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

2010

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 2010, or tax year beginning

, 2010, and ending

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

Name of foundation

I.J. and Mary LaRosa Memorial Foundation, Inc.

Number and street (or P O box number if mail is not delivered to street address)

Room/suite

3422 East State Street Extension

State ZIP code

City or town

NJ 08619-2442

Trenton

H Check type of organization: Section 501(c)(3) exempt private foundation
 Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation

I Fair market value of all assets at end of year **J** Accounting method: Cash Accrual
 (from Part II, column (c), line 16) Other (specify) **Part I, column (d) must be on cash basis.)**

► \$ 1,089,260.

A Employer identification number

26-1938151

B Telephone number (see the instructions)

(609) 587-9842

C If exemption application is pending, check here ► **D** 1 Foreign organizations, check here ► 2 Foreign organizations meeting the 85% test, check here and attach computation ► **E** If private foundation status was terminated under section 507(b)(1)(A), check here ► **F** If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ► **Part I Analysis of Revenue and Expenses**

(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see the instructions).)

		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1 Contributions, gifts, grants, etc, received (att sch)				
	2 Ck ► <input checked="" type="checkbox"/> if the foundn is not req to att Sch B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities	22,355.			
REVENUE	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain/(loss) from sale of assets not on line 10				
	b Gross sales price for all assets on line 6a				
	7 Capital gain net income (from Part IV, line 2)				
	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/(loss) (att sch)				
	11 Other income (attach schedule)				
	12 Total. Add lines 1 through 11	22,355.			
ADMINISTRATIVE EXPENSES	13 Compensation of officers, directors, trustees, etc	1,750.			
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)				
	b Accounting fees (attach sch) L-16b Stmt	750.			
	c Other prof fees (attach sch)				
	17 Interest	34.			
	18 The attach schedule (see instructions) See Line 18 Stmt	55.			
	19 Depreciation (attach sch) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule)				
OPERATING AND EXPENSES	24 Total operating and administrative expenses. Add lines 13 through 23	2,589.			
	25 Contributions, gifts, grants paid	19,250.			
	26 Total expenses and disbursements. Add lines 24 and 25	21,839.			
	27 Subtract line 26 from line 12:				
	a Excess of revenue over expenses and disbursements	516.			
	b Net investment income (if negative, enter -0-)				
	c Adjusted net income (if negative, enter -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 (See instructions.)	Beginning of year	End of year	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
A S S E T S	1	Cash – non-interest-bearing	472.	988.	988.
	2	Savings and temporary cash investments	20,920.	5,845.	5,845.
	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 (attach schedule) (see the instructions)			
	7	Other notes and loans receivable (attach sch)			
		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 (attach schedule) L-10a Stmt	117,585.	91,452.	91,452.
	b	Investments – corporate stock (attach schedule) L-10b Stmt	390,066.	450,242.	450,242.
	c	Investments – corporate bonds (attach schedule) L-10c Stmt	371,096.	440,073.	440,073.
	11	Investments – land, buildings, and equipment basis			
L I A B I L I T I E S		Less accumulated depreciation (attach schedule)			
	12	Investments – mortgage loans			
	13	Investments – other (attach schedule) L-13 Stmt	95,375.	100,660.	100,660.
	14	Land, buildings, and equipment: basis			
		Less: accumulated depreciation (attach schedule)			
	15	Other assets (describe)			
	16	Total assets (to be completed by all filers – see instructions Also, see page 1, item I)	995,514.	1,089,260.	1,089,260.
	17	Accounts payable and accrued expenses			
	18	Grants payable			
	19	Deferred revenue			
	20	Loans from officers, directors, trustees, & other disqualified persons			
	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe)			
	23	Total liabilities (add lines 17 through 22)			
N F E U N D A S S A E L T A S N C O E R S		Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.	<input type="checkbox"/>		
	24	Unrestricted			
	25	Temporarily restricted			
	26	Permanently restricted			
		Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.	<input checked="" type="checkbox"/>		
	27	Capital stock, trust principal, or current funds			
	28	Paid-in or capital surplus, or land, building, and equipment fund			
	29	Retained earnings, accumulated income, endowment, or other funds	995,514.	1,089,260.	
	30	Total net assets or fund balances (see the instructions)	995,514.	1,089,260.	
	31	Total liabilities and net assets/fund balances (see the instructions)	995,514.	1,089,260.	

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

1	Total net assets or fund balances at beginning of year – Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	995,514.
2	Enter amount from Part I, line 27a	2	516.
3	Other increases not included in line 2 (itemize) ► <u>Capital Appreciation</u>	3	93,230.
4	Add lines 1, 2, and 3	4	1,089,260.
5	Decreases not included in line 2 (itemize)	5	
6	Total net assets or fund balances at end of year (line 4 minus line 5) – Part II, column (b), line 30	6	1,089,260.

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 shares MLC Company)			(b) How acquired P — Purchase D — Donation	(c) Date acquired (month, day, year)	(d) Date sold (month, day, year)
1 a					
b					
c					
d					
e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)		
a					
b					
c					
d					
e					
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69				(i) Gains (Column (h) gain minus column (k), but not less than -0-) or Losses (from column (h))	
(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column (i) over column (j), if any			
a					
b					
c					
d					
e					
2 Capital gain net income or (net capital loss). If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7			2		
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c) (see the instructions). If (loss), enter -0- in Part I, line 8			3		

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 the instructions before making any entries.

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (column (b) divided by column (c))
2009			
2008			
2007			
2006			
2005			

2 Total of line 1, column (d)

2

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

4 Enter the net value of noncharitable-use assets for 2010 from Part X, line 5

4

5 Multiply line 4 by line 3

5

6 Enter 1% of net investment income (1% of Part I, line 27b)

6

7 Add lines 5 and 6

7

8 Enter qualifying distributions from Part XII, line 4

8

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 the instructions)

1a	Exempt operating foundations described in section 4940(d)(2), check here ► <input type="checkbox"/> and enter 'N/A' on line 1.	
Date of ruling or determination letter: _____ (attach copy of letter if necessary – see instr.)		1
1b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here ► <input type="checkbox"/> and enter 1% of Part I, line 27b	
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, column (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	0.
3	Add lines 1 and 2	0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	0.
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	0.
6	Credits/Payments:	
6a	2010 estimated tax pmts and 2009 overpayment credited to 2010	
6b	Exempt foreign organizations – tax withheld at source	
6c	Tax paid with application for extension of time to file (Form 8868)	
6d	Backup withholding erroneously withheld	
7	Total credits and payments Add lines 6a through 6d	7
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	0.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	0.
11	Enter the amount of line 10 to be Credited to 2011 estimated tax ► Refunded	11

Part VII-A | Statements Regarding Activities

1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
1b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
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		
1c	Did the foundation file Form 1120-POL for this year?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:	
(1)	On the foundation ► \$ _____	(2) On foundation managers ► \$ _____
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ► \$ _____	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
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	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
b	If 'Yes,' has it filed a tax return on Form 990-T for this year?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
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:	
<ul style="list-style-type: none"> • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? 		
7	Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XIV	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
8a	Enter the states to which the foundation reports or with which it is registered (see the instructions) ► _____	
NJ – New Jersey		
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	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If 'Yes,' complete Part XIV	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

Part VII-A | Statements Regarding Activities (Continued)

11	X
12	X
13	X
Website address ► N/A	
14	Telephone no. ► (609) 587-9842
Located at ► 3422 East State Street Extension Trenton NJ ZIP + 4 ► 08619-2442	
15	► 15
16	Yes X No
See the instructions for exceptions and filing requirements for Form TD F 90-22 1. If 'Yes,' enter the name of the foreign country ►	

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 53.4941(d)-3 or in a current notice regarding disaster assistance (see the instructions)?	1b	
Organizations relying on a current notice regarding disaster assistance check here ►		
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2010?	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 2010, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2010?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
If 'Yes,' list the years ► 20__ , 20__ , 20__ , 20__		
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 the instructions.)	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. ► 20__ , 20__ , 20__ , 20__		
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 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, Form 4720, to determine if the foundation had excess business holdings in 2010.)	3b	
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	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 2010?	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))?

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

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

(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)? (see instructions)

(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 Yes No Yes No Yes No 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)?

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?

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?

If 'Yes' to 6b, file Form 8870

 Yes No

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?

 Yes No

5b

6b

X

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 (see instructions).**

(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
Joseph I. LaRosa 3422 East State Street Extension Trenton NJ 08619-2442	President, Trustee 1.00	250.	0.	0.
Jack J. LaRosa 5 Vivian Court Lincoln Park NJ 07035	Vice President, Trustee 1.00	250.	0.	0.
Richard J. LaRosa 243 Glen Avenue Dumont NJ 07628	Treasurer, Trustee 1.00	250.	0.	0.
See Information about Officers, Directors, Trustees, Etc		1,000.	0.	0.

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

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

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

►

None

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

3 Five highest-paid independent contractors for professional services (see instructions). 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

None

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 _____

2 _____

3 _____

4 _____

Part IX-B Summary of Program-Related Investments (see instructions)

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

Amount

1 _____

2 _____

All other program-related investments. See instructions.

3 _____

Total. Add lines 1 through 3

BAA

Form 990-PF (2010)

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
b Average of monthly cash balances	1b
c Fair market value of all other assets (see instructions)	1c
d Total (add lines 1a, b, and c)	1d
e Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e
2 Acquisition indebtedness applicable to line 1 assets	2
3 Subtract line 2 from line 1d	3 0.
4 Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4 0.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5 0.
6 Minimum investment return. Enter 5% of line 5	6 0.

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 0.
2a Tax on investment income for 2010 from Part VI, line 5	2a 0.
b Income tax for 2010. (This does not include the tax from Part VI)	2b
c Add lines 2a and 2b	2c 0.
3 Distributable amount before adjustments Subtract line 2c from line 1	3 0.
4 Recoveries of amounts treated as qualifying distributions	4
5 Add lines 3 and 4	5 0.
6 Deduction from distributable amount (see instructions)	6
7 Distributable amount as adjusted. Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7 0.

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
b Program-related investments – total from Part IX-B	1b
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
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions)	5 0.
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6 0.

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) Corpus	(b) Years prior to 2009	(c) 2009	(d) 2010
1 Distributable amount for 2010 from Part XI, line 7				0.
2 Undistributed income, if any, as of the end of 2010:				0.
a Enter amount for 2009 only				
b Total for prior years 20____, 20____, 20____				
3 Excess distributions carryover, if any, to 2010:				
a From 2005	0.			
b From 2006	0.			
c From 2007	0.			
d From 2008	0.			
e From 2009	0.			
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2010 from Part XII, line 4. ► \$				
a Applied to 2009, but not more than line 2a				
b Applied to undistributed income of prior years (Election required – see instructions)				
c Treated as distributions out of corpus (Election required – see instructions)				
d Applied to 2010 distributable amount				
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2010 (If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below:				
a 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				
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 instructions			0.	
f Undistributed income for 2010. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2011				0.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions)				
8 Excess distributions carryover from 2005 not applied on line 5 or line 7 (see instructions)		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	0.			
b Excess from 2007	0.			
c Excess from 2008	0.			
d Excess from 2009	0.			
e Excess from 2010	0.			

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
Wood-Ridge Memorial Foundation 109 Hackensack Street			Donation to the I.J. LaRosa Scholarship Fund	500.
Wood-Ridge Project Have Hope P.O. Box 602		501 c 3	For the Care and Well Being of the People in Acholi Uganda	550.
Malden Brian Ahearn Children's Foundation P.O. Box 550		501 c 3	Donation to the Brian Ahearn Children's Scholarship Fund	550.
Warwick New Jersey Chronic Fatigue Syndrom Association Inc. P.O. Box 477		501 c 3	Donation to the NJ Chronic Fatigue Research Fund	1,650.
Florham Park Popcorn Park Zoo P.O. Box 43		501 c 3	Donation for the Care and Well Being of Animals	1,500.
Forked River Mephibosheth in Ghana 151 Beverly Hill Road		501 c 3	Donation for the education of children in Ghana.	825.
Clifton Juvenile Diabetes Research Foundation International 26 Broadway, 14th Floor		501 c 3	Donation for the support for finding a cure for Type I Diabetes.	2,650.
New York Maranatha Church 258 East Midland Avenue		501 c 3	Donation for the radio station broadcast for their ministry.	750.
Paramus Lagond Music School Nine Haven Street		501 c 3	Donation for the cultivation of sophisticated Musicians.	1,075.
Elmsford See Line 3a statement				9,200.
Total			► 3a	19,250.
b Approved for future payment				
Total			► 3b	

Part XVI-A Analysis of Income-Producing Activities

	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (see the instructions)
	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	
1 Program service revenue:					
a					
b					
c					
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments					
4 Dividends and interest from securities	522100	22,355.			
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory					
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue					
a					
b					
c					
d					
e					
12 Subtotal Add columns (b), (d), and (e)		22,355.			
13 Total Add line 12, columns (b), (d), and (e)					13 22,355.

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

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

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

	Yes	No
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?		
a Transfers from the reporting foundation to a noncharitable exempt organization of:		
(1) Cash	1 a (1)	X
(2) Other assets	1 a (2)	X
b Other transactions:		
(1) Sales of assets to a noncharitable exempt organization	1 b (1)	X
(2) Purchases of assets from a noncharitable exempt organization	1 b (2)	X
(3) Rental of facilities, equipment, or other assets	1 b (3)	X
(4) Reimbursement arrangements	1 b (4)	X
(5) Loans or loan guarantees	1 b (5)	X
(6) Performance of services or membership or fundraising solicitations	1 b (6)	X
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees	1 c	X

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.

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

Under penalties of perjury, I declare that I have examined 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.

**Sign
Here**


Signature of officer or trustee

May 7, 2011

Da

President, Trustee

Title

Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check if <input checked="" type="checkbox"/> if self-employed	PTIN
	Joseph I. LaRosa, CPA		05/07/11		
	Firm's name	► JOSEPH I. LAROSA, CPA		Firm's EIN	►
Firm's address	► 3422 EAST STATE STREET EXTENSION				
	► HAMILTON TOWNSHIP		NJ 08619-2442	Phone no	(609) 587-9842

BAA

Form 990-PF (2010)

Form 990-PF, Page 1, Part I, Line 18

Line 18 Stmt

Taxes (see the instructions)	Rev/Exp Book	Net Inv Inc	Adj Net Inc	Charity Disb
<u>NJ Div CF Annual Fee</u>	30.			
<u>NJ State Filing Fee</u>	25.			
Total	<u>55.</u>			

Form 990-PF, Page 6, Part VIII, Line 1

Information about Officers, Directors, Trustees, Etc.

(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
Person <input checked="" type="checkbox"/> Business <input type="checkbox"/> <u>Angela M. LaRosa</u> <u>47 Meadowlark Drive</u> <u>Trenton NJ 08690</u>	Secretary, Trustee 1.00	250.	0.	0.
Person <input checked="" type="checkbox"/> Business <input type="checkbox"/> <u>Daniel S. LaRosa</u> <u>10 Dorchester Road</u> <u>Emerson NJ 07630</u>	Director, Trustee 1.00	250.	0.	0.
Person <input checked="" type="checkbox"/> Business <input type="checkbox"/> <u>Gerald A. LaRosa</u> <u>45 Sylvan Street</u> <u>Rutherford NJ 07070</u>	Director, Trustee 1.00	250.	0.	0.
Person <input checked="" type="checkbox"/> Business <input type="checkbox"/> <u>Christopher A. LaRosa</u> <u>257 Utah Street</u> <u>Paramus NJ 07652</u>	Director, Trustee 1.00	250.	0.	0.

Total

1,000. 0. 0.

Form 990-PF, Page 11, Part XV, line 3a

Line 3a statement

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Found- ation status of re- cipient	Purpose of grant or contribution	Person or Business Checkbox Amount
a Paid during the year				
<u>RLS Foundation</u> 1610 14th St NW Suite 300 Rochester MN 55901		501 c 3	<u>Donation to help</u> <u>find a cure for</u> Restless Leg Syndrome.	Person or Business <input checked="" type="checkbox"/> 200.
<u>Felician College</u> 262 South Main Street Lodi NJ 07644		501 c 3	<u>Donation for the</u> <u>education of</u> students.	Person or Business <input checked="" type="checkbox"/> 1,000.
<u>Nyack Hospital</u> 160 N. Midland Ave Nyack NY 10960-1998		501 c 3	<u>Donation to support</u> <u>the building of a new</u> clinic center.	Person or Business <input type="checkbox"/> 1,550.
<u>22q13 Deletion Foundation</u> 6 Doctors Drive Greenville SC 29605		501 c 3	<u>Donation to support</u> <u>the financial needs</u> of their annual conferen	Person or Business <input checked="" type="checkbox"/> 200.
<u>Trenton Area Soup Kitchen</u> 72.5 Escher Street Trenton NJ 08605		501 c 3	<u>Donation to support</u> <u>daily meals for</u> the poor.	Person or Business <input checked="" type="checkbox"/> 1,000.
<u>Monmouth University Foundation</u> 400 Cedar Avenue West Long Branch NJ 07764-1898		501 c 3	<u>Donation to provide</u> <u>financial Support</u> to Students.	Person or Business <input checked="" type="checkbox"/> 500.
<u>Don Bosco Prepatory High School</u> 492 N. Franklin Turnpike Ramsey NJ 07446-9949		501 c 3	<u>Donation to provide</u> <u>Financial Support</u> to students.	Person or Business <input checked="" type="checkbox"/> 250.
<u>Millhill Foundation</u> 101 Oakland Street Trenton NJ 08618		501 c 3	<u>Donation to support</u> <u>the financial needs</u> of Millhill Child and Fa	Person or Business <input type="checkbox"/> 400.
<u>Calvary Hospital</u> 1740 East Chester Road Bronx NY 10461		501 c 3	<u>Donation to support</u> <u>the care and well being</u> of its patients.	Person or Business <input checked="" type="checkbox"/> 1,425.
<u>Our Lady of Sorrows St. Anthony Parish</u> 3816 East State St. Ext Hamilton Twp. NJ 08619		501 c 3	<u>Donation to support</u> <u>the expenses of running</u> the parish.	Person or Business <input checked="" type="checkbox"/> 500.
<u>Cancer Research Institute</u> 55 Broadway, suite 55 New York NY 10006		501 c 3	<u>Donation for</u> <u>the continued research</u> for Cancer.	Person or Business <input checked="" type="checkbox"/> 425.
<u>US Marines Toys for Tots</u> 1825 Quantico Gateway Drive Triangle VA 22172		501 c 3	<u>Donation to provide</u> <u>financial support to</u> for the children during	Person or Business <input checked="" type="checkbox"/> 400.
<u>SLE Lupus Foundation</u> 330 Seventh Ave, Suite 1701 New York NY 10001		501 c 3	<u>Donation to support</u> <u>the patients and their</u> families suffering with	Person or Business <input checked="" type="checkbox"/> 400.
<u>American Red Cross</u> P.O. Box 4780 Trenton NJ 08650-4780		501 c 3	<u>Donation to support</u> <u>the mission of the</u> red cross around the wor	Person or Business <input checked="" type="checkbox"/> 350.
<u>St. Jude Hospital</u> 501 St. Jude Place Memphis TN 38105-1942		501 c 3	<u>Donation to support</u> <u>the children serviced</u> by St. Judes Hospital	Person or Business <input checked="" type="checkbox"/> 350.

Form 990-PF, Page 11, Part XV, line 3a

Continued

Line 3a statement

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Found- ation status of re- cipient	Purpose of grant or contribution	Person or Business Checkbox Amount
<i>a Paid during the year</i> Salvation Army 15 State Highway 33 Trenton NJ 08619			Donation to support the mission of the Salvation Army.	Person or Business <input checked="" type="checkbox"/> 250.

Total

9,200.

Form 990-PF, Page 1, Part I

Line 16b - Accounting Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Joseph I. LaRosa, CPA	Accounting and Tax	750.			

Total

750.

Form 990-PF, Page 2, Part II, Line 10a

L-10a Stmt

Line 10a - Investments - US and State Government Obligations:	End of Year		End of Year	
	State and Local Obligations Book Value	State and Local Obligations FMV	US Government Obligations Book Value	US Government Obligations FMV
US Treasury/Agency			91,452.	91,452.
Total			91,452.	91,452.

Form 990-PF, Page 2, Part II, Line 10b

L-10b Stmt

Line 10b - Investments - Corporate Stock:	End of Year	
	Book Value	Fair Market Value
Equities	128,542.	128,542.
Mutual Funds	314,717.	314,717.
Other Securities	6,983.	6,983.

Form 990-PF, Page 2, Part II, Line 10b
L-10b Stmt

Continued

Line 10b - Investments - Corporate Stock:	End of Year	
	Book Value	Fair Market Value
Total	<u>450,242.</u>	<u>450,242.</u>

Form 990-PF, Page 2, Part II, Line 10c
L-10c Stmt

Line 10c - Investments - Corporate Bonds:	End of Year	
	Book Value	Fair Market Value
Corporate Bonds	<u>440,073.</u>	<u>440,073.</u>
Total	<u>440,073.</u>	<u>440,073.</u>

Form 990-PF, Page 2, Part II, Line 13
L-13 Stmt

Line 13 - Investments - Other:	End of Year	
	Book Value	Fair Market Value
Certificates of Deposits	<u>100,660.</u>	<u>100,660.</u>
Total	<u>100,660.</u>	<u>100,660.</u>

Supporting Statement of:

Form 990-PF, p2/Line 2(a)

Description	Amount
L82-439045	7,731.
L82-447730	13,189.
Total	<u>20,920.</u>

Supporting Statement of:

Form 990-PF, p2/Line 2(b)

Description	Amount
7PN-05813	5,348.
7PN-05815	497.
Total	<u>5,845.</u>

Supporting Statement of:

Form 990-PF, p2/Line 2(c)

Description	Amount
05813	5,348.
05815	497.
Total	<u>5,845.</u>

Supporting Statement of:

Investments/Line 10a Book US-1

Description	Amount
05815	91,452.
Total	<u>91,452.</u>

Supporting Statement of:

Investments/Line 10b Book-1

Description	Amount
05813	128,542.
Total	<u>128,542.</u>

Supporting Statement of:

Investments/Line 10b FMV-1

Description	Amount
05813	128,542.
Total	<u>128,542.</u>

Supporting Statement of:

Investments/Line 10b Book-2

Description	Amount
05813	314,717.
Total	<u>314,717.</u>

Supporting Statement of:

Investments/Line 10b FMV-2

Description	Amount
05813	314,717.
Total	<u>314,717.</u>

Supporting Statement of:

Investments/Line 10b Book-3

Description	Amount
05815	6,983.
Total	<u>6,983.</u>

Supporting Statement of:

Investments/Line 10b FMV-3

Description	Amount
05815	6,983.
Total	<u>6,983.</u>

Supporting Statement of:

Investments/Line 10c Book-1

Description	Amount
05815	440,073.
Total	<u>440,073.</u>

Supporting Statement of:

Investments/Line 10c FMV-1

Description	Amount
05815	440,073.
Total	<u>440,073.</u>

Supporting Statement of:

Investments/Line 13 Book-1

Description	Amount
05815	100,660.
Total	<u>100,660.</u>

Supporting Statement of:

Investments/Line 13 FMV-1

Description	Amount
05815	100,660.

Continued

Supporting Statement of:

Investments/Line 13 FMV-1

Description	Amount
Total	<u>100,660.</u>