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Return of Private Foundation

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

2010

OMB No 1545-0052

Department of	of the Treasury	Note. The foundation may b	reated as a Private be able to use a copy of this i	return to satisfy state repo	rting requirements	2010
		or tax year beginning		, and ending		
G Check a	all that apply	Initial return Amended return	Initial return of a fo		Final return Name change	
Name of f		OSEPH AND CAROL Y FOUNDATION C/O		et ew	A Employer Identification 83–0466544	
Number and	d street (or PO b	ox number if mail is not delivered to street	address)	Room/suite	B Telephone number	
	231 M	AIN STREET, CN 2	017		(732)736-5	
H Check t	type of organiza	RIVER, NJ 08754 ation X Section 501(c)(3) ex			D 1. Foreign organizations por 2. Foreign organizations check here and attach co	, check here
l Fair mar		assets at end of year J Accountil	her (specify)	Accrual	E If private foundation statunder section 507(b)(1) F If the foundation is in a 6	(A), check here 🕨 🕨
▶\$		258,876. (Part I, colu	mn (d) must be on cash b	asis.)	under section 507(b)(1)	
Part I	Analysis of Re (The total of amo necessarily equa	evenue and Expenses unts in columns (b), (c), and (d) may not it he 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)
		gifts, grants, etc., received .			N/A	
		f the foundation is not required to attach Sch. B				C+191.3. (1+1+3.4*4.4+4******************************
3	Interest on saving cash investments	s and temporary	6.	6,189.		STATEMENT
		nterest from securities	6,189.	0,189.		STATEMENT
	Gross rents					
1 -	Net rental income		2,519.	: 		**** **********************************
a ba	Gross sales price	from sale of assets not on line 10 for all 24,887.	2/313			
O D 1	assets on line 6a Capital dain net in	come (from Part IV, line 2)		2,519	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·
8 2	Net short-term					
9	Income modific	cations		······································		
10a	Gross sales desser	eturns CCC				
b	Less Cost of goo	ds sold				
	Gross profit or	(loss)				<u> </u>
11	Other incom	I JOE A G YOU [2]	0.714	0 714	 	
	Total. Add line		8,714.	8,714		<u> </u>
13	Compensation of	offices Cirectors Pulsteds, left		<u> </u>		
		a salaries and wages		 		
15 8 162	Pension plans, Legal fees	employee benefits	-			
Su lod	Accounting fee	•				
X C	Other profession			· · · · · · · · · · · · · · · · · ·		
9 17	Interest					
5	Taxes	STMT 3	67.	0		
19 19	Depreciation ar	nd depletion .				
[20	Оссирапсу	,				
2 1		nces, and meetings				
10	Printing and pu					
£ 23	Other expenses					
E		g and administrative	67.	0		
ŏ "	•	d lines 13 through 23 gifts, grants paid	16,247.	<u> </u>		16,24
		gins, grants paid s and disbursements.	10/21/6		1	
	Add lines 24 ai		16,314.	0	.	16,24
	Subtract line 2					
i i		e over expenses and disbursements	-7,600.			
		it income (if negative, enter -0-)		8,714		
		NCOME (if negative, enter -0-)			N/A	

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Da-	Attached schedules and amounts in the description column should be for ent-of-year amounts only	Beginning of year	End of	year
rar	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
-	Cash - non-interest-bearing	5,590.	20,663.	20,663.
1 2	Savings and temporary cash investments			
3	Accounts receivable ► 70 .			
	Less allowance for doubtful accounts	375.	70.	70.
	Pledges receivable		***************************************	······································
	Less allowance for doubtful accounts		ĺ	
	Grants receivable			
- `	disqualified persons	Ì		
١,	Other notes and loans receivable			
- ('	Less allowance for doubtful accounts	İ	i	
, ,	Inventories for sale or use			·
ا بة	•			
¥ S	Prepaid expenses and deferred charges			·
110	a Investments - U.S. and state government obligations			
	b Investments - corporate stock			
ļ	c Investments - corporate bonds			
11	Investments - land, buildings, and equipment basis	İ	1	
	Less. accumulated depreciation			
12	! Investments - mortgage loans .			
13	Investments - other STMT 4	228,585.	206,217.	238,143.
14	Land, buildings, and equipment basis			
	Less: accumulated depreciation			
15	Other assets (describe)			
- }		}		
16	Total assets (to be completed by all filers)	234,550.	226,950.	258,876.
17	Accounts payable and accrued expenses			
18	Grants payable .			
ဖ္တ 19	Deferred revenue			
≝ 20	Loans from officers, directors, trustees, and other disqualified persons			
Liabilities	Mortgages and other notes payable			
ے ₂₂	Other liabilities (describe			
23	Total liabilities (add lines 17 through 22)	0.	0.	
$\neg \vdash$	Foundations that follow SFAS 117, check here			
	and complete lines 24 through 26 and lines 30 and 31.			
8 24		234,550.	226,950.	
Net Assets or Fund Balanc				
E 26	· · · ·			
ᅙ -`	Foundations that do not follow SFAS 117, check here			
큔	and complete lines 27 through 31.			
S 27	· · · · · · · · · · · · · · · · · · ·			
ets	, , , , , , , , , , , , , , , , , , ,			
28 28	· · · · · · · · · · · · · · · · · · ·			
₹ 29		234,550.	226,950.	
¥ 30	Total net assets or fund balances	234,330.	220,330.	
	Total Heblishies and waters at the discharge	234,550.	226,950.	
[31	Total liabilities and net assets/fund balances	234,330.	220,930.	
Par	Analysis of Changes in Net Assets or Fund Ba	alances		
				
	al net assets or fund balances at beginning of year - Part II, column (a), line 3	30		224 552
-	ust agree with end-of-year figure reported on prior year's return)		. 1	234,550.
	er amount from Part I, line 27a		. 2	-7,600.
	er increases not included in line 2 (itemize)		3	0.
	d lines 1, 2, and 3		4	226,950.
5 De	creases not included in line 2 (itemize)		5	0.
6 To	al net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	lumn (b), line 30		226,950.
				Form 990-PF (2010)

FAMILY FOUNDATION C/O JOSEPH_BUCKELEW _

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Part IV Capital Gains	and Lo	osses for Tax on In	vestmen	Income					
(a) List and describe the kind(s) of property sold (e g , real estate,2-story brick warehouse, or common stock, 200 shs MLC Co)				(b) I	low acquired - Purchase - Donation		Date acquired mo , day, yr)	(d) Date sold (mo , day, yr)	
1a					_				
b SEE ATTACHEI	STA	TEMENT			┼		 		
<u>C</u>					╁		+		
<u>d</u>	-				-		+-		
(e) Gross sales price	(f) Depreciation allowed (g) Cost or other basis					(6	(h) Gain or (loss) e) plus (f) minus (
<u>a</u>	<u> </u>								
<u>b</u>	-								
d d	 		 -						
e 24,887.				22,36	8.				2,519.
Complete only for assets show		column (h) and owned by t	he foundation				(I) Ga	ins (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			col (k), but not less than -0-) or Losses (from col (h))		
a									
<u>b</u>						·			
<u>C</u>	 								
<u>d</u>	 								2,519.
<u>e</u>	J				\exists			······································	2,319.
2 Capital gain net income or (net o		(, , , , , , , , , , , , , , , , , , ,	in Part I, line)	2			2,519.
3 Net short-term capital gain or (le if gain, also enter in Part I, line 8			d (6).		1	į			
If (loss), enter -0- in Part I, line 8	3	<u> </u>				3		N/A	
Part V Qualification I	Jnder S	section 4940(e) for	Reduced	Tax on Net	Inv	estment I	ncon	ne	
(For optional use by domestic priva	te foundati	ons subject to the section 4	940(a) tax on	net investment ir	ncome	•)			
If section 4940(d)(2) applies, leave	this part bl	ank							
				Ab b					Yes X No
Was the foundation liable for the se If "Yes," the foundation does not qu Enter the appropriate amount in	alify under	section 4940(e). Do not coi	mplete this pa	rt					Yes ANO
(a)	Cach cold	(b)	Citoria Derore	making any onto	(c)				(d) ution ratio
Base periód years Calendar year (or tax year beginn	ing in)	Adjusted qualifying dist	ributions	Net value of no	nchai	itable-use ass	ets	Distrib (col (b) div	ution ratio ided by col. (c))
2009			5,686.			170,64			.033320
2008			4,984.			81,15			.061411
2007			0.			90,48			.000000
2006			0.			3,06	54.		.000000
2005							-		
2 Total of line 1, column (d)								2	.094731
3 Average distribution ratio for the	5-vear ba	se period - divide the total o	n line 2 by 5.	or by the number	r of ve	ars	r		
the foundation has been in exist				,			-	3	.023683
4 Enter the net value of noncharita	ible-use as	sets for 2010 from Part X, I	ine 5				-	4	240,032.
5 Multiply line 4 by line 3			-			• •	-	5	5,685.
6 Enter 1% of net investment inco	me (1% of	Part I, line 27b)					-	6	87.
7 Add lines 5 and 6								7	5,772.
8 Enter qualifying distributions fro	m Part XII,	line 4						8	16,247.
If line 8 is equal to or greater tha	ın line 7, ch	eck the box in Part VI, line	1b, and comp	lete that part usin	ng a 19	% tax rate			
See the Part VI instructions									

	THE JOSEPH AND CAROL BUCKELEW					
	n 990-PF (2010) FAMILY FOUNDATION C/O JOSEPH BUCKELEW		83-046			Page 4
Pa	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 49	40(e), or 4	1948 - see	instru	uctio	ns)
1 a	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 instruction	s) [
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕒 🗓 and enter 1%	þ	1		· · · · · · · · · · · · · · · · · · ·	87.
	of Part I, line 27b	İ				
C	: All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col	b) ノ				_
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		2			0.
3	Add lines 1 and 2		3			87.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		4			0.
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-		5			87.
6	Credits/Payments					
	2010 estimated tax payments and 2009 overpayment credited to 2010					
	Exempt foreign organizations - tax withheld at source					
C	Tax paid with application for extension of time to file (Form 8868)					
	Backup withholding erroneously withheld					_
	Total credits and payments Add lines 6a through 6d		7			0.
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached		8			
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		9			87.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		10			_
		lefunded 🕨	11			
	rt VII-A Statements Regarding Activities				15.4	T
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participa	te or intervene	e in	ļ	Yes	
	any political campaign?			<u>1a</u>	<u> </u>	X
þ	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions fo			1b	ļ	X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any mater	ials publishe	ed or			
	distributed by the foundation in connection with the activities.			1		١
	Did the foundation file Form 1120-POL for this year?	•		10	ļ	X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year	•				
	(1) On the foundation ▶ \$ O . (2) On foundation managers. ▶ \$	0.	-			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on for managers > \$	ındatıon				
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 in	corporation,	or			
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	_		3	<u> </u>	X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?		N/A	4b		l
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			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					
	By language in the governing instrument, or					1
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict	t with the state	e law			
	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	X_	
	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)					
	NJ					
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or des	gnate)				
	of each state as required by General Instruction G? If "No," attach explanation			8b	X	
Q	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(1)(3) or 494	2/i)/5) for cale	endar	1 7	1	1

year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If "Yes," complete Part XIV

10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses

UIIII	1990-PF (2010) FAMILY FOUNDATION C/O JOSEPH BUCKELEW 83-040	0344		i aye c
Pa	rt VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," attach schedule (see instructions)			X
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before			
	August 17, 2008?	12	[Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address ► N/A			
14	The books are in care of ► ORGANIZATION Telephone no ►732-7	36-5	205	
	Located at ►231 MAIN STREET, CN 2017, TOMS RIVER, NJ ZIP+4 ►0			
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	N	/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	. 03	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	10-	ا	
Ď.	the foreign country The Statements Regarding Activities for Which Form 4720 May Be Required			<u> </u>
1 0	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1.		 	163	140
14	During the year did the foundation (either directly or indirectly). (1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No	İ		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disgualified person? Yes X No	1		
		,		
	(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)?			
	(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)			
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	İ		
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	1		
	before the first day of the tax year beginning in 2010?	10		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))	j		
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) beginning			
	before 2010? Yes X No]		
	If "Yes," list the years >	-		
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
	statement - see instructions) N/A	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			
	>			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?			
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.) N/A	3b		1
42	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		Х
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	1		ļ
J	had not been removed from jeopardy before the first day of the tax year beginning in 2010?	4b		Х
	nee not been to not populary botton the met day of the tax year beginning or to fee.			

THE JOSEPH AND CAROL BUC		_	00 04665	
Form 990-PF (2010) FAMILY FOUNDATION C/O JO			83-04665	4.4 Page 6
Part VII-B Statements Regarding Activities for Which I	Form 4720 May Be I	Required (contin	ued)	
5a During the year did the foundation pay or incur any amount to		<u></u>	[]	
(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), or	TTP .	1 1		
any voter registration drive?		s X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes		Ye	s X No	
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section		(32)	
509(a)(1), (2), or (3), or section 4940(d)(2)?			s X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f			
the prevention of cruelty to children or animals?			es X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und		in Regulations	27/2	.
section 53 4945 or in a current notice regarding disaster assistance (see instru			N/A	ib
Organizations relying on a current notice regarding disaster assistance check h				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption for				
expenditure responsibility for the grant?	N	I/A	es L No	
If "Yes," attach the statement required by Regulations section 53.494	5-5(d).		1	
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on			
a personal benefit contract?		<u> </u>	es X No	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?		. 6	ib 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		Ye	es X No	
b If "Yes," did the foundation receive any proceeds or have any net income attribu				/b
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors	ees, Foundation Ma	nagers, Highly	/	
1 List all officers, directors, trustees, foundation managers and their	compensation.			
	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans	(e) Expense account, other
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	and deferred compensation	allowances
JOSEPH BUCKELEW	TRUSTEE			
231 MAIN STREET		1	1	
TOMS RIVER, NJ 08754	2.00	0.	0.	0.
CAROL BUCKELEW	TRUSTEE			
231 MAIN STREET				
TOMS RIVER, NJ 08754	0.00	0.	0.	0.
BRIAN BUCKELEW	TRUSTEE			
231 MAIN STREET				
TOMS RIVER, NJ 08754	0.00	0.	0.	0.
KEVIN BUCKELEW	TRUSTEE			
231 MAIN STREET				
TOMS RIVER, NJ 08754	0.00	0.	0.	<u>0.</u>
2 Compensation of five highest-paid employees (other than those inc		enter "NONE."		
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				
		<u> </u>		
Total number of other employees paid over \$50,000			>	0
			Form 9	990-PF (2010)

Part VIII Information About Officers, Directors, Trustees, Foundary Paid Employees, and Contractors (continued)	ation Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter	er "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		•
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statis number of organizations and other beneficiaries served, conferences convened, research papers pro	stical information such as the duced, etc	Expenses
1 N/A		-
·		
2		
3		
		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on	lines 1 and 2	Amount
1 N/A		
2		
All other program related in real-months. Contracting		
All other program-related investments. See instructions 3		
J		
Total Add lines 1 through 3		0.

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	- T	
а	Average monthly fair market value of securities	1a	237,720.
	Average of monthly cash balances	1b	5,967.
	Fair market value of all other assets	10	
	Total (add lines 1a, b, and c)	1d	243,687.
	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	243,687.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	3,655.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	240,032.
6	Minimum Investment return. Enter 5% of line 5	6	12,002.
P	art XI Distributable 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	12,002.
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	87.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	11,915.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	11,915.
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	11,915.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		46.645
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	16,247. 0.
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		
а	Suitability test (prior IRS approval required)	3a	
þ	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	16,247.
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	87.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	16,160.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation (4940(e) reduction of tax in those years	qualifies foi	the section

Form 990-PF (2010)

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,				11,915.
line 7				**************************************	
2 Undistributed income, if any, as of a Enter amount for 2009 only	the end of 2010			0.	
b Total for prior years	 			, , , , , , , , , , , , , , , , , , , ,	. Himilitati - '!'h-'ration####'
D total for prior years			0.		
3 Excess distributions carryove	er, if any, to 2010	+1 1-1-11+1+1			
a From 2005					
b From 2006					
c From 2007					
d From 2008	2 026				
e From 2009	2,036.	2 026			
f Total of lines 3a through e		2,036.			
4 Qualifying distributions for 20	010 from				
Part XII, line 4· ► \$				0.	
a Applied to 2009, but not mor	£			V •	H. 11. 11. 11. 11. 11. 11. 11. 11. 11. 1
b Applied to undistributed inco	me of prior		0		
years (Election required - see	F -		0.	, . ;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;	······································
c Treated as distributions out of	of corpus				
(Election required - see instru	uctions)	0.			11,915.
d Applied to 2010 distributable		4 222			11,913.
e Remaining amount distribute	d out of corpus	4,332.		, , , ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ;	0.
5 Excess distributions carryover app (If an amount appears in column (commust be shown in column (a))	olied to 2010 d), the same amount	0.			0.
6 Enter the net total of each co	olumn as				
a Corpus Add lines 3f, 4c, and 4e s	Subtract line 5	6,368.			
b Prior years' undistributed inc	F**				
line 4b from line 2b			0.		
c Enter the amount of prior yea undistributed income for whi deficiency has been issued, of the section 4942(a) tax has the assessed	ich a notice of or on which		0.		
d Subtract line 6c from line 6b	Taxable				
amount - see instructions			0.		
e Undistributed income for 200	09 Subtract line				
4a from line 2a Taxable amo	į.			0.	
f Undistributed income for 20	10 Subtract				
lines 4d and 5 from line 1 Ti be distributed in 2011	his amount must				0.
7 Amounts treated as distribut	ions out of	111 1 ₂₁ 1 11 1 ₂₁₁₁ 11 11		**************************************	
corpus to satisfy requirement	1	0.			
section 170(b)(1)(F) or 4942					· · · · · · · · · · · · · · · · · · ·
8 Excess distributions carryov	l l	0.			
not applied on line 5 or line 7					
9 Excess distributions carryon		6,368.			
Subtract lines 7 and 8 from I	inic Va	0,000.			
10 Analysis of line 9					
a Excess from 2006					
b Excess from 2007					
c Excess from 2008	2,036.				
d Excess from 2009	4,332.		1		
e Excess from 2010	-,002.	_/	1	<u> </u>	r 000 DE (0040)

THE JOSEPH AND CAROL BUCKELEW

FAMILY FOUNDATION C/O JOSEPH BUCKELEW

N/A Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9) 1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2010, enter the date of the ruling 4942(1)(5) 4942(j)(3) or b Check box to indicate whether the foundation is a private operating foundation described in section Prior 3 years Tax year 2 a Enter the lesser of the adjusted net (a) 2010 (b) 2009 (c) 2008 (d) 2007 (e) Total income from Part I or the minimum investment return from Part X for each year listed b 85% of line 2a c Qualifying distributions from Part XII, line 4 for each year listed d Amounts included in line 2c not used directly for active conduct of exempt activities e Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c Complete 3a, b, or c for the alternative test relied upon a "Assets" alternative test - enter (1) Value of all assets (2) Value of assets qualifying under section 4942(j)(3)(B)(i) b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed c "Support" alternative test - enter (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) (2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii) (3) Largest amount of support from an exempt organization (4) Gross investment income Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see the instructions.) Information Regarding Foundation Managers: a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2)) SEE STATEMENT 5 b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest NONE Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs: Check here I if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d a The name, address, and telephone number of the person to whom applications should be addressed. JOSEPH BUCKELEW, 732-736-5205 231 MAIN STREET, CN 2017, TOMS RIVER, NJ 08754 b The form in which applications should be submitted and information and materials they should include: THE EXACT FORMAT HAS NOT BEEN DETERMINED. SUBMISSIONS MUST BE WRITTEN. c Any submission deadlines SUBMISSIONS ARE CONSIDERED AT THE DISCRETION OF THE FOUNDATION MANAGEMENT. d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors NO CURRENT RESTRICTIONS

83-0466544

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THE JOSEPH AND CAROL BUCKELEW FAMILY FOUNDATION C/O JOSEPH BUCKELEW

Form 990-PF (2010)

Part XV Supplementary Information (continued)

83-0466544 Page 11

3 Grants and Contributions Paid During the Year or Approved for Future Payment								
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount				
Name and address (home or business)	or substantial contributor	recipient	Contribution					
a Paid during the year	or substantial contributor	recipient						
SEE STATEMENT 6				16 247				
Total b Approved for future payment NONE			▶ 3a	16,247.				

Form 990-PF (2010) FAMILY FOUN	DATION C/O	JOSEPH BUC	KELEW	83-0	466544 Page 12
Part XVI-A Analysis of Income-P	_	ousiness income	Contradad	510 512 514	
Enter gross amounts unless otherwise indicated	(a) Business	(b)	(C) Exclu- sion	(d)	(e) Related or exempt
1 Program service revenue	code	Amount	code	Amount	function income
a	· I I				
b	1 1				
<u> </u>	- I I		+-+-		
d				-	
e					
g Fees and contracts from government agencies			- - -		
g Fees and contracts from government agencies 2 Membership dues and assessments					
3 Interest on savings and temporary cash	 		- 		
investments			14	6.	
4 Dividends and interest from securities			14	6,189.	
5 Net rental income or (loss) from real estate		······································			
a Debt-financed property		<u></u>			
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 .			18	2,519.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue					
a					
b					
<u> </u>	1				
d					
B				8,714.	0.
12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e)	<u> </u>		<u> </u>	13	8,714.
(See worksheet in line 13 instructions to verify calculati	one \		• •	10	0//14.
Part XVI-B Relationship of Activi		plishment of	Exempt Pu	ırposes	
Line No. Explain below how each activity for whi					elishment of
the foundation's exempt purposes (oth					
					
				· · - · · · · · · · · · · · · · · · · ·	·
				· · · · · · · · · · · · · · · · · · ·	

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Part	XVII	Information Re Exempt Organ		sfers To	and Transactions	and Relations	ships With No	oncharitabl	е	
1 Dic	d the or			of the following	g with any other organiza	tion described in sec	tion 501(c) of		Yes	No
					27, relating to political orga		` '			
		from the reporting found			-					
) Cash	g			g 			1a(1)	[Х
• • •) Other	assets						1a(2)		X
		sactions						<u> </u>		
		of assets to a noncharita	hla avamnt organizat	tion				16(1)	1	х
		ases of assets from a no				٠		1b(2)	 	X
			•	nyamzanon					├	X
		l of facilities, equipment, oursement arrangements						1b(3)		X
٠,		•						1b(4)		X
		or loan guarantees						1b(5)		X
		mance of services or me	•	•				1b(6)	-	X
	-	facilities, equipment, ma	=		•			10		
or	services	-	oundation. If the four	ndation receiv	dule Column (b) should a ed less than fair market va	-		-	sets,	
(a) Line n	<u>-</u>	(b) Amount involved			exempt organization	(d) Description	n of transfers, transact	ons and sharing a	rangeme	
(2) 2	-	(3) / 111001111111111111111111111111111111	(0)	N/A	- Gridings organization	(2) 3000,000		and and anothing a	-ungerne	
	+-							·		
	+									
	_							-		
	+-									
	+-					- 	· · · · · · · · · · · · · · · · · · ·			
	+					 				
						 -				
							·			
				····						
								 -		
										
	_	·								
	_									
ın s	section	dation directly or indirect 501(c) of the Code (other mplete the following sche	than section 501(c)		or more tax-exempt organion 527?	nizations described		Yes	X] No
		(a) Name of org			(b) Type of organization		(c) Description of r	elationship		
		N/A			, , , , , , , , , , , , , , , , , , ,	<u> </u>				
						 				
							······································			
	-									
					-					
Sign Here	and c		rer other than taxpayer		ng accompanying schedules a ased on all information of which Date	preparer has any know		ge and belief, it is th	ле, согге	st,
		Print/Type preparer's na		Preparer's s		Date	Check If	PTIN		
	ļ			1//	10/1/11	+	self- employed			
Paid	4	ROBERT D.	ELLIOTT	Koli	1 Mllist	06/29/11	, -			
Prepa	arer	Firm's name ► MOH		T BAUE	R & GASS CPA	AS PA	Firm's EIN			
Use (CHILLS HATHE P 17011		1 DAOD	it a Gribb CF	121	LIIII 9 EIN			
Joe (וווע	Firm's address ▶ 13	39 BIMED	AVENIIE			- 			
			KEWOOD, N		1		Dhone 7	32-363-	650	Λ
		LA	VEWOOD' N	0 0070	<u> </u>	- <u>.</u>	Phone no /			
								Form 990	-PF ()	ZU1U)

N/A

If gain, also enter in Part I, line 8, column (c) If (loss), enter "-0-" in Part I, line 8

FORM 990-PF INTEREST ON SAV	INGS AND	TEM	PORARY C	ASH II	NVESTMENTS	STATEMENT	1
SOURCE					-	AMOUNT	
GOLDMAN SACHS							6.
TOTAL TO FORM 990-PF, PART I	, LINE 3	, co	LUMN A				6.
FORM 990-PF DIVIDEN	DS AND I	NTER	EST FROM	SECU	RITIES	STATEMENT	2
SOURCE	G	ROSS	AMOUNT		ITAL GAINS IVIDENDS	COLUMN (A AMOUNT	.)
GOLDMAN SACHS			6,189.		0.	6,1	89.
TOTAL TO FM 990-PF, PART I, I	LN 4 =		6,189.		0.	6,1	89.
FORM 990-PF		TAX	ES			STATEMENT	3
DESCRIPTION	(A) EXPENS PER BO	ES		EST-			
FEDERAL EXCISE TAX STATE OF NJ FILING FEES		37. 30.	· · · · · · · · · · · · · · · · · · ·	0.			0.
TO FORM 990-PF, PG 1, LN 18		67.		0.			0.
FORM 990-PF	OTHER	INV	ESTMENTS			STATEMENT	4
DESCRIPTION			LUATION ETHOD	вос	OK VALUE	FAIR MARKE VALUE	T
GS CORE FIXED-INC A MUTUAL FIGS HIGH YIELD INSTL MUTUAL FIGURATION OF PROPERTY STANDARD & POORS DEP ROPTS DEP ROPTS DEPART & POORS DEP ROPTS DEPART & POORS DEP	D PDR INDEX		COST COST COST COST COST		53,775. 5,255. 81,540. 4,376. 55,429. 5,842.	100,1 6,4 61,5	85. 11. 12.
TOTAL TO FORM 990-PF, PART I	I, LINE	13			206,217.	238,1	43.

THE JOSEPH AND CAROL BUCKELEW	FAMILY FOU	8	3-0466	544
FORM 990-PF PAR	STAT	EMENT	5	
NAME OF MANAGER JOSEPH BUCKELEW CAROL BUCKELEW				
	AND CONTRIBUTIONS DURING THE YEAR	STAT	EMENT	6
RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT		AMOUI	NT
21 PLUS FOUNDATION INC	N/A			
ASSUMPTION COLLEGE FOR SISTERS	N/A			
BAIS KAILA HIGH SCHOOL	N/A			
CANCER SUPPORT SERVICES	N/A		<u>:</u>	50.

N/A

N/A

CONNER STRONG CHARITABLE FUND

DVNF

THE JOSEPH AND CAROL BUCKELEW	FAMILY FOU	83-0466544
CFA SUPPORT SERVICES	N/A	50.
FIRST ASSEMBLY OF GOD CHURCH	N/A	
HACKENSACK UNIVERSITY MEDICAL CENTER	N/A	
JOE PICURRO FAMILY	N/A	
LAKEWOOD HIGH SCHOOL ALUMNI	N/A	150.
LARC SCHOOL	N/A	
MARINE CORP COUNCIL	N/A	
MISCELLANEOUS	N/A	347.
MOSSREHAB DBIC	N/A	
NJSGA CADDIE FUND	N/A	

THE JOSEPH AND CAROL BUCKELEW	FAMILY FOU	83-0466544
OCEAN COUNTY LIBRARY FOUNDATION	N/A	
OCEAN COUNTY MAYORS ASSOC	N/A	100.
OCEAN HARBOR HOUSE FOUNDATION	N/A	1,000.
SOROPTIMIST INTERNATIONAL OF TR	N/A	
SPIRIT OF GIVING	N/A	
STRAND VENTURES INC	N/A	
TEEN CENTER FOR EDUCATION & OPPORTUNITY	N/A	
THE HERITAGE FOUNDATION	N/A	50.
TOMS RIVER VOLUNTEER FIRE DEPT	N/A	50.
YESHIVA MORESHES YEHOSHUA	N/A	

THE JOSEPH AND CAROL BUCKELEW	FAMILY FOU	83-0466544
OCEAN MEDICAL CENTER	N/A	4,350.
THE JOHN THEURER CANCER CENTER	N/A	50.
SBHSC HAITI EARTHQUAKE FUND	N/A	250.
THE CANCER INSTITUTE OF NJ FOUNDATION	N/A	400.
OCEAN COUNTY COLLEGE FOUNDATION	N/A	1,100.
MARCH OF DIMES	N/A	25.
THE COOPER FOUNDATION	N/A	100.
RANNEY SCHOOL	N/A	500.
PREVENTION FIRST	N/A	125.
TOMS RIVER FIRST AID SQUAD INC	N/A	50.

THE JOSEPH AND CAROL BUCKELEW	FAMILY FOU	83-0466544
VFW	N/A	25.
JACOB'S CURE	N/A	500.
COUNT BASIE THEATRE	N/A	1,000.
HOPE FOR THE WARRIORS	N/A	1,000.
KIMBALL MEDICAL CENTER FOUNDATION	N/A	500.
SAINT BARNABAS BURN FOUNDATION	N/A	100.
SPECIAL STRIDES	N/A	50.
SBBF	N/A	50.
ADACO	N/A	100.
LARC SCHOOL	N/A	500.

THE JOSEPH AND CAROL BUCKELEW I	FAMILY FOU	83-0466544
OPPORTUNITY PROJECT INC	N/A	1,000.
JERSEY SHORE COUNCIL BSA	N/A	525.
ST JUDE	N/A	100.
BBBSOC	N/A	100.
ALEXANDRA ROSE TOZZI FOUNDATION	N/A	1,500.
MARIA LUISA DE MORENO INTL FOUNDATION	N/A	250.
FCA	N/A	200.
TOTAL TO FORM 990-PF, PART XV, L	JINE 3A	16,247.

FILED 5/9/11

Fórm 8868

(Rev January 2011)

Department of the Treasury Internal Revenue Service

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

File a separate application for each return.

OMB No. 1545-1709

If you a	ire filing for an Automatic 3-Month Extension, comple	te only Pa	art I and check this box		-	\Box
If you a	re filing for an Additional (Not Automatic) 3-Month Ex	ctension, c	complete only Part II (on page 2 of this	form).		
Do not co	omplete Part II unless you have already been granted	an automa	atic 3-month extension on a previously fi	led Form	8868.	
Electronic	c filing (e-file). You can electronically file Form 8868 if	you need a	a 3-month automatic extension of time t	o file (6 m	onths for a corpo	oration
required to	o file Form 990-T), or an additional (not automatic) 3-mo	nth extens	sion of time. You can electronically file F	orm 8868	to request an ex	tension
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	sfers Ass	ociated With Cer	taın
Personal E	Benefit Contracts, which must be sent to the IRS in pap	oer format	(see instructions). For more details on t	he electro	nic filing of this f	orm,
	irs.gov/efile and click on e-file for Charities & Nonprofits					
Part I	Automatic 3-Month Extension of Time	e. Only su	ibmit original (no copies needed).			
A corpora	tion required to file Form 990-T and requesting an autor	matic 6-mo	onth extension - check this box and com	plete		
Part I only	,				>	
	corporations (including 1120-C filers), partnerships, REM ome tax returns	1ICs, and t	rusts must use Form 7004 to request ar	extensio	n of time	
Type or	Name of exempt organization	r rat.r		Employe	er identification	number
print	THE JOSEPH AND CAROL BUCKET		aver eu	02.0466544		
File by the	FAMILY FOUNDATION C/O JOSE			83-	-0466544	
due date for filing your return See	Number, street, and room or suite no. If a P.O. box, s 231 MAIN STREET, CN 2017	ee instruc	tions.			
instructions	City, town or post office, state, and ZIP code. For a for TOMS RIVER, NJ 08754	oreign add	lress, see instructions.			
Enter the I	Return code for the return that this application is for (file	e a separa	te application for each return)			0 4
Application	on	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
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
	ORGANIZATION			_		
• The bo	oks are in the care of > 231 MAIN STREE!	T, CN	2017 - TOMS RIVER,	30 LN	3754	
Telepho	one No. ► 732-736-5205		FAX No. ►			
If the or	rganization does not have an office or place of business	s in the Ur	nited States, check this box		>	
If this is	s for a Group Return, enter the organization's four digit	Group Exe	emption Number (GEN) If the	s is for th	e whole group, c	heck this
box ▶ [. If it is for part of the group, check this box	and atta	ach a list with the names and EINs of all	members	the extension is	for.
	quest an automatic 3-month (6 months for a corporation	required	to file Form 990-T) extension of time unt	ıl		
	AUGUST 15, 2011 , to file the exemp	t organiza	tion return for the organization named a	bove. The	e extension	
	or the organization's return for:					
►L	$\overline{\underline{X}}$ calendar year $\underline{2010}$ or					
▶∟	tax year beginning	, an	d ending			
2 If the	e tax year entered in line 1 is for less than 12 months, c	heck reas	on: Initial return Fina	al return		
3a If the	is application is for Form 990-BL, 990-PF, 990-T, 4720,	or 6069. e	nter the tentative tax. less any	 		
	refundable credits. See instructions.	J. 5500, 0	terrent e terr, reed dity	3a \$	•	0.
	is application is for Form 990-PF, 990-T, 4720, or 6069,	enter anv	refundable credits and	•		
	estimated tax payments made. Include any prior year overpayment allowed as a credit		0.			
	ance due. Subtract line 3b from line 3a. Include your pa			*	·	<u>-</u>
	using EFTPS (Electronic Federal Tax Payment System).	•		3c \$	•	0.
	If you are going to make an electronic fund withdrawal					

LHA