		1 0.
		lines 1, 2, and 3		. 4	13,109,726.
		eases not included in line 2 (itemize) > BASIS ADJUSTME			635,857.
6_	Total	I net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	lumn (b), line 30 .		12,473,869.

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Part IV Capital Gains a	and Losses for lax on in	ivestmen	t income					<u> </u>
(a) List and descr 2-story brick wa	ribe the kınd(s) of property sold (e.g rehouse, or common stock, 200 shs	., real estate, MLC Co)		P -	ow acquired Purchase Donation	(c) Date (mo , c	acquired day, yr)	(d) Date sold (mo., day, yr.)
1a SANFORD C BERNS	STEIN & CO				P	02/0	9/10	09/10/10
b SANFORD C BERNS					P	12/0	1/09	11/15/10
c SANFORD C BERNS					P	VARI	OUS	VARIOUS
d SANFORD C BERNS					D	VARI	OUS	08/30/10
8								
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale				Gain or (loss is (f) minus	
a 65,781.			87 , 58					-21,803.
b 27,822.			32,93					-5,113.
c 1,851,686.			2,264,42	5.				-412,739.
d 780,990.								780,990.
е								
Complete only for assets showin	g gain in column (h) and owned by t						Col (h) gain	
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col (i) col (j), if any				not less that (from col. (h))
a								-21,803.
b								-5,113.
С				_				-412,739.
d								780,990.
е								
2 Capital gain net income or (net cap	pital loss) { If gain, also enter If (loss), enter -0-	in Part I, line in Part I, line	7 7	}	2		·	341,335.
3 Net short-term capital gain or (los if gain, also enter in Part I, line 8,		d (6)		}			NT / B	
Part V Qualification U	nder Section 4940(e) for	Dodugod	Toy on Not	1	3		N/A	
<u> </u>						come		
(For optional use by domestic private	Toundations subject to the section 4	1940(a) tax on	net investment ind	come)				
If section 4940(d)(2) applies, leave th	is part blank		~'					
Was the foundation liable for the secti	ion 4042 tay on the distributable am	ount of any ve	ar in the bace new	od2				Yes X No
If "Yes," the foundation does not quali			•	iou /	•		• • •	Yes A IND
	ach column for each year, see instru			s				····
(a)	(b)		, , , , , , , , , , , , , , , , , , , ,	(c)		1		(d) ution ratio
Base periód years Calendar year (or tax year beginnin	فحراب حالك أعيا مريح المحفودين المراق	ributions	Net value of non		able-use assets	.	Distrib (col (b) divi	ution ratio ided by col. (c))
2009	83	0,328.		14,	658,928			.056643
- 2008		7,952.			905,114			.062582
2007		3,029.			510,808		·	.029888
2006	96	3,723.			183,753			.056083
2005	56	6,554.		14,	613,418	3.	_	.038769
2 Total of line 1, column (d)						2		.243965
3 Average distribution ratio for the 5	-year base period - divide the total o	n line 2 by 5,	or by the number (of years	5			<u></u>
the foundation has been in existen	ce if less than 5 years					3		.048793
4 Enter the net value of noncharitable	e-use assets for 2010 from Part X, I	ine 5				4	15	5,383,328.
								<u> </u>
5 Multiply line 4 by line 3	-					5		750,599.
								·
6 Enter 1% of net investment incom	e (1% of Part I, line 27b)					6		5,914.
]		
7 Add lines 5 and 6						7		756,513.
8 Enter qualifying distributions from	Part XII, line 4	-				8		749,417.
If line Q is equal to as greater than	line 7, check the box in Part VI, line	1b. and comp	lete that part using	a 1% 1	tax rate			

Form	990-PF (2010) JOSEPH & ARLENE TAUB FOUNDATION 22-6104	545		Page 4
	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	instru	ctio	ns)
	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1			
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)			
	Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%	1	1,8	27.
	of Part I, line 27b			
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)			
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		<u>.</u>	0.
3	Add lines 1 and 2	1	1,8	27.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0.
	Tax based on investment income. Subtract line 4 from line 3. if zero or less, enter -0-	1	1,8	27.
6	Credits/Payments			
а	2010 estimated tax payments and 2009 overpayment credited to 2010			
b	Exempt foreign organizations - tax withheld at source			
C	Tax paid with application for extension of time to file (Form 8868) 6c 14,000.			
d	Backup withholding erroneously withheld	_		
7	Total credits and payments Add lines 6a through 6d	1	8,9	<u>35.</u>
8	Enter any penalty for underpayment of estimated tax. Check here. If Form 2220 is attached			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		<u>7,1</u>	08.
11	Enter the amount of line 10 to be Credited to 2011 estimated tax ▶ 7, 108. Refunded ▶ 11			0.
	rt VII-A Statements Regarding Activities	· · · · · · · · · · · · · · · · · · ·		т
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in		Yes	No
	any political campaign?	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?	1b	,,,,,,,, ,,	X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or			
	distributed by the foundation in connection with the activities.			l
	Did the foundation file Form 1120-POL for this year?	10		X
đ	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation \blacktriangleright \$ (2) On foundation managers \blacktriangleright \$			ľ
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			1
	managers ▶\$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
	If "Yes," attach a detailed description of the activities.			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or			· ·
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		<u> </u>
	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		x
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		<u> </u>
_	If-"Yes," attach the statement required by General Instruction T.			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
	By language in the governing instrument, or The state of the sta			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law		v	1
	remain in the governing instrument?	6	X	}
7	Did the foundation have at least \$5,000 in assets at any time during the year?	7	Α,	
	If "Yes," complete Part II, col. (c), and Part XV.			
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			
L	NJ, DE If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)			
D	of each state as required by General Instruction G? If "No," attach explanation	8b	X	1
•	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar	- Ju		
9	year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If "Yes," complete Part XIV	g		х
40	The state of the s	10		X
10		m 990	-PF	
	T VI		(,_0,0/

3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time

Form 4720, to determine if the foundation had excess business holdings in 2010.)

had not been removed from jeopardy before the first day of the tax year beginning in 2010?

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

b If "Yes," did it have excess business holdings in 2010 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,

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

Yes X No

N/A

3h

4a

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X

X

during the year?

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P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations	, 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	15,110,857.
	Average of monthly cash balances	1b	435,562.
	Fair market value of all other assets	1c	71,173.
d	Total (add lines 1a, b, and c)	1d	15,617,592.
e	Reduction claimed for blockage or other factors reported on lines 1a and		
_	1c (attach detailed explanation)		5
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	15,617,592.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	234,264.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	15,383,328.
6	Minimum investment return. Enter 5% of line 5	6	15,383,328. 769,166.
P	postributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations check here and do not complete this part.)	d certain	
1	Minimum investment return from Part X, line 6	1	769,166.
2a	Tax on investment income for 2010 from Part VI, line 5		
b	Income tax for 2010 (This does not include the tax from Part VI)		
C	Add lines 2a and 2b	2c	11,827. 757,339.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	757,339.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	757,339.
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	757,339.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		540 445
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	749,417.
þ	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:		
	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	749,417.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	ıncome Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	749,417.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation q	ualifies fo	or the section –

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4940(e) reduction of tax in those years

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2009	(c) 2009	(d) 2010
1 Distributable amount for 2010 from Part XI,	300			757 220
line 7		: .''.11''''::::-:::::::::::::::::::::::		757,339.
2 Undistributed income, if any, as of the end of 2010			671 556	
a Enter amount for 2009 only			671,556.	
b Total for prior years		^		
		0.	11////////////////////////////////////	71-1
3 Excess distributions carryover, if any, to 2010.		`		
a From 2005 .				
b From 2006				
c From 2007	`			
d From 2008				
e From 2009				· ·
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2010 from				
Part XII, line 4 ▶\$ 749,417.			671 556	
a Applied to 2009, but not more than line 2a			671,556.	**************************************
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 2010 distributable amount				77,861.
e Remaining amount distributed out of corpus	0.			
Excess distributions carryover applied to 2010 (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:		To an analysis of the second s		
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income Subtract				***************************************
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of				
deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b Taxable				······································
amount - see instructions		0.	`	
e Undistributed income for 2009 Subtract line				······································
4a from line 2a Taxable amount - see instr			0.	
f Undistributed income for 2010 Subtract				***************************************
lines 4d and 5 from line 1. This amount must				
be distributed in 2011				679,478.
7 Amounts treated as distributions out of				i in naminar into in in
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2005				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2011.				······································
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9				****************
a Excess from 2006			,	
b Excess from 2007				
c Excess from 2008				
d Excess from 2009				
e Excess from 2010				
0 EA0000 HOTH E0 10	<u>,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, </u>	 	· h · ·	Form 990-PF (2010)

			UB FOUNDATI		22-61	04545 Page 10
· · · · ·	art XIV Private Operating Fo			A, question 9)	N/A	
1 a	If the foundation has received a ruling or			.		
	foundation, and the ruling is effective for		=	··		40/1/51
	Check box to indicate whether the found		ig foundation described i		4942(j)(3) or 49	<u>42(j)(5)</u>
2 a	Enter the lesser of the adjusted net	Tax year	(h) 0000	Prior 3 years	(4) 2007	(a) Tatal
	income from Part I or the minimum	(a) 2010	(b) 2009	(c) 2008	(d) 2007	(e) Total
	investment return from Part X for					
	each year listed					
t	1 85% of line 2a					
0	: Qualifying distributions from Part XII,					
	line 4 for each year listed					
d	1 Amounts included in line 2c not					
	used directly for active conduct of					
	exempt activities				İ	
6	Qualifying distributions made directly					
	for active conduct of exempt activities					
	Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the					
•	alternative test relied upon "Assets" alternative test - enter					
٠	(1) Value of all assets				}	
	(2) Value of assets qualifying					
t	under section 4942(j)(3)(B)(i) "Endowment" alternative test - enter					
	2/3 of minimum investment return shown in Part X, line 6 for each year listed					
C	"Support" alternative test - enter					
	(1) Total support other than gross investment income (interest,					
	dividends, rents, payments on securities loans (section					
	(2) Support from general public					
	and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)		}			
	(3) Largest amount of support from					
	an exempt organization					
	(4) Gross investment income					
D:	art XV Supplementary Info	rmation (Comple	te this part only i	f the foundation	n had \$5 000 or mo	re in assets
	at any time during t			the roundation	111100 40,000 01 1110	70 III 433613
1	Information Regarding Foundation			-		
ä	List any managers of the foundation who	have contributed more f		butions received by the	e foundation before the clos	e of any tax
	year (but only if they have contributed m	ore than \$5,000). (See s	ection 507(d)(2))			
	SEPH TAUB	our 100/ or more of th	a stock of a paragration /	or an aqually large port	ion of the ownership of a ne	rtaarahin or
	 List any managers of the foundation who other entity) of which the foundation has 			or an eduany raids hou	ion of the ownership of a pa	เนเซเรเทม ()!
NO	ONE					
2	Information Regarding Contribution Check here X If the foundation of				not accept unsolicited reque	ests for funds If
	the foundation makes gifts, grants, etc. (see instructions) to indiv	iduals or organizations ur	nder other conditions, c	complete items 2a, b, c, and	d
ě	The name, address, and telephone numb	per of the person to whor	n applications should be a	addressed		
	The form in which applications should be	e submitted and informat	on and materials they sh	ould include.		
	Any submission deadlines		· · · · · ·			
	d Any restrictions or limitations on awards	, such as by geographica	Il areas, charitable fields, l	kinds of institutions, or	other factors	
0222	201 42 07 10			 	 · · · · · · · · · · · · · · · · · ·	orm QQQ_DE (2010)

Part XV Supplementary Information				
3 Grants and Contributions Paid During the	Year or Approved for Future I	Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid dunng the year SCHEDULE ATTACHED	NONE		CHARITABLE CONTRIBUTIONS	717,725.
Total		<u> </u>	► 3a	717,725.
NONE				
Total		<u> </u>	▶ 3h	0 -
intal			■ ?h	i U

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated	Unrelate	ed business income		ed by section 512, 513, or 514	(e)
1 Program service revenue.	(a) Business code	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income
-	- 0000		1	١ . ا	
a			1		
b	 		1		
			 		
d	,				
e			+		
g Fees and contracts from government agencies		<u> </u>			
2 Membership dues and assessments			1		
3 Interest on savings and temporary cash			1		
· · · · · · · · · · · · · · · · · · ·			14	27,419.	
Investments			14	27,419. 341,406.	
			1-1		
5 Net rental income or (loss) from real estate			1		.,
a Debt-financed property			+ +		
b Not debt-financed property		···	+	· 	
6 Net rental income or (loss) from personal					
property			14	607.	
7 Other investment income		<u> </u>	14	007.	
8 Gain or (loss) from sales of assets other			18	241 225	
than inventory			1 10	341,335.	
9 Net income or (loss) from special events					··
10 Gross profit or (loss) from sales of inventory			+ +	-	· · · · · · · · · · · · · · · · · · ·
11 Other revenue:					
a			+ +		
b			+ +		
C			 		
d			1		
e			1		
12 Subtotal Add columns (b), (d), and (e)		0.	•	710,767.	-10 -6-
13 Total. Add line 12, columns (b), (d), and (e)					710,767.
(See worksheet in line 13 instructions to verify calculations)	·				
(See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to	o the Acc	omplishment of E	xempt	Purposes	
Part XVI-B Relationship of Activities to					allah mant af
Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which incor	ne is reported	ın column (e) of Part XVI-			plishment of
Part XVI-B Relationship of Activities to	ne is reported	ın column (e) of Part XVI-			plishment of
Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which incor	ne is reported	ın column (e) of Part XVI-			plishment of
Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which incor	ne is reported	ın column (e) of Part XVI-			plishment of
Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which incor	ne is reported	ın column (e) of Part XVI-			plishment of
Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which incor	ne is reported	ın column (e) of Part XVI-			plishment of
Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which incor	ne is reported	ın column (e) of Part XVI-			plishment of
Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which incor	ne is reported	ın column (e) of Part XVI-			plishment of
Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which incor	ne is reported	ın column (e) of Part XVI-			plishment of
Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which incor	ne is reported	ın column (e) of Part XVI-			plishment of
Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which incor	ne is reported	ın column (e) of Part XVI-			plishment of
Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which incor	ne is reported	in column (e) of Part XVI-/			plishment of
Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which incor	ne is reported	ın column (e) of Part XVI-			plishment of
Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which incor	ne is reported	in column (e) of Part XVI-/			plishment of
Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which incor	ne is reported	in column (e) of Part XVI-/			plishment of
Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which incor	ne is reported	in column (e) of Part XVI-/			plishment of
Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which incor	ne is reported	in column (e) of Part XVI-/			plishment of
Line No. Explain below how each activity for which income	ne is reported	in column (e) of Part XVI-/			plishment of
Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which income	ne is reported	in column (e) of Part XVI-/			plishment of
Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which incor	ne is reported	in column (e) of Part XVI-/			plishment of
Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which incor	ne is reported	in column (e) of Part XVI-/			plishment of

				FOUNDATION		22-6104		Page 1
Part			sfers To	and Transactions	and Relationship	s With Nonchari	table	;
<u>,</u>	Exempt Organ		-445-4-11			F04/a) a4		Yes No
	d the organization directly or ind					50 I(C) 0I		Tes No
	e Code (other than section 501(o				IIIZations '			İ
	ansfers from the reporting found) Cash	iation to a noncharita	nie exempt oi	yanızanon or.			10/1	
	*						1a(1)	X
•	t) Other assets ther transactions:						1a(2)	
_) Sales of assets to a noncharita	ahle evemnt organizat	tion				16(1)	x
•	Purchases of assets from a no						1b(2)	X
•	Rental of facilities, equipment,		, gamzanon				1b(3)	X
•) Reimbursement arrangements						1b(4)	X
•) Loans or loan guarantees						1b(5)	X
•	Performance of services or m	embership or fundrais	sıng solicitatio	ons			1b(6)	X
•	, naring of facilities, equipment, ma	•	-				1c	X
	the answer to any of the above is	• .		• •	ways show the fair mark	et value of the goods, ot		
	services given by the reporting t	· ·	_			· · · · · · · · · · · · · · · · · ·		
CO	lumn (d) the value of the goods,	other assets, or serv	ices received.					
(a) Line i	no (b) Amount involved	(c) Name of	noncharitable	e exempt organization	(d) Description of t	ransfers, transactions, and sh	aring arri	angements
			N/A					
						· · · · · · · · · · · · · · · · · · ·		
						·····		
					 			
								
				····				
								
0- 10	the formulation discoult and a discoult	41 -41 -4 -4						
	the foundation directly or indirect				zations described		٦.,	[T F]
	section 501(c) of the Code (othe Yes," complete the following sch		(3)) or in seci	11011 527 ?		L] Yes	X No
וו ע	(a) Name of org			(b) Type of organization	(0)	Description of relationship		
	N/A	gumzunon		(b) Type of organization	(6)	rescription of relationship		
					- 			
						· · · · · · · · · · · · · · · · · · ·		
								
			-					
	Under penalties of perjury, I declar	e that I have examined the	is return, includi	ing accompanying schedules and	d statements, and to the bes	t of my knowledge and belief	, it is true	e, correct,
Sign	and complete Declaration of prepa	arer (other than taxpayer o	or ductionary) is ba	ased on all information of which p	preparer has any knowledge			•
Here	X Lorser	1 an		11-3	~ // ▶ PRES	S-DIRECTOR		
	Signature of officer or tri	ıstee		Date	Title			
	Print(Ty/pe preparer's na	ame	Preparer's si		Date Che	eck If PTIN		
			\ \(\)	// 1101	self	- employed		

Form **990-PF** (2010)

973-994-9400

Firm's EIN ▶

Phone no

Paid

Preparer

Use Only

KEVIN KERRIGAN

Firm's name ► WISS & COMPANY, LLP

Firm's address ▶ 354 EISENHOWER PARKWAY

LIVINGSTON, NJ 07039

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

Internal Revenue Service

or 990-PF)
Department of the Treasury

Schedule of Contributors

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

JOSEPH & ARLENE TAUB FOUNDATION

OMB No 1545-0047

2010

Name of the organization

Employer identification number

22-6104545

Organization type (check one): Filers of: Section: 501(c)() (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization 501(c)(3) exempt private foundation Form 990-PF 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 X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. **Special Rules** For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year. ▶ \$ Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF). but it must answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2010)

Name of organization

Employer identification number

JOSEPH & ARLENE TAUB FOUNDATION

22-6104545

Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	HENRY & MARILYN TAUB FOUNDATION 300 FRANK W. BURR BLVD. 7TH FL TEANECK, NJ 07077	\$125,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroli Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		 \$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Omnicash Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

of Part II

Name of organization

Employer identification number

JOSEPH & ARLENE TAUB FOUNDATION

22-6104545

art II	Noncash Property (see instructions)		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. rom	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. rom	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
			
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
			Į
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a)		(c)	
No. from Part I	(b) Description of noncash property given	FMV (or estimate) (see instructions)	(d) Date received
\longrightarrow	Annual Control of the	\$	 990, 990-EZ, or 990-PF) (2

FORM 990-PF DIVIDENT	DS AND	INTER	EST FROM	SECU	RITIES	STATEMENT]
SOURCE		GROSS	AMOUNT		PITAL GAINS DIVIDENDS	COLUMN (A) AMOUNT)
SANFORD C BERNSTEIN & CO SANFORD C BERNSTEIN & CO	-	-	300,367. 68,458.		0.	300,36 68,45	
TOTAL TO FM 990-PF, PART I,	LN 4	.==:	368,825.		0.	368,82	25.
FORM 990-PF	0'	THER I	NCOME			STATEMENT	2
DESCRIPTION		:	(A) REVENUE PER BOOKS		(B) NET INVEST- MENT INCOME	(C) ADJUSTEI NET INCOM	
OTHER INVESTMENT INCOME				607.	607.		
TOTAL TO FORM 990-PF, PART I	, LINE	11	(507.	607.		
FORM 990-PF		LEGAL	FEES			STATEMENT	3
DESCRIPTION	EXPE	A) NSES BOOKS	(B) NET INVI MENT INC		(C) ADJUSTED NET INCOME	(D) CHARITAE PURPOSE	
DESCRIPTION LEGAL FEES	EXPEI PER I	NSES	NET INVI		ADJUSTED NET INCOME	CHARITAE	ES
	EXPEI PER 1	NSES BOOKS	NET INVI	COME	ADJUSTED NET INCOME	CHARITAE PURPOSE	ES 00.
LEGAL FEES	EXPEI PER 1	NSES BOOKS	NET INVI	,000.	ADJUSTED NET INCOME	CHARITAE PURPOSE 15,00	ES 00.
LEGAL FEES	PER 1	NSES BOOKS 0,000.	NET INVI	,000.	ADJUSTED NET INCOME	CHARITAE PURPOSE 15,00	ES 00.
LEGAL FEES TO FM 990-PF, PG 1, LN 16A	PER 1	NSES BOOKS 0,000. 0,000. COUNTI	NET INVI	OME,000.	ADJUSTED NET INCOME	CHARITAE PURPOSE 15,00 15,00 STATEMENT (D) CHARITAE	00. 00.
LEGAL FEES TO FM 990-PF, PG 1, LN 16A FORM 990-PF	PER 1	NSES BOOKS 0,000. 0,000. COUNTI	NET INVI	OME,000.	ADJUSTED NET INCOME	CHARITAE PURPOSE 15,00 15,00 STATEMENT (D) CHARITAE	SES OO.

TAX	ES	STATEMENT 5			
(A) (EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES		
6,602. 4,095. 6,000.	0. 4,095. 0.		6,602. 0. 0.		
16,697.	4,095.		6,602.		
OTHER E	XPENSES	S	FATEMENT 6		
(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES		
1,134.	1,134. 94,755.		0.		
94,755. 1,172.	1,172.		0.		
	(A) EXPENSES PER BOOKS 6,602. 4,095. 6,000. 16,697. OTHER E (A) EXPENSES PER BOOKS	(A) (B) EXPENSES NET INVEST- PER BOOKS MENT INCOME 6,602. 0. 4,095. 4,095. 6,000. 0. 16,697. 4,095. OTHER EXPENSES (A) (B) EXPENSES NET INVEST- PER BOOKS MENT INCOME	(A) (B) (C) EXPENSES NET INVEST- PER BOOKS MENT INCOME 6,602. 0. 4,095. 4,095. 6,000. 0. 16,697. 4,095. OTHER EXPENSES (A) (B) (C) EXPENSES NET INVEST- PER BOOKS MENT INCOME (C) ADJUSTED NET INCOME		

STATEMENT ATTACHED PER REG 53.4945-5D

FORM '990-PF	CORPORATE STOCK		STATEMENT
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
20393 SH AMERICAN EXPRESS CO		147,431.	875,268
24000 SH STAPLES INC		602,107.	546,480
10500 SH 3M COMPANY		838,918.	906,150
13582 BROADRIDGE FINANCIAL SOL		165,266.	297,853
11000 SH PEPSICO		579,609.	718,630
6,000 SH CONOCOPHILLIPS		475,250.	408,600
15,000 SH WALGREEN CO		566,507.	584,400
20,000 SH ABB LTD		310,140.	449,000
11,000 SH EXXONMOBIL CORP		692,850.	804,320
10,000 SH GENERAL DYNAMICS CORI		434,493.	709,600
40,000 SH GENERAL ELECTRIC CO		935,801.	731,600
14,328 AUTOMATIC DATA PROCESSIN	1G	330,385.	663,100
3,078 SH AMERIPRISE FINANCIAL		0.	177,139
23,585 SH BANKNEWYORK MELLON		636,482.	712,267
1,500 SH BECKMAN COULTER INC		98,806.	112,845
10,000 SH COSTCO WHOLESALE CORI	P-NEW	364,487.	722,100
7,000 SH DEERE & COMPANY		444,133.	581,350
17,000 SH INTL. BUSINESS MACHIN	IES	1,703,086.	2,494,920
3,000 SH LEHMAN BROS HOLDINGS		0.	141
20,000 SH LOWES COMPANIES		444,588.	501,600
18,000 SH MORGAN STANLEY		535,610.	489,780
15,000 SH PITNEY BOWES INC		488,608.	362,700
10,230 SH THE TRAVELERS COS		411,089.	569,913
7,000 SH JOHNSON & JOHNSON		429,183.	432,950
TOTAL TO FORM 990-PF, PART II,	LINE 10B	11,634,829.	14,852,706
FORM 990-PF	CORPORATE BONDS		STATEMENT 9
		-	FAIR MARKET
DESCRIPTION		BOOK VALUE	VALUE
300,0000 FORD MOTOR CO 8%, DUE 6	5/1/24	305,250.	330,513
TOTAL TO FORM 990-PF, PART II,	LINE 10C	305,250.	330,513

FORM '990-PF	OTHER LIABILITIES		STATEMENT 10	
DESCRIPTION		BOY AMOUNT	EOY AMOUNT	
FEDERAL EXCISE TAX PAYABLE	-	0.	1,065	
TOTAL TO FORM 990-PF, PART II,	LINE 22	0.	1,065	

The Henry and Marilyn Taub Foundation

EIN # 22-6100525

Attachment to form 9990 pf

Return of Private Foundation

Statement Required by Reg 53.494505(d)

INFORMATION WITH RESPECT TO EXPENDITURE RESPONSIBILITY GRANTS

1. Grantee Joseph and Arlene Taub foundation

101 Eisenhower Parkway

Roseland, NJ 07608

- 2. Date Paid in Current Tax Year \$125,000 paid on February 4, 2010
- 3 Total Paid: \$125,000 paid on February 4, 2010
- 4. Purpose: The funds were used by the Joseph and Arlene Taub Foundation to support the establishment of a floor in the Memorial Sloan Kettering Cancer Center.
- 5 Amount of grant spent by grantee. \$125,000
- 6. Diversion: To the knowledge of the foundation, and based on the report furnished by the grantee, no part has been used for other than its intended purpose.
- 7 Date of report received from grantee. December 20, 2010
- 8. Verification: The HMTF Foundation reviewed the Grant report on December 20, 2010 but did not undertake any verification of the grantee's reports as there has not been any reason to doubt their accuracy or reliability

JOSEPH AND ARLENE TAUB FOUNDATION

SUPPLEMENTARY INFORMATION CONTRIBUTIONS MADE (Modified Cash Basis)

YEAR ENDED DECEMBER 31, 2010

Boys Town Jerusalem	New York, NY	\$ 1,000
Breast Cancer Research Foundation	New York, NY	256,665
CAF America	Alexandria, VA	1,000
Chemotherapy Foundation	New York, NY	2,500
Cliffside Park Education Center	Cliffside Park, NJ	5,000
Columbia University - College of Physicians & Surgeons	New York, NY	100,000
Court of Dreams	New York, NY	500
Don Bosco Preparatory School	Ramsey, NJ	21,170
Dreams Come True	Pittstown, NJ	1,000
	Chicago, IL	1,000
Dystonia Research Foundation	New York, NY	5,000
Hospital for Special Surgery JCC on the Palisades	Tenafly, NJ	32,894
Jewish War Veterans	West Palm Beach, FL	4,000
Lamda Upsilon Economic Development Corp	Paterson, NJ	15,350
Literacy Partners, Inc	New York, NY	14,690
March of Dimes	Ridgewood, NJ	5,000
Marisa Poster Kids for Kids Foundation	New York, NY	1,000
Memorial Sloan Kettering Cancer Center	New York, NY	150,000
National Academy Museum & School of Fine Arts	New York, NY	1,000
New York City Basketball Hall of Fame	New York, NY	7,500
Paramus Catholic High School	Paramus, NJ	3,156
Parkinson's Disease Foundation	New York, NY	1,000
Paterson Catholic High Schools	Paterson, NJ	45,000
SLE Lupus Foundation	New York, NY	1,000
St. Anthony's High School	Jersey City, NJ	4,900
Taub Institute for Research on Alzheimers	New York, NY	5,000
Temple Emanuel of Closter	Closter, NJ	11,600
V Foundation	Cary NC	5,000
Variety, The Children's Charity	New York, NY	2,500
Veritans Foundation	Hawthorne, NJ	1,000
Washington Institute for Near East Policy	Washington, DC	10,000
Whitney Museum	New York, NY	1,000
Various - less than \$300 each	TION TOIN, INT	300
ווסמט - נוסמט נומוו שטטט טמטוו		

Form 8868

(Rév. January 2011)

Department of the Treasury

Application for Extension of Time To File an Exempt Organization Return File a separate application for each return.

OMB No. 1545-1709

Internes Hev	enue Service rite a Sepa	arate app	ileation for each return.			
• If you	are filing for an Automatic 3-Month Extension, comple	te only Pa	art I and check this box			X
• If you	are filing for an Additional (Not Automatic) 3-Month Ex	tension, e	complete only Part II (on page 2 of this	form)		
Do not o	omplete Part II unless you have already been granted a	an automa	itic 3-month extension on a previously fi	led Fo	rm 8868.	
Electron	ic filing (e-file). You can electronically file Form 8868 if y	you need	a 3-month automatic extension of time t	o file ((6 months for a cor	poration
required	to file Form 990-T), or an additional (not automatic) 3-mo	nth extens	sion of time. You can electronically file F	orm 8	1868 to request an	extension
of time to	file any of the forms listed in Part I or Part II with the ex	ception of	Form 8870, information Return for Tran	ereler	Associated With C	ertain
	Benefit Contracts, which must be sent to the IRS in page					
	v.irs.gov/efile and click on e-file for Charities & Nonprofits					
Part I	Automatic 3-Month Extension of Time	3. Only su	ibmit original (no copies needed).			
A corpor	ation required to file Form 990-T and requesting an autor	matic 6-mo	onth extension - check this box and com	plete		
Part I onl	у					-
	corporations (including 1120-C filers), partnerships, REM ome tax returns.					
Type or	Name of exempt organization			Emp	oloyer identification	n number
print	TOGETHE A PRIME WALLE BOLDING	n m T 033		١,	00 6104545	
File by the	JOSEPH & ARLENE TAUB FOUND			22-6104545		
due date for filing your	Number, street, and room or suite no. If a P.O. box, s C/O WISS & CO.LLP, 354 EISE!					
return See Instructions					· · · · · · · · · · · · · · · · · · ·	
0.00.000000	LIVINGSTON, NJ 07039	weigh acc	1000, 000 11101190110118.			
	THITINGSTORY NO CYCOS					
Catar the	Return code for the return that this application is for (file		to conflication for each return			04
enter the	neturn coce for the return that this application is for (like	a sapara	te application for each return			<u>[A []]</u>
A 13 A		Batura	Anderton			D-1
Applicati	ion	Return	Application			Return
ls For		Code	Is For			Code
Form 990		01	Form 990-T (corporation)			07
Form 990		02	Form 1041-A			08
Form 990)-EZ	03	Form 4720			09
Form 990		04	Form 5227			10
Form 990)-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
Form 990	-T (trust other than above)	08	Form 8870			12
	WISS & CO. LLP					
	ooks are in the care of ► 354 EISENHOWER	PARK		07	039	
	none No. ► 973-994-9400		FAX No. 🕨			
	organization does not have an office or place of business					• 📖
If this	is for a Group Return, enter the organization's four digit					
box 🕨	. If it is for part of the group, check this box 🕨				ers the extension i	s for.
1 I re	quest an automatic 3-month (6 months for a corporation					
	AUGUST 15, 2011 to file the exemp	t organiza	tion return for the organization named a	bove.	The extension	
	or the organization's return for:					
	X calendar year 2010 or					
	tax year beginning	, an	d ending		<u> </u>	
2 111	he tax year entered in line 1 is for less than 12 months, c	heck reas	on: 🔲 initial return 🔲 Fina	l retur	n	
	Change in accounting period					
3a If t	nis application is for Form 990-BL, 990-PF, 990-T, 4720,	or 6069, e	nter the tentative tax, less any			
noi	nrefundable credits. See instructions.			3a	s 1	<u>8,935.</u>
b Ift	nis application is for Form 990-PF, 990-T, 4720, or 6069,	enter any	refundable credits and			
est	imated tax payments made, include any prior year overp	ayment a	lowed as a credit.	36	\$	4,935.
	lance due. Subtract line 3b from line 3a. Include your pa					
	using EFTPS (Electronic Federal Tax Payment System).			3c	\$ 1	4,000.
	If you are going to make an electronic fund withdrawal w			8879-	EO for payment ins	tructions.
LHA F	or Paperwork Reduction Act Notice, see Instructions	•			Form 8868 (F	lev. 1-2011)

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Form 8868 (Rev. 1-2011)					Page 2			
If you are filing for an Additional (Not Automatic) 3-Mon	th Extension, o	complete only Part II and check this bo	ox		▶ X			
Note. Only complete Part II if you have already been granted				8868.				
 If you are filing for an Automatic 3-Month Extension, co 								
Part II Additional (Not Automatic) 3-Mon	th Extensio	n of Time. Only file the original (no c	opies i	needed).				
Type or Name of exempt organization	Name of exempt organization							
print JOSEPH & ARLENE TAUB FOUN	2	5						
Number, street, and room or suite no. If a P.O. box, see instructions.								
due date for C/O WISS & CO.LLP, 354 EIS								
filing your return See City, town or post office, state, and ZIP code. For	or a foreign add	iress, see instructions.						
LIVINGSTON, NJ 07039								
Enter the Return code for the return that this application is f	or (file a separa	te application for each return)	•		. [0 4]			
Application	Return	Application			Return			
ls For	Code	Is For			Code			
Form 990	01	F 1041 A						
Form 990-BL	02	Form 1041-A	08					
Form 990-PF	03	Form 4720 Form 5227						
Form 990-PF Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069			10			
Form 990-T (trust other than above)	06	Form 8870			12			
STOP! Do not complete Part II if you were not already gr			sly file	ed Form 8868.				
WISS & CO. I								
• The books are in the care of ► 354 EISENHOW	VER PARK	WAY - LIVINGSTON, NJ	07	039				
Telephone No. ► 973-994-9400		FAX No. ▶						
If the organization does not have an office or place of bu	siness in the Ui	nited States, check this box		J	▶ □			
 If this is for a Group Return, enter the organization's four 	digit Group Exe	emption Number (GEN) If th	ıs ıs fo	r the whole group	o, check this			
box ▶ . If it is for part of the group, check this box ▶		ach a list with the names and EINs of all	memb	ers the extension	is for.			
4 I request an additional 3-month extension of time until		BER 15, 2011.						
5 For calendar year 2010 , or other tax year beginning		, and ending			<u> </u>			
6 If the tax year entered in line 5 is for less than 12 mon	ths, check reas	on: Initial return	Final r	eturn				
Change in accounting period								
7 State in detail why you need the extension WE ARE WAITING FOR THIRD PA	DUV THE	OPMATION PROHESTED T	N O	RDER TO 1	रा.स			
A COMPLETE AND ACCURATE RET		ORIMITION REGULETED I	.11 0	RDBR 10 1	. 111			
A COMMENT THE MCCORDINE REL								
8a If this application is for Form 990-BL, 990-PF, 990-T, 4	720. or 6069. e	enter the tentative tax, less any						
nonrefundable credits. See instructions.	_	•	8a	\$	18,935.			
b If this application is for Form 990-PF, 990-T, 4720, or	6069, enter any	refundable credits and estimated			-			
tax payments made. Include any prior year overpayments								
previously with Form 8868.			8b	\$	18,935.			
c Balance due. Subtract line 8b from line 8a Include yo	our payment wit	th this form, if required, by using	İ					
EFTPS (Electronic Federal Tax Payment System) See			8c	\$	<u> </u>			
	_	nd Verification		_				
Under penalties of perjury, I declare that I have examined this form, it is true, correct, and complete, and that I am authorized to prepare $\frac{1}{2}$	including accomp this form.	panying schedules and statements, and to the	e best o	f my knowledge an	d belief,			
Signature ► Title	PRES-	DIRECTOR	Date	>				
				Form 8060	(Pey 1-2011)			

Form **8868** (Rev. 1-2011)