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Department of the Treasury

# **Return of Private Foundation**

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

OMB No 1545-0052

|  | be able to use a copy of this      |                           |  |   |
|--|------------------------------------|---------------------------|--|---|
| For calendar year 2010, or tax year beginning JUL  |                                    |                           | <u>JUN 30, 2011</u>                                    |   |
| G Check all that apply: Initial return   |                                    | rmer public charity       | Final return   |   |
| Amended return   | Address chang                      | je LXJ                    | Name change  |   |
| Name of foundation   |                                    |                           | A Employer identification                              | number  |
| THE ANSELL GRIMM & AA  |                                    | ON THE                    | 26-0757646   |   |
| Number and street (or P O box number if mail is not delivered to street  |                                    |                           | B Telephone number                                     |   |
| C/O MICHAEL BENEDETTO  | •                                  | l l                       | 732-922-10   | 00  |
| City or town, state, and ZIP code  | , <u>DDQ: 1300 .</u>               |                           | C If exemption application is pe                       |   |
| 1 * ' '  | 7712                               |                           | D 1. Foreign organizations                             |   |
| H Check type of organization: X Section 501(c)(3) ex   |                                    |                           | Foreign organizations mer<br>check here and attach cor | eting the 85% test,   |
|  | Other taxable private founda       | tion                      | E If private foundation stat                           |   |
| I Fair market value of all assets at end of year   J   Accounting  | ng method: X Cash                  | Accrual                   | under section 507(b)(1)                                | (A), check here   |
|  | her (specify)                      |                           | F If the foundation is in a 6                          | 60-month termination  |
|  | mn (d) must be on cash b           | oasis)                    | under section 507(b)(1)                                |   |
| 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))  | (a) Revenue and expenses per books | (b) Net investment income | (c) Adjusted net<br>income                             | (d) Disbursements<br>for charitable purposes<br>(cash basis only) |
| 1 Contributions, gifts, grants, etc., received   | 107,000.                           |                           |  | <u>.                                    </u>                      |
| 2 Check Inf the foundation is not required to attach Sch. B  |                                    |                           |  |   |
| Interest on savings and temporary cash investments   |                                    |                           |  |   |
| 4 Dividends and interest from securities   |                                    |                           |  |   |
| 5a Gross rents   |                                    |                           |  |   |
| b Net rental income or (loss)  |                                    |                           |  |   |
| 6a Net gain or (loss) from sale of assets not on line 10 Gross sales price for all   |                                    |                           |  | -g. ··  |
| assets on line da  |                                    |                           |  |   |
| b Net rental income or (loss)  6a Net gain or (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)  Net short-term capital gain              |                                    | 0.                        |  |   |
| , 8 Net short-term capital gain  in 9 Income modifications   |                                    |                           |  |   |
| Gross sales less returns and allowances  |                                    |                           |  |   |
| b Less Cost of goods sold (17)   | 1                                  |                           |  |   |
| c Gross profit archoss)  |                                    |                           |  | ·   |
| Other income   |                                    |                           |  | <del> </del>  |
| C12 Totals-And lines 1 through 1 10 1 (C)  | 107,000.                           | 0.                        | 0.   |   |
| 13 Compensation of officers, directors, trustees, etc.   | 0.                                 | 0.                        | 0.   | 0.  |
| 14 Other employee salaries and wages   |                                    |                           |  |   |
| 15 Pension plans, ampleyed benefits  |                                    |                           |  |   |
| 8 16a Legal fees   |                                    |                           | -  |   |
| b Accounting fees  |                                    |                           |  |   |
| c Other professional fees  |                                    |                           |  |   |
| 17 Interest 18 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses STMT 1 24 Total operating and administrative expenses. Add lines 13 through 23 |                                    | <del></del>               |  |   |
| ខ្លួ 19 Depreciation and depletion   |                                    | ····                      |  |   |
| E 20 Occupancy   | -                                  | <del></del>               |  |   |
| 21 Travel, conferences, and meetings   |                                    |                           |  | ,   |
| 22 Printing and publications   |                                    |                           |  |   |
| 23 Other expenses STMT 1   | 263.                               | 0.                        | 0.   | 263.  |
| ਬੁੱਲ 24 Total operating and administrative   |                                    |                           |  |   |
| expenses. Add lines 13 through 23  | 263.                               | 0.                        | 0.   | 263.  |
| 25 Contributions, giπs, grants paid  | 124,066.                           |                           |  | 124,066.  |
| 26 Total expenses and disbursements.   | 40.00                              | _                         | _  |   |
| Add lines 24 and 25  | 124,329.                           | 0.                        | 0.   | 124,329.  |
| 27 Subtract line 26 from line 12:  | 17 200                             |                           |  |   |
| 2 Excess of revenue over expenses and disbursements  | <17,329.                           |                           |  |   |
| b Net investment income (if negative, enter -0-)   |                                    | 0.                        |  |   |
| C Adjusted net income (if negative, enter -0-)   |                                    |                           | 0.   |   |

| - 01                        | 111 50 | THE ANSELL GRIMM & AAROL   |                   |                | U/5/646 Faye 2            |
|-----------------------------|--------|--|-------------------|----------------|---------------------------|
| P                           | art    | Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only | Beginning of year | End o          | -                         |
|                             | r = -  |  | (a) Book Value    | (b) Book Value | (c) Fair Market Value     |
|                             | I      | Cash - non-interest-bearing  | 18,184.           | 855.           | 855.                      |
|                             | 2      | Savings and temporary cash investments   |                   |                |                           |
|                             | 3      | Accounts receivable ►  |                   |                |                           |
|                             |        | Less: allowance for doubtful accounts ▶  |                   |                |                           |
|                             | 4      | Pledges receivable ►   |                   |                |                           |
|                             |        | Less: allowance for doubtful accounts ▶  |                   |                |                           |
|                             | 5      | Grants receivable  |                   |                |                           |
|                             | 6      | Receivables due from officers, directors, trustees, and other  |                   |                |                           |
|                             |        | disqualified persons   |                   |                |                           |
|                             | 7      | Other notes and loans receivable   |                   | <del></del>    |                           |
|                             | •      | Less: allowance for doubtful accounts  |                   |                |                           |
| w                           | 8      | Inventories for sale or use  |                   |                |                           |
| Assets                      | _      | <del> -</del>  |                   |                |                           |
| As                          | I      | Prepaid expenses and deferred charges Investments - U.S. and state government obligations                      | <del></del>       |                |                           |
|                             |        |  |                   | <del></del>    |                           |
|                             |        | Investments - corporate stock  |                   |                |                           |
|                             | l ·    | Investments - corporate bonds  | ,                 |                |                           |
|                             | 11     | Investments - land, buildings, and equipment, basis  |                   |                |                           |
|                             |        | Less accumulated depreciation  |                   |                |                           |
|                             | 12     | Investments - mortgage loans   |                   |                |                           |
|                             | 13     | Investments - other  |                   |                |                           |
|                             | 14     | Land, buildings, and equipment; basis ▶  |                   |                |                           |
|                             |        | Less accumulated depreciation  |                   |                |                           |
|                             | 15     | Other assets (describe ►)  |                   | ·              |                           |
|                             |        |  |                   |                |                           |
|                             | 16     | Total assets (to be completed by all filers)   | 18,184.           | 855.           | 855.                      |
|                             | 17     | Accounts payable and accrued expenses  |                   |                |                           |
|                             | 18     | Grants payable   |                   |                |                           |
| Ø                           | 19     | Deferred revenue   |                   |                |                           |
| Liabilities                 | 20     | Loans from officers, directors, trustees, and other disqualified persons                                       |                   |                |                           |
| abi                         | 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   |                   |                |                           |
|                             |        | and complete lines 24 through 26 and lines 30 and 31.  |                   |                |                           |
| es                          | 24     | Unrestricted   |                   |                |                           |
| J.                          | 25     | Temporarily restricted   |                   |                |                           |
| 3ali                        | 26     | Permanently restricted   |                   |                |                           |
| ď                           | [      | Foundations that do not follow SFAS 117, check here  |                   |                |                           |
| Ξ                           |        | •  |                   |                |                           |
| Net Assets or Fund Balances | 27     | and complete lines 27 through 31.  | 0.                | 0.             |                           |
| ets                         | 27     | Capital stock, trust principal, or current funds   | 0.                | 0.             |                           |
| SS                          | 28     | Paid-in or capital surplus, or land, bldg., and equipment fund   |                   | 855.           |                           |
| at A                        | 29     | Retained earnings, accumulated income, endowment, or other funds   | 18,184.           |                |                           |
| ž                           | 30     | Total net assets or fund balances  | 18,184.           | 855.           |                           |
|                             |        | Total liabilities and not possessifted belongs   | 18,184.           | 855.           |                           |
| _                           | 31     | Total liabilities and net assets/fund balances   |                   | 000.           |                           |
| P                           | art    | Analysis of Changes in Net Assets or Fund Ba   | alances           |                |                           |
| 1                           | Tota   | I net assets or fund balances at beginning of year - Part II, column (a), line 3                               | 30                |                |                           |
|                             | (mu    | st agree with end-of-year figure reported on prior year's return)  |                   | 1              | 18,184.                   |
| 2                           |        | r amount from Part I, line 27a   |                   | 2              | 18,184.<br><17,329.       |
|                             |        | r increases not included in line 2 (itemize)   |                   | 3              | 0.                        |
|                             |        | lines 1, 2, and 3  |                   | 4_             | 855.                      |
|                             |        | reases not included in line 2 (itemize)  |                   | 5              | 0.                        |
|                             |        | I net assets or fund balances at end of year (line 4 minus line 5) - Part II, co                               | lumn (b), line 30 | 6              | 855.                      |
| _                           |        |  |                   |                | Form <b>990-PF</b> (2010) |

|   |                                   | ELL GRIMM & sses for Tax on In                            |                 |                                      | ON           | <u>, I</u>                 | NC            | 2           | <u>6-075</u>                 | 7646                                | Page 3        |
|---|-----------------------------------|---|-----------------|--------------------------------------|--------------|----------------------------|---------------|-------------|------------------------------|-------------------------------------|---------------|
| (a) List and  | describe the k                    | ind(s) of property sold (e.g.<br>or common stock, 200 shs | ., real estate, | Income                               | <b>(b)</b> D | How ac<br>- Purc<br>- Dona | nase i '      | c) Date a   | acquired<br>ay, yr.)         | (d) Dat<br>(mo., d                  |               |
| 1a  |                                   |   |                 |                                      |              |                            |               |             |                              |                                     |               |
| b   | NONE                              |   |                 |                                      |              |                            |               |             |                              |                                     |               |
| C   |                                   |   |                 |                                      |              | <del>.</del>               |               |             |                              |                                     |               |
| d   |                                   |   |                 |                                      | ļ            |                            |               | <del></del> |                              |                                     |               |
| (e) Gross sales price   | (f)                               | Depreciation allowed (or allowable)                       |                 | st or other basis<br>expense of sale |              |                            |               |             | ain or (loss)<br>(f) minus ( |                                     | <u> </u>      |
| a<br>b  |                                   |   |                 |                                      |              |                            |               |             |                              |                                     |               |
| C   |                                   |   |                 | <del></del>                          |              |                            |               |             |                              |                                     | ·.            |
| d   |                                   |   | ·               |                                      |              |                            |               |             |                              |                                     |               |
| <u>e</u>  |                                   |   |                 |                                      |              |                            |               |             |                              |                                     |               |
| Complete only for assets sh                                       | owing gain in                     | column (h) and owned by t                                 | the foundation  | on 12/31/69                          |              |                            |               |             | ol. (h) gaın                 |                                     |               |
| (i) F.M.V. as of 12/31/69   |                                   | (j) Adjusted basis<br>as of 12/31/69                      |                 | cess of col. (I)<br>col. (J), If any |              |                            | cor (         | Losses      | ot less than<br>(from col. ( | h))                                 |               |
| a   |                                   |   |                 |                                      |              |                            |               |             |                              |                                     |               |
| <u>b</u>  |                                   |   |                 |                                      |              |                            |               | -           | <del> </del>                 | <del>.</del>                        |               |
| d d   |                                   |   |                 |                                      |              |                            |               |             |                              | <del></del>                         |               |
| e   |                                   | <del> </del>  |                 |                                      |              |                            |               |             |                              |                                     |               |
| 2 Capital gain net income or (n                                   | net capital loss                  | If gain, also enter  If (loss), enter -0                  | ın Part I, line | 7<br>7                               | }            | 2                          |               |             |                              |                                     |               |
| 3 Net short-term capital gain o                                   | r (loss) as def<br>ne 8, column ( | ined in sections 1222(5) an                               |                 | •                                    | }            |                            |               |             |                              |                                     |               |
| If (loss), enter -0- in Part I, li  Part V Qualificatio           |                                   | Section 4940(e) for                                       | Poducod         | Tay on Not                           | Inv          | 3<br>octn                  | ent Inco      | ma          |                              |                                     |               |
|   |                                   | ····  |                 |                                      |              |                            | Terre mice    | IIIC        |                              |                                     |               |
| (For optional use by domestic page 1                              | nvate iounuati                    | ons subject to the section 2                              | 1940(a) tax on  | i net investment it                  | ICOIII       | t.)                        |               |             |                              |                                     |               |
| If section 4940(d)(2) applies, lea                                | ave this part b                   | lank.   |                 |                                      |              |                            |               |             |                              |                                     |               |
| Was the foundation liable for the                                 | e section 4942                    | tax on the distributable am                               | ount of any ve  | ear in the base pe                   | rıod?        |                            |               |             |                              | Yes                                 | X No          |
| If "Yes," the foundation does not                                 |                                   |   | , ,             | •                                    |              |                            |               |             |                              |                                     |               |
| <ol> <li>Enter the appropriate amour</li> </ol>                   |                                   |   |                 |                                      | es.          |                            |               |             |                              |                                     |               |
| (a)<br>Base period years<br>Calendar year (or tax year beg        | ginning in)                       | (b)<br>Adjusted qualifying dis                            | tributions      | Net value of no                      | (c)<br>oncha | rıtable-                   | use assets    |             |                              | (d)<br>oution ratio<br>ided by col. | (c))          |
| 2009  |                                   |   | 1,488.          |                                      |              |                            | 2,242.        | +           |                              |                                     | <u> 23869</u> |
| 2008  |                                   |   | 3,821.          |                                      |              |                            | <u>7,073.</u> |             |                              |                                     | 66725         |
| 2007  |                                   | 7   | 2,007.          |                                      |              | 6                          | <u>6,487.</u> | +           |                              | 1.0                                 | 83024         |
| 2006  |                                   |   |                 |                                      |              |                            |               |             |                              |                                     |               |
| 2005  |                                   |   |                 | <del> </del>                         |              |                            |               |             |                              |                                     |               |
| 2 Total of line 1, column (d)                                     | the Euger he                      | on pariod divide the total of                             | on line 2 by F  | or by the number                     | of w         | oro                        |               | 2           |                              | 17.6                                | <u>73618</u>  |
| 3 Average distribution ratio for<br>the foundation has been in e  | -                                 |   | on line 2 by 5, | or by the number                     | UI ye        | ais                        |               | 3           |                              | 5.8                                 | 91206         |
| 4 Enter the net value of noncha                                   | arıtable-use as                   | sets for 2010 from Part X,                                | line 5          |                                      |              |                            |               | 4           |                              | 9                                   | ,376.         |
| 5 Multiply line 4 by line 3                                       |                                   |   |                 |                                      |              |                            |               | 5           |                              | 55                                  | ,236.         |
| 6 Enter 1% of net investment i                                    | ncome (1% of                      | Part I, line 27b)   |                 |                                      |              |                            |               | 6           |                              |                                     | 0.            |
| 7 Add lines 5 and 6   |                                   |   |                 |                                      |              |                            |               | 7           |                              | 55                                  | ,236.         |
| 8 Enter qualifying distributions                                  | from Part XII                     | , line 4  |                 |                                      |              |                            |               | 8           |                              | 124                                 | ,329.         |
| If line 8 is equal to or greater<br>See the Part VI instructions. | than line 7, c                    | heck the box in Part VI, line                             | 1b, and comp    | lete that part usir                  | ıg a 1       | % tax ı                    | rate.         |             |                              |                                     |               |

|    | 990-PF (2010      |  | ANSELL            | GRIMM            | [ & AARO]                  | N FOUND             | ATION          | , INC             |                | 26-   | <u> 0757</u> | 646          | !    | Page 4    |
|----|-------------------|--|-------------------|------------------|----------------------------|---------------------|----------------|-------------------|----------------|-------|--------------|--------------|------|-----------|
| Рa | rt VI Ex          | cise Tax Ba                                | ised on Inv       | estment          | Income (Se                 | ction 4940          | (a), 4940      | 0(b), 4940        | (e), or 4      | 948   | - see i      | nstru        | ctio | าร)       |
| 1a | Exempt operate    | ting foundations                           | described in sec  | ction 4940(d)(   | (2), check here 🕨          | and en              | ter "N/A" on   | line 1.           | )              |       | }            |              |      |           |
|    | •                 | or determination                           |                   |                  | (attach copy               |                     |                |                   |                |       | 1            |              |      |           |
| b  | Domestic four     | ndations that mee                          | t the section 49  | 40(e) requirei   | ments in Part V, c         | check here 🕨        | X and          | enter 1%          | •              | 1     | <u> </u>     |              |      | 0.        |
|    | of Part I, line 2 | 27b  |                   |                  |                            |                     |                |                   |                |       |              |              |      |           |
| C  | All other dome    | estic foundations                          | enter 2% of line  | e 27b. Exempt    | t foreign organiza         | itions enter 4%     | of Part I, lin | e 12, col. (b).   | J              |       | 1            |              |      |           |
|    |                   |  | tic section 4947  | (a)(1) trusts a  | and taxable found          | lations only. Oth   | ners enter -0  | )-)               |                | 2     |              |              |      | <u>0.</u> |
| 3  | Add lines 1 an    | id 2                                       |                   |                  |                            |                     |                |                   |                | 3     | <b> </b>     |              |      | 0.        |
| 4  | Subtitle A (inc   | ome) tax (domes                            | itic section 4947 | 7(a)(1) trusts   | and taxable found          | dations only. Ot    | hers enter -   | 0-)               |                | 4     | ļ            |              |      | 0.        |
| 5  |                   |  | me Subtract lir   | ne 4 from line   | 3. If zero or less,        | enter -0-           |                |                   |                | 5     | <u> </u>     |              |      | 0.        |
| 6  | Credits/Payme     | ents:                                      |                   |                  |                            |                     | 1 1            |                   |                |       |              |              |      |           |
|    |                   | d tax payments a                           |                   | =                | ed to 2010                 |                     | 6a             | _                 |                | _     |              |              |      |           |
|    |                   | n organizations -                          |                   |                  |                            |                     | 6ь             |                   |                | _     |              |              |      |           |
|    |                   | application for ex                         |                   | to file (Form 8  | i868)                      |                     | 6c             |                   |                | _     | 1            |              |      |           |
|    |                   | olding erroneous                           | -                 |                  |                            |                     | 6d             |                   |                | -     |              |              |      | _         |
|    |                   | nd payments. Ad                            |                   | -                |                            |                     |                |                   |                | 7     |              |              |      | 0.        |
|    | -                 |  |                   |                  | here if Fori               | m 2220 is attac     | hed            |                   |                | 8     | <u> </u>     |              |      |           |
|    |                   | e total of lines 5 a                       |                   |                  |                            |                     |                |                   |                | 9     |              |              |      | 0.        |
|    |                   |  |                   |                  | 3, enter the <b>amou</b> i | nt overpaid         |                | 1                 |                | 10    | ļ            |              |      |           |
|    |                   | unt of line 10 to t                        |                   |                  |                            |                     |                | Refu              | nded ►         | 11    |              |              |      |           |
|    |                   | Statements                                 |                   |                  |                            |                     |                |                   |                |       |              | 1            | · ·  | •         |
| 1a | -                 | -  | ndation attempt   | to influence a   | any national, state        | e, or local legisla | ation or did   | it participate o  | r ıntervene    | : IN  |              |              | Yes  |           |
| _  | any political ca  |  |                   |                  |                            |                     | _              |                   |                |       |              | <u>1a</u>    |      | <u>X</u>  |
| Ь  |                   |  |                   |                  | or indirectly) for p       |                     | -              |                   | -              |       |              | 1b           |      | <u>X</u>  |
|    |                   |  |                   |                  | scnption of the            | activities and      | copies of      | any matenals      | publishe       | d or  |              |              |      |           |
|    |                   | y the foundation                           |                   |                  | ictivities.                |                     |                |                   |                |       |              |              |      |           |
|    |                   | ation file Form 11                         |                   |                  |                            |                     |                |                   |                |       |              | 1c           |      | <u>X</u>  |
| d  |                   |  |                   |                  | ction 4955) impo           |                     |                |                   | •              |       |              |              |      |           |
|    |                   |  |                   |                  | (2) On founda              |                     |                |                   | 0.             | -     |              |              |      |           |
| е  |                   |  | _                 |                  | ing the year for po        | olitical expendit   | ure tax impo   | osed on found     | ation          |       |              |              |      |           |
| _  | managers.         |  | 0.                | -                |                            |                     |                |                   |                |       |              | _            |      |           |
| 2  |                   |  |                   |                  | reviously been rep         | ported to the IH    | 57             |                   |                |       |              | 2            |      | <u> </u>  |
| _  |                   | ch a detailed di                           |                   |                  | to due the IDO             |                     |                |                   |                |       |              |              |      |           |
| 3  |                   |  |                   |                  | ted to the IRS, in         |                     |                | irticles of incor | poration, o    | or    |              |              |      | v         |
| 4. |                   |  |                   |                  | informed copy of           | _                   |                |                   |                |       |              | 3            |      | X         |
|    |                   | filed a tax return                         | _                 |                  | f \$1,000 or more          | during the year     | ,              |                   |                | ν.    | 7 / 7        | 4a_          |      |           |
|    |                   |  |                   |                  |                            | uriaa tha waar?     |                |                   |                | 1/    | I/A          | 4b<br>5      |      | X         |
| 3  |                   | •  | •                 | · <del>-</del>   | tial contraction du        | uring the year?     |                |                   |                |       |              | 3            |      |           |
| _  |                   | ch the stateme                             |                   |                  | 4941 through 494           | AE) catactical out  | hor:           |                   |                |       |              |              |      |           |
| U  |                   | e in the governing                         |                   |                  | 1541 till Ougil 454        | 45) Salislieu eli   | ner.           |                   |                |       |              |              |      |           |
|    |                   |  |                   |                  | nstrument so tha           | t no mandaton       | directions t   | that conflict we  | th the ctate   | a law |              |              |      |           |
|    |                   | isiation that ellect<br>le governing insti | -                 | ic governing i   | nsu ument so ma            | ii iio iiiaiioaioiy | unechons i     | inai connict wi   | iii iiie Siait | ; law |              | _            |      | v         |
| 7  |                   |  |                   | ite at any timo  | during the year?           | •                   |                |                   |                |       |              | 7            | X    | X         |
| ,  |                   | anon nave an leas<br>aplete Part II, co    |                   |                  | during the year?           |                     |                |                   |                |       |              | <del>'</del> |      | _         |
| Ωο |                   | •  |                   |                  | ch it is registered i      | (cap instruction    | ne) 🕨          |                   |                |       |              |              |      |           |
| Ud | NJ                | o to willon the lu                         | andadon report    | O OF WHILE WHILE | ii ii io regiolereu i      | (จะอากอเกษเปร       |                |                   |                |       |              |              |      |           |
| h  |                   | s "Yes" to line 7                          | has the foundat   | ion furnished    | a copy of Form 9           | 90-PF to the Att    | torney Gene    | ral (or decions   | ıte\           |       |              |              |      |           |
| J  |                   |  |                   |                  | o," attach explai          |                     | .orney delle   | an (or designa    | ,              |       |              | 8b           | X    |           |
| 9  |                   |  |                   |                  | dation within the          |                     | tion 4942(1)   | )(3) or 4942(i)   | (5) for cale   | endar |              | 00           |      | <u> </u>  |
| •  |                   |  |                   |                  | tions for Part XIV         |                     |                |                   | (C) TOT GAIL   |       |              | 9            |      | x         |
| 10 |                   |  |                   | -                | tax year? if "Yes,"        | •                   | -              |                   | sses           |       |              | 10           |      | X         |
|    | 7.                |  |                   |                  |                            |                     |                |                   |                |       | Fori         | n <b>990</b> | -PF( |           |

| _  | n 990-PF (2010) THE ANSELL GRIMM & AARON FOUNDATION, INC 26-0757<br>art VII-A Statements Regarding Activities (continued)                                    | 646      |             | Page 5      |
|----|--|----------|-------------|-------------|
|    | 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       | ĺ           | х           |
| 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 ► ANSELL GRIMM & AARON, PC  Telephone no. ► 732-92  |          | <u>000</u>  |             |
|    | Located at ► 1500 LAWRENCE AVENUE, OCEAN, NJ ZIP+4 ►07   | 712      |             |             |
| 15 | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here  |          | <b>,_</b> ► | · []        |
|    | 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       |             | <u>X</u> _  |
|    | See page 20 of the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of                                    |          |             |             |
| P  | the foreign country  art VII-B   Statements Regarding Activities for Which Form 4720 May Be Required   | <u> </u> |             |             |
|    |  | T        | Yes         | No          |
| 1. | File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.  During the year did the foundation (either directly or indirectly): |          | 163         | 110         |
| 16 | (1) Engage in the sale or exchange, or leasing of property with a disqualified person?  Yes X No   |          |             |             |
|    | (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)  |          |             |             |
|    | a disqualified person?   |          |             |             |
|    | (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?   |          |             |             |
|    | (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X 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)?  |          | ,           |             |
|    | (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.)   |          |             |             |
| t  | 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   |          |             |             |
| •  | 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)):  |          |             |             |
| ā  | 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?   |          |             |             |
|    | If "Yes," list the years ,,,,  |          |             |             |
| t  | 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       |             | <del></del> |
| (  | : If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.                                    |          |             |             |
| 2. | a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time  |          |             |             |
| 00 | during the year?  Wes X No   |          |             |             |
| ı  | olf "Yes," did it have excess business holdings in 2010 as a result of (1) any purchase by the foundation or disqualified persons after                      |          |             |             |
| ٠  | 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  | 3ь       |             |             |
| 42 | a 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                       |          |             |             |
|    | had not been removed from jeopardy before the first day of the tax year beginning in 2010?   | 4b       |             | x           |

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| orm 990-PF (2010) THE ANSELL GRIMM & AARON  | FOUNDATION,                                   | INC                               | <u> 26-07576</u>   | 46                 | Page 6           |
|---|---|-----------------------------------|--|--------------------|------------------|
| Part VII-B   Statements Regarding Activities for Which I  | Form 4/20 May Be I                            | Required (contin                  | ued)   |                    |                  |
| 5a During the year did the foundation pay or incur any amount to:   |   |                                   |  |                    |                  |
| (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); o   | 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   |   | Y                                 | es X No  |                    | ,                |
| (4) Provide a grant to an organization other than a charitable, etc., organizatio   | n described in section                        | <u> </u>                          | [ <del>1</del> 2]  |                    |                  |
| 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                   |                                   | es X No  |                    |                  |
| the prevention of cruelty to children or animals?   | da 16   |                                   | es Lad No  |                    |                  |
| b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify unit   |   | in Regulations                    | NT / A   | r.                 |                  |
| section 53.4945 or in a current notice regarding disaster assistance (see instru  | •   |                                   | N/A  | 5 <b>b</b>         |                  |
| Organizations relying on a current notice regarding disaster assistance check has been disastered or a simple of the answer is "Yes" to question 5a(4), does the foundation claim exemption fit |   | unad                              |  |                    |                  |
| expenditure responsibility for the grant?   |   |                                   | es No  |                    | ,                |
| If "Yes," attach the statement required by Regulations section 53 494   |   | 1/A1                              | es L No  |                    |                  |
| 6a Did the foundation, during the year, receive any funds, directly or indirectly, to   | • •   |                                   |  |                    |                  |
| a personal benefit contract?  | pay premiums on                               |                                   | es X No  |                    |                  |
| b Did the foundation, during the year, pay premiums, directly or indirectly, on a p   | perconal honofit contract?                    |                                   | F  | 6b                 | x                |
| If "Yes" to 6b, file Form 8870.   | ici sonai beneni contiaci.                    |                                   | -  |                    | <u> </u>         |
| 7a At any time during the tax year, was the foundation a party to a prohibited tax s  | thelter transaction?                          |                                   | es X No  |                    |                  |
| <b>b</b> If "Yes," did the foundation receive any proceeds or have any net income attribute   |   |                                   |  | 7b                 | <del> </del>     |
| Part VIII Information About Officers, Directors, Trust  |   | nagers. Highl                     |  | - ,                |                  |
| Paid Employees, and Contractors   | •   |                                   |  |                    |                  |
| List all officers, directors, trustees, foundation managers and their   | compensation.                                 |                                   |  |                    |                  |
| (a) Name and address  | (b) Title, and average hours per week devoted | (c) Compensation<br>(If not paid, | (d) Contributions to<br>employee benefit plans<br>and deferred | (e) Exp<br>account | pense<br>t other |
| (a) Name and address  | to position                                   | enter -0-)                        | and deterred<br>compensation                                   | allowa             | nces             |
|   |   |                                   |  |                    |                  |
| ***   |   |                                   |  |                    |                  |
| SEE STATEMENT 2   |   | 0.                                | 0.   |                    | 0.               |
|   |   |                                   |  |                    |                  |
|   |   |                                   |  |                    |                  |
|   |   | ļ                                 |  |                    |                  |
|   |   |                                   |  |                    |                  |
|   |   |                                   |  |                    |                  |
|   |   | <u> </u>                          |  |                    |                  |
|   |   |                                   |  |                    |                  |
|   |   |                                   |  |                    |                  |
| Compensation of five highest-paid employees (other than those inc   | luded on line 1). If none.                    | enter "NONE."                     |  |                    |                  |
|   | (b) Title, and average                        |                                   | (d) Contributions to   | (e) Ex             | pense            |
| (a) Name and address of each employee paid more than \$50,000   | hours per week devoted to position            | (c) Compensation                  | employee benefit plans<br>and deferred<br>compensation         | ačcouni<br>allowa  | t, other         |
| NONE  |   |                                   | , and the second   |                    |                  |
|   |   |                                   |  |                    |                  |
|   |   |                                   |  |                    |                  |
|   |   | <u></u>                           |  |                    |                  |
|   |   |                                   |  |                    |                  |
|   |   |                                   |  |                    |                  |
|   |   |                                   |  |                    |                  |
|   |   | <u> </u>                          |  |                    |                  |
|   |   |                                   |  |                    |                  |
|   |   | L                                 |  |                    |                  |
| otal number of other employees paid over \$50,000   |   | <del> </del>                      |  | 200 DE             | 0                |
|   |   |                                   | Form \$  | 990-PF             | (2010)           |

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|--|------------------------|------------------|
| Part VIII Information About Officers, Directors, Trustees, Found Paid Employees, and Contractors (continued)   | ation Managers, Highly |                  |
| 3 Five highest-paid independent contractors for professional services. If none, ento   | 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   |                        | ▶ 0              |
| Part IX-A Summary of Direct Charitable Activities  |                        |                  |
| List the foundation's four largest direct charitable activities during the tax year. Include relevant stati<br>number of organizations and other beneficiaries served, conferences convened, research papers pro |                        | Expenses         |
| 1N/A   |                        |                  |
|  |                        |                  |
| 2  |                        |                  |
|  |                        |                  |
| 3  |                        |                  |
| 1  |                        |                  |
|  |                        |                  |
| Part IX-B Summary of Program-Related Investments  Describe the two largest program-related investments made by the foundation during the tax year of   | n lines 1 and 2.       | Amount           |
| 1 N/A  |                        |                  |
|  |                        |                  |
| 2  |                        |                  |
|  |                        |                  |
| All other program-related investments. See instructions.  3  |                        |                  |
|  |                        |                  |
| Total Add lines 1 through 3  | <b>•</b>               | 0.               |

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| P  | art X Minimum Investment Return (All domestic foundations m  | ust complete this part. Forei         | gn found  | lations, see    | instructions.) |
|----|--|---------------------------------------|-----------|-----------------|----------------|
| 1  | Fair market value of assets not used (or held for use) directly in carrying out charitable   | e. etc., purposes:                    | *         |                 |                |
| а  | Average monthly fair market value of securities  | ,, ,                                  | İ         | 1a              | 0.             |
| b  | Average of monthly cash balances   |                                       |           | 1b              | 9,519.         |
| C  | Fair market value of all other assets  |                                       |           | 1c              | <u> </u>       |
| d  | Total (add lines 1a, b, and c)   |                                       | _         | 1d              | 9,519.         |
| е  | Reduction claimed for blockage or other factors reported on lines 1a and   |                                       | F         |                 |                |
|    | 1c (attach detailed explanation)   | 1e                                    | 0.        |                 |                |
| 2  | Acquisition indebtedness applicable to line 1 assets   | · · · · · · · · · · · · · · · · · · · |           | 2               | 0.             |
| 3  | Subtract line 2 from line 1d   |                                       |           | 3               | 9,519.         |
| 4  | Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount,  | see instructions)                     |           | 4               | 143.           |
| 5  | Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on  | •                                     |           | 5               | 9,376.         |
| 6  | Minimum investment return. Enter 5% of line 5  | ,                                     |           | 6               | 469.           |
| Р  | art XI Distributable Amount (see instructions) (Section 4942(j)(3) and foreign organizations check here  and do not complete this part.) | d (j)(5) private operating founda     | tions and | certain         |                |
| 1  | Minimum investment return from Part X, line 6  |                                       | L         | 1               | 469.           |
| 2a | Tax on investment income for 2010 from Part VI, line 5   | 2a                                    |           |                 |                |
| b  | Income tax for 2010. (This does not include the tax from Part VI.)   | 2b                                    |           |                 |                |
| C  | Add lines 2a and 2b  |                                       | L         | 2c              | 0.             |
| 3  | Distributable amount before adjustments. Subtract line 2c from line 1  |                                       |           | 3               | 469.           |
| 4  | Recoveries of amounts treated as qualifying distributions  |                                       | L         | 4               | 0.             |
| 5  | Add lines 3 and 4  |                                       | L         | 5               | 469.           |
| 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 3  | KIII, line 1                          |           | 7               | 469.           |
| P  | art XII Qualifying Distributions (see instructions)  |                                       |           |                 |                |
| 1  | Amounts paid (including administrative expenses) to accomplish charitable, etc., purp  | oses:                                 |           |                 |                |
| а  | Expenses, contributions, gifts, etc total from Part I, column (d), line 26   |                                       |           | 1a              | 124,329.       |
| 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  | e, etc., purposes                     |           | 2               |                |
| 3  | Amounts set aside for specific charitable projects that satisfy the:   |                                       |           |                 |                |
| а  | 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, an  | d Part XIII, line 4                   |           | 4               | 124,329.       |
| 5  | Foundations that qualify under section 4940(e) for the reduced rate of tax on net inves  | tment                                 |           |                 |                |
|    | income. Enter 1% of Part I, line 27b   |                                       | L         | 5               | 0.             |
| 6  | Adjusted qualifying distributions Subtract line 5 from line 4  |                                       |           | 6               | 124,329.       |
|    | Note. The amount on line 6 will be used in Part V. column (b), in subsequent years with  | nen calculating whether the four      | dation ou | alifies for the | section        |

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4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

|  | (a)<br>Corpus | (b)<br>Years prior to 2009 | (c)<br>2009 | ( <b>d)</b><br>2010 |
|--|---------------|----------------------------|-------------|---------------------|
| 1 Distributable amount for 2010 from Part XI,  |               |                            |             | 469.                |
| 2 Undistributed income, if any, as of the end of 2010  | ·····         |                            |             | 407.                |
| a Enter amount for 2009 only   |               |                            | 0.          |                     |
| b Total for prior years:   |               |                            |             |                     |
| b rotal for prior years.   |               | 0.                         |             |                     |
| 3 Excess distributions carryover, if any, to 2010:   | <u> </u>      |                            |             | <u> </u>            |
| a From 2005  |               |                            |             |                     |
| b From 2006  |               |                            |             |                     |
| c From 2007 68,683.  |               |                            |             |                     |
|  |               |                            |             |                     |
| d From 2008 112,967.   |               |                            |             |                     |
| e From 2009 120,876.   | 202 526       |                            |             |                     |
| f Total of lines 3a through e  | 302,526.      |                            |             |                     |
| 4 Qualifying distributions for 2010 from   |               |                            |             |                     |
| Part XII, line 4: ► \$ 124,329.  |               |                            | •           |                     |
| a Applied to 2009, but not more than line 2a   |               |                            | 0.          |                     |
| <b>b</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   |               |                            |             | 469.                |
| e Remaining amount distributed out of corpus   | 123,860.      |                            |             |                     |
| 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:   |               |                            |             |                     |
| a Corpus Add lines 3f, 4c, and 4e Subtract line 5  | 426,386.      |                            |             |                     |
| <b>b</b> Prior years' undistributed income. Subtract   | 120,0001      |                            |             |                     |
| line 4b from line 2b   |               | 0.                         |             |                     |
| c Enter the amount of prior years'   |               | •                          |             |                     |
| undistributed income for which a notice of<br>deficiency has been issued, or on which<br>the section 4942(a) tax has been previously | ,             | 0                          |             |                     |
| assessed   |               | 0.                         |             |                     |
| d Subtract line 6c from line 6b. Taxable amount - see instructions   |               | 0.                         |             |                     |
| e Undistributed income for 2009. Subtract line   |               | 0.                         |             |                     |
| 4a from line 2a. Taxable amount - see instr.   |               |                            | 0.          |                     |
| f Undistributed income for 2010. Subtract  |               |                            | <u>U•</u>   |                     |
| 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   | 0             |                            |             |                     |
| not applied on line 5 or line 7  | 0.            |                            |             |                     |
| 9 Excess distributions carryover to 2011   | 406 206       |                            |             |                     |
| Subtract lines 7 and 8 from line 6a  | 426,386.      |                            | <del></del> |                     |
| 10 Analysis of line 9:   |               |                            |             |                     |
| a Excess from 2006   |               |                            |             |                     |
| <b>b</b> Excess from 2007 68,683.  |               |                            |             |                     |
| c Excess from 2008 112,967.  |               |                            |             |                     |
| d Excess from 2009 120,876.  |               |                            |             |                     |
| e Excess from 2010 123,860.  |               |                            |             | 5 000 DE (0040)     |

| Form 990-PF (2010) THE ANS   | ELL GRIMM &                  | AARON FOU                  | NDATION, INC                |                             | 757646 Page 10 |
|--|------------------------------|----------------------------|-----------------------------|-----------------------------|----------------|
| Part XIV   Private Operating F   | oundations (see ins          | tructions and Part V       | I-A, question 9)            | N/A                         |                |
| 1 a If the foundation has received a ruling of   | r determination letter that  | it is a private operating  |                             |                             |                |
| foundation, and the ruling is effective for  | r 2010, enter the date of ti | he ruling                  | <b>▶</b>                    |                             |                |
| <b>b</b> Check box to indicate whether the found   | lation is a private operatin | g foundation described     | ın section                  | 4942(j)(3) or 4             | 942())(5)      |
| 2 a Enter the lesser of the adjusted net   | Tax year                     |                            | Prior 3 years               |                             | _              |
| income from Part I or the minimum  | (a) 2010                     | (b) 2009                   | (c) 2008                    | (d) 2007                    | (e) Total      |
| investment return from Part X for  |                              |                            |                             |                             |                |
| each year listed   |                              |                            |                             |                             |                |
| <b>b</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   |                              |                            |                             | <u> </u>                    |                |
| for active conduct of exempt activities.   |                              |                            |                             |                             |                |
| Subtract line 2d from line 2c  |                              |                            |                             |                             |                |
| 3 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<br>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  |                              |                            |                             |                             | 7              |
| and 5 or more exempt   |                              |                            |                             |                             |                |
| organizations as provided in section 4942(j)(3)(B)(iii)  |                              |                            |                             |                             |                |
| (3) Largest amount of support from   |                              |                            |                             | <del>   </del>              |                |
| an exempt organization   |                              |                            |                             |                             |                |
| ' "  |                              |                            |                             |                             | 1              |
| (4) Gross investment income  Part XV Supplementary Info  | rmation (Complet             | to this part only          | if the foundation           | had \$5,000 or m            | oro in accoto  |
| at any time during t   | • •                          |                            | ii tile loulidatioi         | i ilau \$5,000 or ili       | ore in assets  |
|  |                              |                            |                             |                             |                |
| 1 Information Regarding Foundatio  | _                            | han 20/ of the total con   | tributions recoved by the   | foundation before the ele   | on of any toy  |
| a List any managers of the foundation who<br>year (but only if they have contributed m                 |                              |                            | urbullons received by the   | i ioundation before the cic | ise of any tax |
| NONE   | 40,000,000                   | (-/(-/-/                   |                             |                             |                |
|  | n own 100/ or more of the    | a stock of a corneration   | (or an aqually lorge parts  | on of the augustahus of a s |                |
| b List any managers of the foundation who<br>other entity) of which the foundation has                 |                              |                            | (or an equally large porti  | on of the ownership of a p  | arthership or  |
| • •  | ou to to or ground miles of  | •                          |                             |                             |                |
| NONE   | 0 . 0:0.1                    |                            |                             |                             |                |
| 2 Information Regarding Contributi   |                              | • • • •                    | •                           |                             |                |
| Check here \( \sum_{\text{\colored}} \) If the foundation o the foundation makes gifts, grants, etc. ( |                              |                            |                             | not accept unsolicited requ |                |
|  | ·                            |                            | •                           | ompiete items za, u, c, an  | u u.           |
| a The name, address, and telephone number  | ber of the person to whon    | applications should be     | e addressed:                |                             |                |
| SEE STATEMENT 3  |                              |                            |                             |                             |                |
| <b>b</b> The form in which applications should b   | e submitted and informati    | on and materials they s    | hould include:              |                             |                |
| c Any submission deadlines:  |                              |                            |                             |                             |                |
| d Any restrictions or limitations on awards  | s, such as by geographica    | l areas, charitable fields | , kinds of institutions, or | other factors:              |                |
|  |                              |                            |                             |                             |                |
|  |                              |                            |                             |                             |                |

| 3 Grants and Contributions Paid During the | ear or Approved for Future   | Payment              |                                  |                          |
|--|--|----------------------|----------------------------------|--------------------------|
| Recipient                                  | If recipient is an individual,<br>show any relationship to<br>any foundation manager<br>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                     |  |                      |                                  |                          |
|  |  |                      |                                  |                          |
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|  |  | İ                    |                                  |                          |
| SEE STATEMENT 4                            |  |                      |                                  | 404 055                  |
| Total b Approved for future payment        |  | 1                    | <b>&gt; 3a</b>                   | 124,066.                 |
| • Approved for future payment              |  |                      |                                  |                          |
|  |  |                      |                                  |                          |
|  |  |                      |                                  |                          |
| NONE                                       |  |                      |                                  |                          |
|  |  |                      |                                  |                          |
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|  |  |                      |                                  |                          |
|  |  |                      |                                  |                          |
| Total                                      |  |                      | <b>▶</b> 3b                      | _0.                      |
| 023611 12-07-10                            |  |                      | F                                | orm <b>990-PF</b> (2010) |

| nter gross amounts unless otherwise indicated.                |                       |                    |                       | by section 512, 513, or 514  | (e)                               |  |
|---|-----------------------|--------------------|-----------------------|------------------------------|-----------------------------------|--|
|   | (a)<br>Business       | (b)<br>Amount      | (c)<br>Exclu-<br>sion | (d)<br>Amount                | Related or exempt function income |  |
| Program service revenue:                                      | code                  |                    | code                  | Amount                       | - Idiletion income                |  |
| a   |                       |                    |                       | -                            |                                   |  |
| b   | _                     |                    |                       |                              |                                   |  |
| <u> </u>  | _                     |                    |                       |                              | ***                               |  |
| d   | -                     |                    |                       |                              |                                   |  |
| e   | _                     |                    |                       |                              |                                   |  |
| f   | _                     |                    |                       |                              |                                   |  |
| g Fees and contracts from government agencies                 |                       |                    |                       |                              |                                   |  |
| Membership dues and assessments                               |                       |                    |                       |                              | <del>-</del>                      |  |
| Interest on savings and temporary cash                        | i                     |                    |                       |                              |                                   |  |
| investments   |                       |                    |                       |                              |                                   |  |
| Dividends and interest from securities                        |                       |                    |                       |                              |                                   |  |
| Net rental income or (loss) from real estate:                 | ,                     | *                  |                       |                              |                                   |  |
| a Debt-financed property                                      |                       |                    |                       |                              |                                   |  |
| b Not debt-financed property                                  |                       |                    |                       |                              |                                   |  |
| Net rental income or (loss) from personal                     |                       |                    |                       |                              |                                   |  |
| property  |                       |                    |                       |                              |                                   |  |
| Other investment income                                       |                       |                    |                       |                              |                                   |  |
| Gain or (loss) from sales of assets other                     |                       |                    |                       |                              |                                   |  |
| than inventory  |                       |                    |                       |                              |                                   |  |
| Net income or (loss) from special events                      |                       |                    |                       |                              |                                   |  |
| Gross profit or (loss) from sales of inventory                |                       |                    |                       |                              |                                   |  |
| Other revenue:  |                       |                    |                       |                              |                                   |  |
| a   |                       |                    |                       |                              |                                   |  |
| b   | _                     |                    |                       | <del>-</del>                 | <del></del> .                     |  |
| С   |                       |                    | T                     |                              |                                   |  |
| d   |                       |                    |                       |                              |                                   |  |
| е   | -                     |                    |                       |                              |                                   |  |
| Subtotal. Add columns (b), (d), and (e)                       |                       |                    | 0.                    | 0.                           |                                   |  |
| Total. Add line 12, columns (b), (d), and (e)                 | <u> </u>              |                    | <u> </u>              | 13                           |                                   |  |
| ee worksheet in line 13 instructions to verify calculations.) |                       |                    |                       | "                            |                                   |  |
| Part XVI-B Relationship of Activities                         | to the Accom          | plishment of       | Exempt I              | Purposes                     |                                   |  |
|   |                       |                    |                       |                              |                                   |  |
| ine No. Explain below how each activity for which in          |                       |                    |                       | ed importantly to the accomp | olishment of                      |  |
| the foundation's exempt purposes (other that                  | in by providing funds | tor such purposes) |                       | <del></del>                  |                                   |  |
| 44.4  |                       |                    |                       |                              |                                   |  |
|   |                       |                    |                       | ·                            |                                   |  |
|   |                       |                    | **-:                  |                              |                                   |  |

| Part XVI-B | Relationship of Activities t | o the Accomplishment of | Exempt Purposes |
|------------|------------------------------|-------------------------|-----------------|
|            |                              |                         |                 |

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(732)578-0700 Form **990-PF** (2010)

PTIN

Sign Here

Paid

**Preparer** 

**Use Only** 

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,

eparer.(other-than\_taxpayer or fiduciary) is based on all informat

Preparer's signature

Under penalties of per

CPA

Signature of officer of trustee

Print/Type preparer's name

ROSE ANN SLAWSON,

Firm's name ▶ J.H. COHN LLP

Firm's address ▶ 27 CHRISTOPHER WAY

EATONTOWN, NJ 07724

TRUSTEE

self- employed

Firm's EIN ▶

Phone no.

Title

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

Department of the Treasury Internal Revenue Service

## Schedule of Contributors

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

OMB No 1545-0047

2010

Name of the organization **Employer identification number** THE ANSELL GRIMM & AARON FOUNDATION, 26-0757646 Organization type (check one) Filers of: Section: Form 990 or 990-EZ 501(c)( ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization X 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor Complete Parts I and II. **Special Rules** For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1 Complete Parts I and II. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively **>** \$\_ religious, charitable, etc., contributions of \$5,000 or more during the year

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)

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

that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

| NO.                           | Name, address, and ZIP + 4 | Aggregate contributions                          | Type of contribution  |
|-------------------------------|----------------------------|--|---|
|                               |                            | \$   | Person Payroll Noncash (Complete Part II if there is a noncash contribution.) |
| (a)                           | (b)                        | (c)  | (d)   |
| No.                           | Name, address, and ZIP + 4 | Aggregate contributions                          | Type of contribution  |
|                               |                            |  | Person Payroll Noncash (Complete Part II if there is a noncash contribution)  |
| (a)                           | (b)                        | (c)  | (d)   |
| No.                           | Name, address, and ZIP + 4 | Aggregate contributions                          | Type of contribution  |
|                               |                            | \$   | Person Payroll Noncash (Complete Part II if there is a noncash contribution)  |
| (a)                           | (b)                        | (c)  | (d)   |
| No.                           | Name, address, and ZIP + 4 | Aggregate contributions                          | Type of contribution  |
|                               |                            | \$\$   | Person Payroll Noncash (Complete Part II if there is a noncash contribution)  |
| )23452 12-23-10<br>41111 7584 | 15 1003700028 2010.04050 T | Schedule B (Form<br>15<br>THE ANSELL GRIMM & AAR | 990, 990-EZ, or 990-PF) (2010) ON FO 10037071                                 |

of Part II

Name of organization

Employer identification number

# THE ANSELL GRIMM & AARON FOUNDATION, INC

26-0757646

| (a)                          | cash Property (see instructions)             | (c)  | -                    |
|------------------------------|--|--|----------------------|
| No.<br>from<br>Part I        | (b)  Description of noncash property given   | FMV (or estimate) (see instructions)           | (d)<br>Date received |
|                              |  |  |                      |
| _                            |  | <b>\$</b>                                      |                      |
| (a)<br>No.<br>from<br>Part I | (b) Description of noncash property given    | (c) FMV (or estimate) (see instructions)       | (d)<br>Date received |
|                              |  |  |                      |
|                              |  | <b>\$</b>                                      |                      |
| (a)<br>No.<br>from<br>Part I | (b)<br>Description of noncash property given | (c) FMV (or estimate) (see instructions)       | (d)<br>Date received |
|                              |  |  |                      |
|                              |  |  |                      |
| (a)<br>No.<br>from<br>Part I | (b)<br>Description of noncash property given | (c)<br>FMV (or estimate)<br>(see instructions) | (d)<br>Date received |
|                              |  |  |                      |
|                              |  | \$   |                      |
| (a)<br>No.<br>from<br>Part I | (b)  Description of noncash property given   | (c) FMV (or estimate) (see instructions)       | (d)<br>Date received |
|                              |  |  |                      |
|                              |  | <b>\$</b>                                      |                      |
| (a) No. from Part I          | (b)  Description of noncash property given   | (c) FMV (or estimate) (see instructions)       | (d)<br>Date received |
|                              |  |  |                      |
|                              |  |  |                      |

of Part III Name of organization Employer identification number THE ANSELL GRIMM & AARON FOUNDATION, INC 26-0757646 Part III Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations aggregating more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions ) > \$ (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part | (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

| FORM 990-PF   | OTHER E                      | XPENSES          |    |               | STAT   | EMENT 1                      |
|---|------------------------------|------------------|----|---------------|--------|------------------------------|
| DESCRIPTION   | (A)<br>EXPENSES<br>PER BOOKS |                  |    |               | STED C | (D)<br>HARITABLE<br>PURPOSES |
| FILING FEES<br>OFFICE EXPENSE   | 150.<br>113.                 |                  | 0. |               | 0.     | 150.<br>113.                 |
| TO FORM 990-PF, PG 1, LN 23   | 263.                         |                  | 0. |               | 0.     | 263.                         |
|   | LIST OF OF                   |                  |    | ORS           | STAT   | EMENT 2                      |
| NAME AND ADDRESS  |                              | LE AND<br>HRS/WK |    | IPEN-<br>LION |        | EXPENSE ACCOUNT              |
| MICHAEL V. BENEDETTO<br>1500 LAWRENCE AVENUE<br>OCEAN, NJ 07712   | TRUST                        | EE<br>.00        |    | 0.            | 0.     | 0.                           |
|   |                              |                  |    |               |        |                              |
| DAVID K. ANSELL<br>1500 LAWRENCE AVENUE<br>OCEAN, NJ 07712  | TRUST                        | EE<br>.00        |    | 0.            | 0.     | 0.                           |
| DAVID K. ANSELL<br>1500 LAWRENCE AVENUE   | 10<br>TRUST                  | .00              |    | 0.            | 0.     |                              |
| DAVID K. ANSELL<br>1500 LAWRENCE AVENUE<br>OCEAN, NJ 07712<br>RICHARD B. ANSELL<br>1500 LAWRENCE AVENUE | TRUST                        | .00<br>EE<br>.00 |    | 0.            | 0.     |                              |

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TOTALS INCLUDED ON 990-PF, PAGE 6, PART VIII

FORM 990-PF

GRANT APPLICATION SUBMISSION INFORMATION PART XV, LINES 2A THROUGH 2D

STATEMENT

3

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

MICHAEL V. BENEDETTO, ESQ. C/O ANSELL GRIMM & AARON, PC 1500 LAWRENCE AVENUE OCEAN, NJ 07712

TELEPHONE NUMBER

732-922-1000

FORM AND CONTENT OF APPLICATIONS

NO APPLICATION, REQUIRES DETAIL OF PURPOSE OF GRANT AND VERIFICATION OF EXEMPT STATUS OF DONEE.

ANY SUBMISSION DEADLINES

NONE

RESTRICTIONS AND LIMITATIONS ON AWARDS

NO RESTRICTIONS OR LIMITATIONS ON AWARDS.

| FORM 990-PF GRANTS PAID  |  |        |        |
|--|--|--------|--------|
| RECIPIENT NAME AND ADDRESS   | RECIPIENT RELATIONSHIP<br>AND PURPOSE OF GRANT |        |        |
| 15-40 CONNECTION<br>PO BOX 2540 WORCHESTER, MA<br>01623                            | NONE<br>UNRESTRICTED                           | PUBLIC | 100.   |
| 180 TURNING LIVES AROUND<br>ONE BETHANY RD, BLDG 3, STE 42<br>HAZLET, NJ 07730     |  | PUBLIC | 5,137. |
| AMERICAN CANCER SOCIETY<br>801 BROAD STREET SHREWSBURY, NJ<br>07702                |  | PUBLIC | 250.   |
| AMERICAN HEART ASSOCIATION<br>ONE UNION STREET, STE 301<br>ROBBINSVILLE, NJ 08691  | - · · - · -                                    | PUBLIC | 800.   |
| AMERICAN RED CROSS-JERSEY COAST<br>CHAPTER<br>PO BOX 131 TINTON FALLS, NJ<br>07724 | NONE<br>UNRESTRICTED                           | PUBLIC | 3,345. |
| ASBURY PARK CHAMBER OF COMMERCE<br>PO BOX 649 ASBURY PARK, NJ<br>07712             | NONE<br>UNRESTRICTED                           | PUBLIC | 400.   |
| ASBURY PARK PBA LOCAL #6 ONE MUNICIPAL PLAZA ASBURY PARK, NJ 07712                 | NONE<br>UNRESTRICTED                           | PUBLIC | 1,000. |
| ATHLETE ALLY 64 SPRING HILL ROAD ANNANDALE, NJ 08801                               | NONE<br>UNRESTRICTED                           | PUBLIC | 2,500. |

| THE ANSELL GRIMM & AARON FOUNDA   | TION, INC            |        | 26-0757646 |
|---|----------------------|--------|------------|
| ATLANTIC HIGHLANDS PBA LOCAL NO. 242 PO BOX 9 ATLANTIC HIGHLANDS, NJ 07716  | NONE<br>UNRESTRICTED | PUBLIC | 100.       |
| AWARD OF COURAGE CORPORATION 9 WINCHESTER LANE HOLMDEL, NJ 07733  |                      | PUBLIC | 1,500.     |
| AXELROD PERFORMING ARTS CENTER 100 GRANT AVE DEAL PARK, NJ 07723  |                      | PUBLIC | 2,860.     |
| BIG BROTHERS BIG SISTERS OF<br>MONMOUTH COUNTY<br>CRYSTAL BROOK PROF BLDG, 174<br>MAIN STREET EATONTOWN, NJ 07724 | NONE<br>UNRESTRICTED | PUBLIC | 4,700.     |
| BLUE AND GOLD<br>1401 ALICIA DRIVE WALL, NJ<br>07719  | NONE<br>UNRESTRICTED | PUBLIC | 250.       |
| BOYS AND GIRLS CLUB OF MONMOUTH<br>COUNTY<br>1201 MONROE AVE ASBURY PARK, NJ<br>07712                             | NONE<br>UNRESTRICTED | PUBLIC | 2,000.     |
| BRIELLE PBA LOCAL 395<br>PO BOX 595 BRIELLE, NJ 08730   | NONE<br>UNRESTRICTED | PUBLIC | 500.       |
| BROOKDALE COMMUNITY COLLEGE<br>FOUNDATION<br>765 NEWMAN SPRINGS ROAD<br>LINCROFT, NJ 07738                        | NONE<br>UNRESTRICTED | PUBLIC | 1,840.     |
| CAMP OAKHURST-NY SERVICE FOR THE HANDICAPPED 1140 BROADWAY, STE 903 NEW YORK, NY 10001-7504                       | NONE<br>UNRESTRICTED | PUBLIC | 1,500.     |
| CANCER INSTITUTE OF NEW JERSEY FOUNDATION 36 BUENA PLACE RED BANK, NJ 07701                                       | NONE<br>UNRESTRICTED | PUBLIC | 500.       |

| THE ANSELL GRIMM & AARON FOUNDA   | TION, INC            |        | 26-0757646 |
|---|----------------------|--------|------------|
| CASA OF MONMOUTH COUNTY<br>613 HOPE ROAD, BLDG 4, 2ND FL<br>EATONTOWN, NJ 07724                         | NONE<br>UNRESTRICTED | PUBLIC | 1,100.     |
| CENTER FOR WORLD WAR II<br>STUDIES/BCC<br>765 NEWMAN SPRINGS ROAD<br>LINCROFT, NJ 07738                 | NONE<br>UNRESTRICTED | PUBLIC | 25.        |
| CEREBRAL PALSY OF NORTH JERSEY 220 SOUTH ORANGE AVE, STE 300 LIVINGSTON, NJ 07039                       |                      | PUBLIC | 1,500.     |
| CHABAD HOUSE<br>170 COLLEGE AVENUE NEW<br>BRUNSWICK, NJ 08901   | NONE<br>UNRESTRICTED | PUBLIC | 1,500.     |
| CHARITABLE FUND OF LDEM<br>100 WILLOWBROOK RD, BLDG 1<br>FREEHOLD, NJ 07728                             | NONE<br>UNRESTRICTED | PUBLIC | 250.       |
| CHARITABLE FUND OF MICHAEL W.<br>THORNE<br>C/O RUN SPONSORSHIP PO BOX 442<br>WEST LONG BRANCH, NJ 07764 | NONE<br>UNRESTRICTED | PUBLIC | 250.       |
| CITY OF ASBURY PARK-4TH OF JULY PARADE ONE MUNICIPAL PLAZA ASBURY PARK, NJ 07712                        | NONE<br>UNRESTRICTED | PUBLIC | 5,400.     |
| CITY OF ASBURY PARK-MAYOR'S BALL COMMITTEE ONE MUNICIPAL PLAZA ASBURY PARK, NJ 07712                    | NONE<br>UNRESTRICTED | PUBLIC | 4,150.     |
| CITY OF LONG BRANCH-CLASSIC CAR<br>SHOW<br>344 BROADWAY LONG BRANCH, NJ<br>07740                        | NONE<br>UNRESTRICTED | PUBLIC | 1,500.     |
| COMMUNITY CELEBRATION COMMITTEE 399 MONMOUTH ROAD OAKHURST, NJ 07755                                    | NONE<br>UNRESTRICTED | PUBLIC | 300.       |

| THE ANSELL GRIMM & AARON FOUND  | ATION, INC           |        | 26-0757646 |
|---|----------------------|--------|------------|
| CONCERTS EAST INC./LIGHT OF DAY FOUNDATION SPONSORSHIP 130 MAPLE AVENUE, STE 3-D RED BANK, NJ 07701 | NONE<br>UNRESTRICTED | PUBLIC | 2,500.     |
| COUNT BASIE THEATRE FOUNDATION 99 MONMOUTH STREET RED BANK, NJ 07701                                | NONE<br>UNRESTRICTED | PUBLIC | 350.       |
| CPC FOUNDATION 10 INDUSTRIAL WAY WEST EATONTOWN, NJ 07724   | NONE<br>UNRESTRICTED | PUBLIC | 1,000.     |
| DEAL FIRE CO.<br>PO BOX 233 DEAL, NJ 07723  | NONE<br>UNRESTRICTED | PUBLIC | 250.       |
| FOOD BANK MONMOUTH & OCEAN COUNTY 3300 ROUTE 66 NEPTUNE, NJ 07753                                   | NONE<br>UNRESTRICTED | PUBLIC | 1,000.     |
| FOOD CIRCUS GOLF TOURNAMENT 853 HIGHWAY 35, PO BOX 278 MIDDLETOWN, NJ 07748                         | NONE<br>UNRESTRICTED | PUBLIC | 1,500.     |
| FRIENDLY SONS OF ST. PATRICK PO BOX 254 SPRING LAKE, NJ 07762                                       | NONE<br>UNRESTRICTED | PUBLIC | 700.       |
| FRIENDS OF DOTTIE'S HOUSE 2141 ROUTE 88 EAST, STE 4 BRICK, NJ 08724                                 | NONE<br>UNRESTRICTED | PUBLIC | 300.       |
| FRIENDS OF MON. COUNTY CHILD ADVOCACY CENTER PO BOX 295 LINCROFT, NJ 07738                          | NONE<br>UNRESTRICTED | PUBLIC | 1,475.     |
| GARDEN STATE EQUALITY 500 BLOOMFIELD AVENUE   | NONE<br>UNRESTRICTED | PUBLIC | 2,050.     |

MONTCLAIR, NJ 07042

| THE ANSELL GRIMM & AARON FOUNDA  | TION, INC            |        | 26-0757646 |
|--|----------------------|--------|------------|
| GIRLS SCOUTS OF THE JERSEY SHORE 1405 OLD FREEHOLD ROAD TOMS RIVER, NJ 08753                               | NONE<br>UNRESTRICTED | PUBLIC | 300.       |
| GO MISSISSIPPI<br>C/O SARAH GRIMM; 2534 BATHGATE<br>AVENUE BRONX, NY 10458                                 | NONE<br>UNRESTRICTED | PUBLIC | 400.       |
| GREATER LONG BRANCH CHAMBER OF<br>COMMERCE<br>ATTN: SUSAN WOOLLEY; PO BOX 628<br>LONG BRANCH, NJ 07740     | NONE<br>UNRESTRICTED | PUBLIC | 3,750.     |
| GREATER OCEAN TOWNSHIP CHAMBER<br>OF COMMERCE<br>PO BOX 656 OAKHURST, NJ 07755                             | NONE<br>UNRESTRICTED | PUBLIC | 1,900.     |
| HEADLINER VOLLEYBALL<br>ATTN: J SWAIN; 200 PESKIN ROAD<br>FARMINGDALE, NJ 07727                            | NONE<br>UNRESTRICTED | PUBLIC | 475.       |
| HOLIDAY EXPRESS 968 SHREWSBURY AVE TINTON FALLS, NJ 07724  | NONE<br>UNRESTRICTED | PUBLIC | 1,139.     |
| HOLMDEL PBA #239<br>PO BOX 214 HOLMDEL, NJ 07733   | NONE<br>UNRESTRICTED | PUBLIC | 225.       |
| HOLOCAUST GENOCIDE & HUMAN<br>RIGHTS CENTER<br>C/O BCC, 765 NEWMAN SPRINGS ROAD<br>LAKEWOOD, NJ 07738-1543 | NONE<br>UNRESTRICTED | PUBLIC | 1,220.     |
| HORIZONS STUDENT ENRICHMENT<br>PROGRAM<br>PO BOX 52 RUMSON, NJ 07760                                       | NONE<br>UNRESTRICTED | PUBLIC | 750.       |
| HOWELL FIRST AID SQUAD<br>PO BOX 1 HOWELL, NJ 07731  | NONE<br>UNRESTRICTED | PUBLIC | 100.       |

| THE ANSELL GRIMM & AARON FOUNDA   | TON THE              |        | 26-0757646 |
|---|----------------------|--------|------------|
| IBRF. 100 MENLO PARK, STE 412 EDISON, NJ 08837  | NONE                 | PUBLIC | 100.       |
| IEP YOUTH SERVICES FOUNDATION GOLF FORE KIDS, 31 MEADOW LANE MARLBORO, NJ 07746                         | NONE<br>UNRESTRICTED | PUBLIC | 200.       |
| IMPACT OASIS 1 MORGAN ROAD MIDDLETOWN, NJ 07748   | NONE<br>UNRESTRICTED | PUBLIC | 700.       |
| ITALIAN AMERICAN ASSOC OF OCEAN TWP. PO BOX 424 OAKHURST, NJ 07755                                      | NONE<br>UNRESTRICTED | PUBLIC | 700.       |
| JEWISH FAMILY & CHILDREN'S SERVICES 705 SUMMERFIELD AVE ASBURY PARK, NJ 07712                           | NONE<br>UNRESTRICTED | PUBLIC | 2,500.     |
| JSUMC FOUNDATION 1345 CAMPUS PARKWAY, STE A2 NEPTUNE, NJ 07753  | NONE<br>UNRESTRICTED | PUBLIC | 2,000.     |
| JUVENILE DIABETES RESEARCH<br>FOUNDATION/ANNUAL GALA<br>740 BROAD STREET, STE 4<br>SHREWSBURY, NJ 07702 | NONE<br>UNRESTRICTED | PUBLIC | 3,850.     |
| K. HOVNANIAN CHILDREN'S HOSPITAL<br>1345 CAMPUS PARKWAY, STE A2<br>NEPTUNE, NJ 07753                    | NONE<br>UNRESTRICTED | PUBLIC | 400.       |
| KEVIN'S JOURNEY OF HOPE<br>ATTN: KEVIN JOHANSEN, 10 BARBERA<br>DRIVD HOLMDEL, NJ 07733                  | NONE<br>UNRESTRICTED | PUBLIC | 200.       |
| LADACIN NETWORK<br>1703 KNEELY BLVD WANAMASSA, NJ   | NONE<br>UNRESTRICTED | PUBLIC | 2,000.     |

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| THE ANSELL GRIMM & AARON FOUNDA  | TION, INC            |        | 26-0757646 |
|--|----------------------|--------|------------|
| LEUKEMIA & LYMPHOMA SOCIETY-SOUTHERN NJ/SHORE REGION CHAPTER - 528 FELLOWSHIP RD, STE B MOUNT LAUREL, NJ 08054 | NONE<br>UNRESTRICTED | PUBLIC | 300.       |
| LEUKEMIA RESEARCH FOUNDATION 3520 LAKE AVENUE, STE 202 WILMETTE, IL 60091-1064                                 | NONE<br>UNRESTRICTED | PUBLIC | 250.       |
| LIGHT OF DAY FOUNDATION INC.<br>201 SOUTH 2ND AVENUE HIGHLAND<br>PARK, NJ 08904                                |                      | PUBLIC | 2,500.     |
| LONG BRANCH CHAMBER OF COMMERCE 228 BROADWAY LONG BRANCH, NJ 07740   |                      | PUBLIC | 1,250.     |
| LONG BRANCH FIRE DEPT-GOLF<br>TOURNAMENT AND BBQ<br>PO BOX 691 LONG BRANCH, NJ<br>07740                        | NONE<br>UNRESTRICTED | PUBLIC | 100.       |
| LONG BRANCH HOUSING AUTHORITY PO BOX 337 LONG BRANCH, NJ 07740   | NONE<br>UNRESTRICTED | PUBLIC | 250.       |
| MERIDIAN HEALTH FOUNDATION 1345 CAMPUS PARKWAY, STE A2 NEPTUNE, NJ 07753                                       | NONE<br>UNRESTRICTED | PUBLIC | 2,250.     |
| MERIDIAN HOSPICE NORTH<br>1340 CAMPUS PARKWAY, STE A3<br>NEPTUNE, NJ 07753                                     | NONE<br>UNRESTRICTED | PUBLIC | 250.       |
| MIDDLETOWN TWP PBA 124<br>PO BOX 222 MIDDLETOWN, NJ 07748  | NONE<br>UNRESTRICTED | PUBLIC | 600.       |
| MIDDLETOWN WARRIORS<br>86 WASHINGTON AVENUE LEONARDO,<br>NJ 07737  | NONE<br>UNRESTRICTED | PUBLIC | 100.       |

| THE ANSELL GRIMM & AARON FOUNDA  | TION, INC            |        | 26-0757646 |
|--|----------------------|--------|------------|
| MONMOUTH BAR ASSOCIATION<br>TIMOTHY MCGOUGHRAN, COURT HOUSE<br>FREEHOLD, NJ 07728          | NONE<br>UNRESTRICTED | PUBLIC | 550.       |
| MONMOUTH COUNTY ARTS COUNCIL<br>107 MONMOUTH STREET RED BANK,<br>NJ 07701                  |                      | PUBLIC | 700.       |
| MONMOUTH COUNTY HISTORICAL<br>ASSOC.<br>70 COURT STREET FREEHOLD, NJ<br>07728              | NONE<br>UNRESTRICTED | PUBLIC | 250.       |
| MONMOUTH COUNTY PBA BALL<br>EDGAR SERRANO JR, PO BOX 290<br>MATAWAN, NJ 07747              | NONE<br>UNRESTRICTED | PUBLIC | 500.       |
| MONMOUTH COUNTY SPCA<br>PO BOX 93 EATONTOWN, NJ 07724                                      | NONE<br>UNRESTRICTED | PUBLIC | 250.       |
| MONMOUTH PARK CHARITY BALL<br>C/O MONMOUTH PARK, 175 OCEANPORT<br>AVE OCEANPORT, NJ 07757  |                      | PUBLIC | 750.       |
| MONMOUTH UNIVERSITY- KISLAK REAL ESTATE INSTITUTE 400 CEDAR AVE WEST LONG BRANCH, NJ 07764 | NONE<br>UNRESTRICTED | PUBLIC | 1,300.     |
| MONMOUTH-OCEAN DEVELOPMENT<br>COUNCIL<br>4814 OUTLOOK DRIVE, STE 102<br>WALL, NJ 07753     | NONE<br>UNRESTRICTED | PUBLIC | 650.       |
| MUSCULAR DYSTROPHY ASSOC. 788 SHREWSBURY AVE, BLDG 2, STE 203 TINTON FALLS, NJ 07724       | NONE<br>UNRESTRICTED | PUBLIC | 200.       |
| OCEAN HOUSING ALLIANCE ATTN: ELIZABETH MILUTIN, PO BOX                                     | NONE<br>UNRESTRICTED | PUBLIC | 550.       |

1778 TOMS RIVER, NJ 08754

| THE ANSELL GRIMM & AARON FOUND   | ATION, INC           |        | 26-0757646 |
|--|----------------------|--------|------------|
| OCEAN LIGHTNING<br>C/O JASON WALK, 10 TEABURY LANE<br>OAKHURST, NJ 07755                     | NONE<br>UNRESTRICTED | PUBLIC | 135.       |
| OCEAN TOWNSHIP ELEMENTARY<br>SCHOOL-PTA<br>555 DOW AVENUE OAKHURST, NJ<br>07755              | NONE<br>UNRESTRICTED | PUBLIC | 150.       |
| OCEAN TOWNSHIP LITTLE LEAGUE<br>PO BOX 2244 OCEAN, NJ 07712                                  | NONE<br>UNRESTRICTED | PUBLIC | 1,000.     |
| OCEAN TOWNSHIP UNITED SOCCER<br>ASSOC.<br>C/O JASON WALK, 10 TEABURY LANE<br>OCEAN, NJ 07712 | NONE<br>UNRESTRICTED | PUBLIC | 160.       |
| PBA LOCAL 314<br>PO BOX 1245 FREEHOLD, NJ 07728  | NONE<br>UNRESTRICTED | PUBLIC | 380.       |
| PBA LOCAL 57<br>PO BOX 1025 OAKHURST, NJ 07755   | NONE<br>UNRESTRICTED | PUBLIC | 500.       |
| POLICE UNITY TOUR PO BOX 528 FLORHAM PARK, NJ 07932  | NONE<br>UNRESTRICTED | PUBLIC | 100.       |
| PREVENTION FIRST<br>ATTN: MICHELLE CICALESE, 1405<br>HIGHWAY 35 OCEAN, NJ 07712              | NONE<br>UNRESTRICTED | PUBLIC | 2,500.     |
| RANNEY SCHOOL-ANNUAL GOLF & TENNIS CLASSIC 235 HOPE ROAD TINTON FALLS, NJ 07724              | NONE<br>UNRESTRICTED | PUBLIC | 250.       |
| RANNEY SCHOOL-RSPA PANTHER BALL 235 HOPE ROAD TINTON FALLS, NJ 07724                         | NONE<br>UNRESTRICTED | PUBLIC | 1,200.     |

| THE ANSELL GRIMM & AARON FOUNDA  | TION, INC            |        | 26-0757646 |
|--|----------------------|--------|------------|
| RED BANK PBA LOCAL #39 PO BOX 39 RED BANK, NJ 07701                                  |                      | PUBLIC | 240.       |
| RED BANK POP WARNER<br>PO BOX 8461 RED BANK, NJ 07701                                | NONE<br>UNRESTRICTED | PUBLIC | 100.       |
| RED BANK REGIONAL BOOSTER CLUB<br>1 BLADES RUN DRIVE SHREWSBURY,<br>NJ 07702         |                      | PUBLIC | 100.       |
| RETIRED MEMBERS ASSOC-PBG LOCAL #256 PO BOX 189 WEST LONG BRANCH, NJ 07728           | NONE<br>UNRESTRICTED | PUBLIC | 1,000.     |
| RONALD MCDONALD HOUSE<br>131 BATH AVENUE LONG BRANCH, NJ<br>07740                    | NONE<br>UNRESTRICTED | PUBLIC | 250.       |
| SANDY HOOK PBA #48<br>PO BOX 141 HIGHLANDS, NJ 07732                                 | NONE<br>UNRESTRICTED | PUBLIC | 800.       |
| SCAN ADULT EDUCATION CENTER-MONMOUTH MALL 180 HIGHWAY 35 SOUTH EATONTOWN, NJ 07724   | NONE<br>UNRESTRICTED | PUBLIC | 100.       |
| SEPHARDIC COMMUNITY CENTER<br>1901 OCEAN PARKWAY BROOKLYN, NY<br>11223               | NONE<br>UNRESTRICTED | PUBLIC | 1,100.     |
| SHORE BUILDERS ASSOC OF CENTRAL<br>NJ<br>190 OBERLIN AVE NORTH LAKEWOOD,<br>NJ 08701 | NONE<br>UNRESTRICTED | PUBLIC | 450.       |
| SHORE PLAYERS-SRHS<br>MONMOUTH PARK, HIGHWAY 36 WEST                                 | NONE<br>UNRESTRICTED | PUBLIC | 100.       |

LONG BRANCH, NJ 07764

| THE ANSELL GRIMM & AARON FOUNDA  | TION, INC            |        | 26-0757646 |
|--|----------------------|--------|------------|
| SHREWSBURY PARENT TEACHER GROUP<br>20 OBRE PLACE SHREWSBURY, NJ<br>07702             | NONE<br>UNRESTRICTED | PUBLIC | 350.       |
| SHREWSBURY YOUTH ATHLETIC ASSOC. PO BOX 7326 SHREWSBURY, NJ 07702                    | NONE<br>UNRESTRICTED | PUBLIC | 950.       |
| SICA<br>20 THIRD AVENUE LONG BRANCH, NJ<br>07740                                     | NONE<br>UNRESTRICTED | PUBLIC | 300.       |
| SISTERHOOD-CONGREGATION SONS OF ISRAEL PO BOX 2231 OCEAN, NJ 07712                   | NONE<br>UNRESTRICTED | PUBLIC | 35.        |
| SPARTAN BOOSTER CLUB<br>OCEAN TOWNSHIP HIGH SCHOOL, PO<br>BOX 428 OAKHURST, NJ 07755 | NONE<br>UNRESTRICTED | PUBLIC | 375.       |
| SPARTAN FOOTBALL CLUB<br>PO BOX 1094 OAKHURST, NJ 07755                              | NONE<br>UNRESTRICTED | PUBLIC | 650.       |
| SPECIAL OLYMPICS<br>C/O TD BANK, 4057 ASBURY AVENUE<br>TINTON FALLS, NJ 07753        | NONE<br>UNRESTRICTED | PUBLIC | 100.       |
| SPECIAL OPERATIONS WARRIOR FOUNDATION PO BOX 13483 TAMPA, FL 33681-3483              | NONE<br>UNRESTRICTED | PUBLIC | 2,500.     |
| ST. GEORGE GREEK ORTHODOX CHURCH 700 GRAND AVENUE ASBURY PARK, NJ 07712              |                      | PUBLIC | 400.       |
| ST. JUDE CHILDREN'S RESEARCH<br>HOSPITAL<br>262 DANNY THOMAS PLACE MEMPHIS,          | NONE<br>UNRESTRICTED | PUBLIC | 250.       |

TN 38105

| THE ANSELL GRIMM & AARON FOUND   | ATION, INC           |        | 26-0757646 |
|--|----------------------|--------|------------|
| SUSAN G. KOMEN FOR THE CURE<br>ATTN: DONOR SERVICES, PO BOX<br>650309 DALLAS, TX 75265-0309            | NONE<br>UNRESTRICTED | PUBLIC | 500.       |
| TEMPLE BETH MIRIAM PO BOX 2097 ELBERON, NJ 07740   | NONE<br>UNRESTRICTED | PUBLIC | 500.       |
| THE COMMUNITY YMCA 113 TINDALL RD MIDDLETOWN, NJ 07748   | NONE<br>UNRESTRICTED | PUBLIC | 1,100.     |
| THE FOUNDATION FOR SHREWSBURY EDUCATION INC. C/O SHREWSBURY SCHOOL, ORBE PLACE SHREWSBURY, NJ 07702    | NONE<br>UNRESTRICTED | PUBLIC | 500.       |
| THE NATIONAL MS SOCIETY 246 MONMOUTH ROAD OAKHURST, NJ 07755   | NONE<br>UNRESTRICTED | PUBLIC | 1,825.     |
| THE NJ STATE BAR FOUNDATION NEW JERSY LAW CENTER, ONE CONSTITUTION SQUARE NEW BRUNSWICK, NJ 08901-1520 | NONE<br>UNRESTRICTED | PUBLIC | 2,500.     |
| THE TOWNSHIP OF OCEAN POLICE<br>FUND<br>399 MONMOUTH ROAD OAKHURST, NY<br>07755                        | NONE<br>UNRESTRICTED | PUBLIC | 250.       |
| TOWNSHIP OF OCEAN HISTORICAL MUSEUM PO BOX 516 OAKHURST, NJ 07755                                      | NONE<br>UNRESTRICTED | PUBLIC | 250.       |
| U-9 JERSEY SHORE ELITE<br>BASKETBALL<br>1750 BRIELLE AVE OCEAN, NJ<br>07712                            | NONE<br>UNRESTRICTED | PUBLIC | 250.       |
| VFW POST 1333<br>701 LAKE AVENUE BRADLEY BEACH,  | NONE<br>UNRESTRICTED | PUBLIC | 100.       |

NJ 07720

| THE ANSELL GRIMM & AARON FOUNDA   | TION, INC            |        | 26-0757646 |
|---|----------------------|--------|------------|
| VISITING NURSE ASSOCIATION OF<br>CENTRAL JERSEY<br>176 RIVERSIDE AVENUE RED BANK,<br>NJ 07701 | NONE<br>UNRESTRICTED | PUBLIC | 6,050.     |
| WANAMASSA ELEMENTARY SCHOOL PTA<br>1106 INTERLAKEN AVENUE OCEAN,<br>NJ 07712                  | NONE<br>UNRESTRICTED | PUBLIC | 200.       |
| WAYSIDE ELEMENTARY SCHOOL<br>733 BOWNE ROAD WAYSIDE, NJ<br>07712                              | NONE<br>UNRESTRICTED | PUBLIC | 125.       |
| WEST LONG BRANCH FOUNDATION FOR PUBLIC EDUCATION PO BOX 113 WEST LONG BRANCH, NJ 07764        | NONE<br>UNRESTRICTED | PUBLIC | 150.       |
| WEST LONG BRANCH PTA<br>135 LOCUST AVENUE WEST LONG<br>BRANCH, NJ 07764                       | NONE<br>UNRESTRICTED | PUBLIC | 100.       |
| WLB SPORTS ASSOC.<br>PO BOX 239 WEST LONG BRANCH, NJ<br>07764                                 | NONE<br>UNRESTRICTED | PUBLIC | 300.       |
| TOTAL TO FORM 990-PF, PART XV, LI   | NE 3A                |        | 124,066.   |

# Form **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

|  | rile a Sep  |  |  |            |                                       |        |
|--|---|--|--|------------|---------------------------------------|--------|
| • If you a   | re filing for an Automatic 3-Month Extension, comple  | te only Pa   | rt I and check this box  |            | . •                                   | X      |
| • If you a   | re filing for an Additional (Not Automatic) 3-Month 🛱   | ctension, c  | omplete only Part II (on page 2 of the                                     | is form).  |                                       |        |
| Do not co  | mplete Part II unless you have already been granted   | an automa  | tic 3-month extension on a previously                                      | filed For  | rm 8868.                              |        |
| Electronic   | c filing (e-file). You can electronically file Form 8868 if   | you need a   | 3-month automatic extension of time  | to file (6 | months for a corpo                    | ration |
|  | o file Form 990-T), or an additional (not automatic) 3-mo   |  |  |            | •                                     |        |
| •  | 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  | •  |  |            |                                       |        |
|  | irs.gov/efile and click on e-file for Chanties & Nonprofits   |  |  |            | , a of the filling of this to         | ,,,,   |
| Part I   | Automatic 3-Month Extension of Time   |  | bmit original (no copies needed)   |            |                                       |        |
|  | tion required to file Form 990-T and requesting an autor  |  |  | molete     |                                       |        |
| Part I only  | · · · · · · · · · · · · · · · · · · ·   | mane offic   | THE EXTENSION CHECK THIS DOX AND CO  | anpiete    | •                                     |        |
| All other c  | orporations (including 1120-C filers), partnerships, REN<br>me tax returns.   | fICs, and t  | rusts must use Form 7004 to request a                                      | an exten   | sion of time                          |        |
| Type or  | Name of exempt organization   |  |  | Emp        | loyer identification                  | number |
| print  | Marile of exempt organization   |  |  |            |                                       |        |
| p  | THE ANSELL GRIMM & AARON FO   | OUNDA  | TION, INC  | 2          | 6-0757646                             |        |
| File by the  | Number, street, and room or suite no. If a P.O. box, s  |  |  |            |                                       |        |
| due date for !<br>filing your  | C/O MICHAEL BENEDETTO, ESQ  | _  |  |            |                                       |        |
| return See<br>instructions   | City, town or post office, state, and ZIP code For a  |  |  |            |                                       |        |
|  | OCEAN TOWNSHIP, NJ 07712  | oreigir add  | ress, see mandenons.   |            |                                       |        |
|  | OCHAN TOWNDHILL NO OTTE   |  |  |            | · · · · · · · · · · · · · · · · · · · |        |
| 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  | 1   | Return   | Application  |            |                                       | Return |
| is For   | ,,,   | Code   | Is For   |            |                                       | Code   |
| Form 990   |   | 01   | Form 990-T (corporation)   | •          |                                       | 07     |
|  | DI I  | †  |  | _          | —.                                    | 08     |
| Form 990-  |   | 02   | Form 1041-A  |            | <del></del>                           |        |
| Form 990-  |   | 03   | Form 4720  |            |                                       | 09     |
| Form 990-  |   | 04_  | Form 5227  |            |                                       | 10     |
|  | T (sec. 401(a) or 408(a) trust)   | 05_  | Form 6069  |            |                                       | 11     |
| Form 990-  | T (trust other than above)  | 06   | Form 8870  |            | _ ·· ·                                | 12     |
|  | ANSELL GRIMM &  |  | •  |            |                                       |        |
|  | oks are in the care of > 1500 LAWRENCE  | AVENUI   |  |            |                                       |        |
|  | one No. ► 732-922-1000  |  | FAX No. ►  |            |                                       |        |
|  | rganization does not have an office or place of busines   |  |  |            | . >                                   |        |
|  | s for a Group Return, enter the organization's four digit   |  |  |            |                                       |        |
| box 🕨 💄  | . If it is for part of the group, check this box  | and atta   | ch a list with the names and EINs of a                                     | ıll memb   | ers the extension is                  | for.   |
|  | ruest an automatic 3-month (6 months for a corporation FEBRUARY 15, 2012, to file the exemp   |  |  |            | The extension                         |        |
|  | r the organization's return for:  | •  | <b>-</b>   |            |                                       |        |
|  | calendar year or  |  |  |            |                                       |        |
| ▶  | X tax year beginning JUL 1, 2010  | an   | dending JUN 30, 2011   |            |                                       |        |
| ►L<br>►  |   |  |  |            | ·                                     |        |
|  | A (ax year beginning OOL 1, 2010  |  |  |            |                                       |        |
| ▶[   | e tax year entered in line 1 is for less than 12 months, of Change in accounting period   | check reas   | on: Initial return Fi  | nal retur  | n                                     |        |
| 2  f the   | e tax year entered in line 1 is for less than 12 months, on the Change in accounting period is application is for Form 990-BL, 990-PF, 990-T, 4720,   |  |  |            |                                       |        |
| 2 If the   | e tax year entered in line 1 is for less than 12 months, on the Change in accounting period is application is for Form 990-BL, 990-PF, 990-T, 4720, refundable credits. See instructions.   | or 6069, e   | nter the tentative tax, less any   | nal retur  | s                                     | 0.     |
| 2 If the San If the Sa | e tax year entered in line 1 is for less than 12 months, of Change in accounting period is application is for Form 990-BL, 990-PF, 990-T, 4720, refundable credits. See instructions. is application is for Form 990-PF, 990-T, 4720, or 6069,  | or 6069, e   | nter the tentative tax, less any refundable credits and                    | За         | \$                                    |        |
| 2 If the San If the Sa | e tax year entered in line 1 is for less than 12 months, of Change in accounting period  Is application is for Form 990-BL, 990-PF, 990-T, 4720, refundable credits. See instructions.  Is application is for Form 990-PF, 990-T, 4720, or 6069, mated tax payments made. Include any prior year over | or 6069, e<br>, enter any<br>payment a               | nter the tentative tax, less any refundable credits and lowed as a credit. |            |                                       | 0.     |
| 2 If the Salar Sal | e tax year entered in line 1 is for less than 12 months, of Change in accounting period is application is for Form 990-BL, 990-PF, 990-T, 4720, refundable credits. See instructions. is application is for Form 990-PF, 990-T, 4720, or 6069,  | or 6069, e<br>, enter any<br>payment a<br>ayment wit | refundable credits and lowed as a credit. h this form, if required,        | За         | \$                                    |        |

023841 01-03-11

LHA

Form 8868 (Rev. 1-2011)

For Paperwork Reduction Act Notice, see Instructions.