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Form **990-PF**

Return of Private Foundation

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

OMB No 1545-0052

Depa	artment of the Treasury nal Revenue Service	Note. The foundation may t	Freated as a Privat be able to use a copy of this		orting requirements.	 20 10
	calendar year 2010, or		,	and ending		
	Check all that apply:	Initial return Amended return	Initial return of a fo	ormer public charity	Final return Name change	
Nar	me of foundation				A Employer identification	number
		NRAD BUEDEL FAM			26-6135624	
Nun	P.O. Bo	number if mail is not delivered to street OX 409	address)	Room/suite	B Telephone number 410-458-80	08
	y or town, state, and ZIP BROOKLA Check type of organization	ANDVILLE, MD 2	1022		D 1. Foreign organizations 2. Foreign organizations check here and attach co	, check here
		onexempt charitable trust	Other taxable private founda	ation Accrual	E If private foundation stat under section 507(b)(1)	us was terminated
-	rom Part II, col (c), lin ►\$	ne 16)	her (specify) mn (d) must be on cash i	basis.)	F If the foundation is in a 6 under section 507(b)(1)	
Pa	Analysis of Reve (The total of amount necessarily equal th	enue and Expenses ts in columns (b), (c), and (d) may not ne amounts in column (a))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	2 Check If the	ts, grants, etc., received e foundation is not required to attach Sch B	100,000.		N/A	
	3 Interest on savings a cash investments 4 Dividends and inte	erest from securities	19.	19.		STATEMENT 1
	5a Gross rents b Net rental income or	(loss)				
une	6a Net gain or (loss) from 6 Gross sales price for assets on line 6a	n sale of assets not on line 10				
Revenue	7 Capital gain net incol 8 Net short-term ca	me (from Part IV, line 2) pital gain RECEIVED	02250	0.		
	9 Income modificat 10a Gross sales less retu and allowances	170 × 0 1 2011	78			
	b Less Cost of goods c Gross profit or (lo		SC			
	11 Other income 12 Total. Add lines 1	*	100,019.	19.		
	13 Compensation of offi 14 Other employee s	icers, directors, trustees, etc alaries and wages	0.	0.		C
ses	15 Pension plans, en 16a Legal fees	nployee benefits				
Expen	b Accounting fees c Other professiona	STMT 2	805.	0.		805
rative	17 Interest 18 Taxes					
minist	19 Depreciation and 20 Occupancy	depletion				
Operating and Administrative Expenses	21 Travel, conference 22 Printing and public	,				
ating a	23 Other expenses 24 Total operating a	nd administrative				
Oper	expenses Add lir 25 Contributions, gift	nes 13 through 23 ts, grants paid	805. 63,652.	0.		805 63,652
	26 Total expenses a Add lines 24 and	nd disbursements.	64,457.	0.		64,457
	27 Subtract line 26 fr		35,562.			
	b Net investment in	ncome (if negative, enter -0-)		19.	N/A	
	1 A Valanten net High	ALLE ALLINGULATO, OLLOW -0-)	I	·		

	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	year
느	ai t	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			
	2	Savings and temporary cash investments	187,537.	223,099.	223,099.
	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			
	ĺ	disqualified persons			
	7	Other notes and loans receivable			
		Less: allowance for doubtful accounts ▶			
Ŋ	8	Inventories for sale or use			
Assets	_	Prepaid expenses and deferred charges			
As	1	Investments - U.S. and state government obligations			·
		Investments - corporate stock			
		Investments - corporate bonds			
		Investments - Land, buildings, and equipment, basis			
	' '				
	1.	Less accumulated depreciation		-	
	Ł	Investments - mortgage loans			
		Investments - other			
	14	Land, buildings, and equipment: basis			
		Less accumulated depreciation			
	15	Other assets (describe ►)			
			40= =0=		
_		Total assets (to be completed by all filers)	187,537.	223,099.	223,099.
		Accounts payable and accrued expenses			
	18	Grants payable			
es	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
iab	21	Mortgages and other notes payable			
_	22	Other liabilities (describe)			
_	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here			
,n		and complete lines 24 through 26 and lines 30 and 31.			
ë	24	Unrestricted			
<u>a</u>	25	Temporarily restricted			
Ba	26	Permanently restricted			
pu	1	Foundations that do not follow SFAS 117, check here			
Ī		and complete lines 27 through 31.		ļ	
ğ	27	Capital stock, trust principal, or current funds	0.	0.	
šets	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
Asi	29	Retained earnings, accumulated income, endowment, or other funds	187,537.	223,099.	
Net Assets or Fund Balances		Total net assets or fund balances	187,537.	223,099.	
_					
	31	Total liabilities and net assets/fund balances	187,537.	223,099.	
Ξ					-
P	art	Analysis of Changes in Net Assets or Fund B	aiances		
1	Total	net assets or fund balances at beginning of year - Part II, column (a), line	30	· · · · · · · · · · · · · · · · ·	
•		t agree with end-of-year figure reported on prior year's return)		[,	187,537.
2		amount from Part I, line 27a		2	35,562.
		rincreases not included in line 2 (itemize)		F	35,362.
				3	223,099.
		ines 1, 2, and 3		4	223,099.
		eases not included in line 2 (itemize)	dump (h) line 20	5	223,099.
<u>0</u>	rotal	net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	numm (v), ime 30	[6]	Form 990-PF (2010)
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THE CONRAD BUEDEL FAMILY FOUNDATION

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42,732.

64,457.

7 Add lines 5 and 6

See the Part VI instructions.

8 Enter qualifying distributions from Part XII, line 4

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.

	n 990-PF (2010) THE CONRAD BUEDEL FAMILY FOUNDATION		26-	<u>61356</u>	24		Page 4
Pε	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b),	4940(e), or 4	1948 -	see ins	stru	ctio	ns)
1a	ı 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 and the copy of letter if necessary-see instructions are considered as a second copy of letter if necessary-see instructions are copy of letter if necessary-see instructions.						
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🗶 and enter 1	%	1				<u>0.</u>
	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, o	col. (b). 💚					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		2				<u>0.</u>
3	Add lines 1 and 2		3				<u>0.</u>
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		4				<u>0.</u>
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5				<u>0.</u>
6	Credits/Payments:						
а	2010 estimated tax payments and 2009 overpayment credited to 2010 6a]				
b	Exempt foreign organizations - tax withheld at source 6b]				
C	: Tax paid with application for extension of time to file (Form 8868)						
d	Backup withholding erroneously withheld 6d]				
7	Total credits and payments. Add lines 6a through 6d		7				0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached		8				
9	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed	>	9				0.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	, ▶	10				
11		Refunded ►	11				
Pa	art 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 parti	cipate or intervene	e in			Yes	No
	any political campaign?						X
b	b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?						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.						
c Did the foundation file Form 1120-POL for this year?							X
d	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. ► \$	0_•	_				
е	e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed o	n foundation					
	managers. ▶ \$0 .			1			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			L	2		X
	If "Yes," attach a detailed description of the activities			1			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, 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		X
	of "Yes," has it filed a tax return on Form 990-T for this year?		N	/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			<u> </u>	5		X
	If "Yes," attach the statement required by General Instruction T.						
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			ŀ			
	By language in the governing instrument, or Purchase language at the governing instrument as the source and the source at	-61441414-4					
	By state legislation that effectively amends the governing instrument so that no mandatory directions that co	milict with the stat	e iaw			37	
.,	remain in the governing instrument?				6	X	
′	Did the foundation have at least \$5,000 in assets at any time during the year?				7	X	
0-	If "Yes," complete Part II, col. (c), and Part XV.						
σa	Enter the states to which the foundation reports or with which it is registered (see instructions)						
	MD If the angular is \$\frac{1}{2}\color \text{log 7} has the foundation furnished a convent Form \$000 PF to the Attenuary Convent (or	danamat-\	· · -				
D	of the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or	uesignate)			O.L	v	
^	of each state as required by General Instruction G? If "No," attach explanation	40.40(1)(E) 40- 0-1	nda-		8b_	<u> </u>	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or		Huar				v
10	year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If "Yes," complete Part XIV			-	9 10	_	X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses			ı	IV		Α	

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Pa	art VII-A Statements Regarding Activities (continued)				
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of				
	section 512(b)(13)? If "Yes," attach schedule (see instructions)		11		X
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before				
	August 17, 2008?		12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?		13	X	
	Website address ► N/A				
14	The books are in care of ▶ CONRAD BUEDEL Telephone no	. ▶ 410-45	8-8	008	
	Located at ▶P.O. BOX 409, BROOKLANDVILLE, MD	ZIP+4 ▶21			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here				
	and enter the amount of tax-exempt interest received or accrued during the year	15		/A	
16	At any time during calendar year 2010, did the foundation have an interest in or a signature or other authority over a bank,			Yes	No
	securities, or other financial account in a foreign country?		16		X
	See page 20 of the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of				
	the foreign country				
Pa	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required	_			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.			Yes	No
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?	∕es X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			i	
		res 🗶 No			
	<u> </u>	res 🔀 No			
		res 🗶 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)?	res 🗶 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.)	res 🗶 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 page 22 of the instructions)?	N/A	1b		
	Organizations relying on a current notice regarding disaster assistance check here				
С	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	ſ			
	defined in section 4942(j)(3) or 4942(j)(5)):		1		
а	At the end of tax year 2010, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginn				
		es X No		İ	
	If "Yes," list the years >,,,				
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorre				
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attack				
	statement - see instructions.)	N/A	2b		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	:			
٥.	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time	!			
за			•		
		(es X No			
D	If "Yes," did it have excess business holdings in 2010 as a result of (1) any purchase by the foundation or disqualified persons a				
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to			ļ	
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule			1	
4-	Form 4720, to determine if the foundation had excess business holdings in 2010.)	N/A	3b		- -
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	an that	4 <u>a</u>		<u>X</u>
0	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpo	or liidl		j	¥
	HAD BUT BEEN LEBROVED HOUR RODALDY DEIDLE HIE BLYL DAY OF DIE 13% VENU DEDBIRDIN HE VITALLY		ו תם ו		

orm 990-PF (2010) THE CONRAD BUEDEL FAMILY	FOUNDATION	3	<u> 26-61356</u>	24	Page 6
Part VII-B Statements Regarding Activities for Which	Form 4/20 May Be I	Requirea (contin	iued)		T
5a During the year did the foundation pay or incur any amount to:			I		
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	,		es X No		
(2) Influence the outcome of any specific public election (see section 4955); of	or to carry on, directly or indir				
any voter registration drive?			es X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes	Ye	es X No		Ì	
(4) Provide a grant to an organization other than a charitable, etc., organization			j		
509(a)(1), (2), or (3), or section 4940(d)(2)?		es X No			
(5) Provide for any purpose other than religious, charitable, scientific, literary	or educational purposes, or t				
the prevention of cruelty to children or animals?		Ye	es 🗶 No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un	der the exceptions described	ın Regulations			
section 53.4945 or in a current notice regarding disaster assistance (see instru	ıctıons)?		N/A	5b	
Organizations relying on a current notice regarding disaster assistance check h	nere				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f	rom the tax because it mainta	ined		ŀ	
expenditure responsibility for the grant?		√A	s No		
If "Yes," attach the statement required by Regulations section 53 494	5-5(d)				
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on				
a personal benefit contract?			s X No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	personal benefit contract?			6ь	X
If "Yes" to 6b, file Form 8870.					
7a At any time during the tax year, was the foundation a party to a prohibited tax s	shelter transaction?		es X No		
b If "Yes," did the foundation receive any proceeds or have any net income attribu				7b	\vdash
Information About Officers Directors Truck		nagers. Highly			
Part VIII Paid Employees, and Contractors			•		
List all officers, directors, trustees, foundation managers and their	compensation.				
	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Exp account	penșe
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	and deferred compensation	account allowa	i, other
JOHN CONRAD BUEDEL	TRUSTEE	enter -o-)	compensation	anove	11003
2.0. BOX 409	TRODIED				
BROOKLANDVILLE, MD 21022	5.00	0.	0.		0.
OKOOKHIMOVIHHI, IN 21022	3.00				<u> </u>
		-			
Compensation of five highest-paid employees (other than those inc	luded on line 1) If none	ontor "NONE "			
Compensation of five highest-paid employees totals than those inc	,	enter NONE.	(d) Contributions to	(a) Evr	nence
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Exp	, other
170177	devoted to position	<u> </u>	compensation	allowa	nces_
NONE					
		-		_	
otal number of other employees paid over \$50,000					0
	· · · · · · · · · · · · · · · · · · ·		Form 9	990-PF	(2010)

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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)		_
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."		
(a) Name and address of each person paid more than \$50,000 (b) Type of service		(c) Compensation
NONE		- "
		_
	_	
		i
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities		0
	$\overline{}$	<u>.</u>
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.		Expenses
1 THE FOUNDATION MAKES GRANTS TO OTHER QUALIFYING SECTION		
501(C)(3) ORGANIZATIONS WHICH ARE INVOLVED IN DIRECT		
CHARITABLE ACTIVITES.	\neg	0.
2		
	7	
3		
4	_	
Part IV-B Comment of December Deleted Investments		
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.		Amount
1 N/A		Allount
1	\dashv	
	\dashv	
2		
	\exists	
All other program-related investments. See instructions.		
3		
	$-\!$	
Total. Add lines 1 through 3	<u> </u>	0.
	Forr	m 990-PF (2010)

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations, se	e 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	0.
b		1b	189,028.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	189,028.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	189,028.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	2,835.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	186,193.
6	Minimum investment return. Enter 5% of line 5	6	9,310.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part.)	id certain	
1	Minimum investment return from Part X, line 6	1	9,310.
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	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	9,310.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	9,310.
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	9,310.
P	art XII Qualifying Distributions (see instructions)		2,752.53
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		***
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	64,457.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	64,457.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	Income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	64,457.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	jualifies for th	
	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,	Сограс	, 04.0 p. 10. 10.00		
line 7				9,310.
2 Undistributed income, if any, as of the end of 2010				
a Enter amount for 2009 only			0.	
b Total for prior years:				
,,		0.		· · · · · · · · · · · · · · · · · · ·
3 Excess distributions carryover, if any, to 2010:				
a From 2005				
b From 2006				
c From 2007				
d From 2008 21,134.				
e From 2009 <u>56,621.</u>				
f Total of lines 3a through e	77,755.			
4 Qualifying distributions for 2010 from				
Part XII, line 4: ►\$ 64,457.			_ [
a Applied to 2009, but not more than line 2a			0.	
b Applied to undistributed income of prior		•		
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2010 distributable amount	55 148			9,310.
e Remaining amount distributed out of corpus	55,147.			
5 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:				
& Corpus Add lines 3f, 4c, and 4e Subtract line 5	132,902.			
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				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2005				
not applied on line 5 or line 7	<u>0.</u>			
9 Excess distributions carryover to 2011.				
Subtract lines 7 and 8 from line 6a	132,902.			
10 Analysis of line 9:				
a Excess from 2006				
b Excess from 2007				
c Excess from 2008 21, 134.				
d Excess from 2009 56,621.				
e Excess from 2010 55,147.	<u> </u>	<u></u>	<u> </u>	

023601 12-07-10

Page 11

	(00111111111111111111111111111111111111			
3 Grants and Contributions Paid During the Y	ear or Approved for Future	Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year LOYOLA BLAKEFIELD P.O. BOX 6819 BALTIMORE, MD 21285	NONE	PUBLIC	UNRESTRICTED DONATION FOR EDUCATION	32,152.
NOTRE DAME PREPATORY SCHOOL 815 HAMPTON LANE TOWSON, MD 21286	NONE	PUBLIC	UNRESTRICTED DONATION FOR EDUCATION	31,500.
Tota!			▶ 3a	63,652.
b Approved for future payment NONE				
Total			▶ 3h	0.

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelated business income		Excluded by section 512, 513, or 514		(e)
	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	Related or exempt
1 Program service revenue:	coue		COUB		
a			ļ		
b					
C			ļ		<u> </u>
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			14	19.	
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	ļ 		-		
11 Other revenue:			-		
		, ,,	 		
					<u>.</u>
c					
6		0.		10	
12 Subtotal. Add columns (b), (d), and (e)		<u> </u>	<u> </u>		0. 19.
13 Total. Add line 12, columns (b), (d), and (e)				13_	<u> </u>
(See worksheet in line 13 instructions to verify calculations.)	-			·	
Part XVI-B Relationship of Activities to	the Acc	omplishment of Ex	emp	t Purposes	
Line No Explain below how each activity for which incom	o in concerted	up column (a) of Dort V/L A	000451	utad impartantly to the secon	anliah mant of
the foundation's exempt purposes (other than b			COILLI	outed importantly to the accor	iipiisiiineiit oi
and realisation of exempt purposes (enter than o	y protiding to	mao tor odon parposos).			
					
				•	
	_				
				<u>.</u>	
	_				
		· · · · · · · · · · · · · · · · · · ·			
					·
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	_				
				<u></u>	

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

OMB No 1545-0047

2010

·

Employer identification number

	HE CONRAD BUEDEL FAMILY FOUNDATION	26-6135624							
Organization type(check	one):								
Filers of:	Section:								
Form 990 or 990-EZ	501(c)() (enter number) organization								
	4947(a)(1) nonexempt chantable trust not treated as a private foundation								
	527 political organization								
Form 990-PF	X 501(c)(3) exempt private foundation	X 501(c)(3) exempt private foundation							
	4947(a)(1) nonexempt charitable trust treated as a private foundation								
	501(c)(3) taxable private foundation								
	is covered by the General Rule or a Special Rule. ()(7), (8), or (10) organization can check boxes for both the General Rule and a Special Ri	ule See instructions.							
X For an organization	on filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in molete Parts I and II.	noney or property) from any one							
Special Rules									
509(a)(1) and 170	(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the req (b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1 Complete Parts I and II.								
aggregate contrib	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.								
contributions for i If this box is chec purpose. Do not d	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 lf 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 t	that is not covered by the General Rule and/or the Special Rules does not file Schedule	B (Form 990, 990:FZ, 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)

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).

	4	4	
Page	L of	1 of Part I	

Schedule (B (Form	990,	990-EZ,	or	990-PF)	(2010	J)
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Name of organization

Employer identification number

THE CONRAD BUEDEL FAMILY FOUNDATION

26-6135624

Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	JOHN CONRAD BUEDEL P.O. BOX 409 BROOKLANDVILLE, MD 21022	\$\$ \$	Person X Payroll Noncash (Complete Part If 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 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 of there is a noncash contribution.)

of Part II

Name of organization

Employer identification number

THE CONRAD BUEDEL FAMILY FOUNDATION

26-6135624

Part 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. from Part I	(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
		\$	
(a) No. from Part I	(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
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
-		 	
453 12-23-		\$	 990, 990-EZ, or 990-PF) (2

-			
). 	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	
	Transferee's name, address, and	d ZIP + 4	Relationship of transferor to transferee

Transferee's name, address, and ZIP + 4

(e) Transfer of gift

Relationship of transferor to transferee

FORM 990-PF DIVIDENT	DS AND	INTERES	T FROM	SECUR	ITIES	STATEMENT	1
SOURCE		GROSS A	MOUNT		TAL GAINS VIDENDS	COLUMN (A AMOUNT)
T ROWE PRICE	_	-	19.	· · · · · · · · · · · · · · · · · · ·	0.		19.
TOTAL TO FM 990-PF, PART I, I	LN 4 =		19.		0.		19.
FORM 990-PF	ACC	COUNTING	FEES			STATEMENT	2
FORM 990-PF DESCRIPTION	ACC (A EXPEN PER B	l) ISES N	(B) NET INVI	EST-	(C) ADJUSTED NET INCOM	(D) CHARITA	BLE
	(A EXPEN	l) ISES N	(B) NET INVI		ADJUSTED	(D) CHARITA E PURPOS	BLE

Form **8868**

(Rev. 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

UNCOLUMN PORT	Gild Surice File a dept	n are app	icadell for each return.			
	are filing for an Automatic 3-Month Extension, completer filing for an Additional (Not Automatic) 3-Month Ex					X
•	complete Part II unless you have already been granted a	-		•		
	ic filing (e-file). You can electronically file Form 8868 if y					ration
	to file Form 990-T), or an additional (not automatic) 3-mor				•	
	o file any of the forms listed in Part I or Part II with the ex		•		•	
	Benefit Contracts, which must be sent to the IRS in page	•	· · · · · · · · · · · · · · ·			
	v.irs.gov/efile and click on e-file for Charities & Nonprofits		too noncommittee of the	110 610	coordo mang or and re	A114
Part I			bmit original (no copies needed)			
	ation required to file Form 990-T and requesting an autor			nniete	_	
Part I on				•	•	
	corporations (including 1120-C filers), partnerships, REM				nsion of time	
	come tax returns.					
Type or	Name of exempt organization		<u> </u>	Employer identification number		
print						
File by the	THE CONRAD BUEDEL FAMILY FO	'AGNUC	TION	<u> </u>	6-6135624	
due date for filling your	Number, street, and room or suite no. If a P.O. box, so P.O. BOX 409	ee instruc	tions.			
roturn. Soe instructions		reign add	iress, see instructions.			
	BROOKLANDVILLE, MD 21022					
					·	
Enter the	Return code for the return that this application is for (file	a separa	te application for each return)		· ······	04
Applicat	ion	Return	Application			Return
ls For_		Code	is For			Code
Form 990)	01	Form 990-T (corporation)	•		07
Form 990)-BL	_ 02	Form 1041-A			08
Form 990)-EZ	03	Form 4720			09
Form 990)-PF	04	Form 5227			10
	0-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
Form 990	O-T (trust other than above)	06	Form 8870			12
	CONRAD BUEDEL	5500				
	ooks are in the care of P.O. BOX 409 -	BKOO				
	none No.▶ 410-458-8008		FAX No. >			_
• If the	organization does not have an office or place of business	in the Un	ited States, check this box	••••••		
	is for a Group Return, enter the organization's four digit (Group Exe	imption Number (GEN) If thi	is is fo	r the whole group, ch	eck this
box 🕨	. If it is for part of the group, check this box				ers the extension is f	or.
1 Ire	quest an automatic 3-month (6 months for a corporation AUGUST 15, 2011 to file the exempt					
	•	i organizai	tion return for the organization named a	bove.	The extension	
	or the organization's return for: X calendar year 2010 or					
			A H			
	tax year beginning	, an	d ending		 '	
2 If t	$\stackrel{ ext{de}}{=}$ tax year entered in line 1 is for less than 12 months, $\stackrel{ ext{de}}{=}$ Change in accounting period	heck reas	on: Initial return Fina	d retur	n	
	· · · · · · · · · · · · · · · · · · ·					
	nis application is for Form 990-BL, 990-PF, 990-T, 4720, o	or 6089, ei	nter the tentative tax, less any			_
	nrefundable credits. See instructions.			За	\$	0.
	nis application is for Form 990-PF, 990-T, 4720, or 6069,	-	-		_	_
	imated tax payments made. Include any prior year overp			_3b	\$	0.
A BA						
	iance due. Subtract line 3b from line 3a. Include your pa using EFTPS (Electronic Federal Tax Payment System). S	•		3c	_	0.

Form 886	8 (Rev. 1-2011)					Page 2	
• If you a	re filing for an Additional (Not Automatic) 3-Month Ex	tension, c	complete only Part II and check this b	οх , ,	▶	- LX.	
	y complete Part II if you have already been granted an a				8868.		
	re filing for an Automatic 3-Month Extension, complete						
Part II	Additional (Not Automatic) 3-Month E	xtensio	n of Time. Only file the onginal (no o	opies r	needed).		
Type or	Name of exempt organization	Employer identification number					
print	THE CONRAD BUEDEL FAMILY FOUNDATION						
File by the extended due date for bung your	Number, street, and room or suite no. If a PO box, see instructions.						
return Sce	City, town or post office, state, and ZIP code. For a for BROOKLANDVILLE, MD 21022	oreign add	fress, see instructions				
Enter the	Return code for the return that this application is for (file	e a separa	ite application for each return)			0 4	
Applicati	on	Return	Application	. —		Return	
Is For		Code	ls For			Code	
Form 990		01					
Form 990	·BL	02	Form 1041-A			08	
Form 990	·EZ	03	Form 4720			09	
Form 990	-PF	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) 06 Form 8870					12	
STOP! Do	o not complete Part II if you were not already granted	an autor	natic 3-month extension on a previo	usly file	ed Form 8868.		
Teleph	CONRAD BUEDEL poks are in the care of ► P.O. BOX 409 — sone No. ► 410-458-8008 organization does not have an office or place of business.		FAX No. ▶	2			
• If this i	s for a Group Return enter the organization's four digit	Group Eve	emption Number (GEN)	-i (-			
box ▶ [. If it is for part of the group, check this box	and atta	. If it is the name and Ethic of a	113 15 10	r the whole group,	Check this	
4 I re	quest an additional 3 month extension of time until -1	NOVEM:	BER 15, 2011	i mem.	iers the extension	is for.	
	calendar year 2010 , or other tax year beginning		, and ending				
6 If th	ne tax year entered in line 5 is for less than 12 months, c	check reas	ion Initial return	Final i	eturn		
	te in detail why you need the extension				···		
	DITIONAL TIME IS REQUIRED TO OR A COMPLETE AND ACCURATE R			ORMA	TION NECE	SSARY	
8a If th	is application is for Form 990 BL, 990-PF, 990-T, 4720,	or 6069. e	inter the tentative tax less any	T			
	refundable credits. See instructions		and the second second second second	8a	s	0.	
b If th	is application is for Form 990 PF, 990-T, 4720, or 6069.	enter any	refundable credits and estimated		<u> </u>		
	payments made. Include any prior year overpayment all						
	viously with Form 8868.		, , , , , , , , , , , , , , , , , , , ,	8b	s	0.	
c Bal	ance due. Subtract line 8b from line 8a. Include your pa	yment wit	th this form, if required, by using	† <u> </u>			
EFT	PS (Electronic Federal Tax Payment System) See instru	uctions.		8c	s	0.	
			d Verification	1	<u> </u>		
ii is true, co	ulties of perjury, I declare that I have examined this form, includ prrect, and complete, and that I am authorized to prepare this to	ina accomo		e hest o	f my knowledge and	belief,	
Signature	- Michelle L. Hudiner Tille >	<u> </u>	A	Date	> polosil	ไกม	
					Form 886 8 (F	Rev 1 2011\	
	7				. 54., 5540 ()	, 2011/	