

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490





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Form	9	9	0	-P	F
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Return of Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust

OMB No 1545-0052 _െ 1 📭

		ent of the Treasury evenue Service	Note. The found	ation may b	reat ا e able to	ed as a Privuse a copy of	this return to s	on satisfy state re	porting requiren	nents		IU
F	or ca	lendar year 2010,						, and ending				, 20
_	G Check all that apply X Initial return Initial return of a former public charity							Final retu	ırn			
			Amende	d return		Addre	ss change		Name chang	je	-	
N	ame o	f foundation							A Employer	ıde ntific	cation numbe	r
s	TAD	LER FAMILY C	HARITABLE	FOUNDA	TION,	INC.				45-	-2470819	i
N	umbe	r and street (or P O b	ox number if mail is	not delivered	to street ac	idress)		Room/suite	B Telephone	number	(see page 10 of ti	he instructions)
3	07	FREEMANS LAN	Έ							(21	.2) 265-	6226
Ci	ty or i	town, state, and ZIP	code	_					C If exemption pending, ch			
									1 ' -		tions, check here	``.▶□
F	RAN	KLIN LAKES,	NJ 07417						1-	-	tions meeting the	- —
Н	Che	ck type of organiz	ation X Se	ction 501(c	c)(3) exe	mpt private	foundation				nere and attach	▶□
Γ	ີ s	ection 4947(a)(1) no	onexempt charita	ble trust	Oth	er taxable pi	rivate founda	tion	'		n status was term	
ī		market value of al		J Accou	unting me	ethod X C	ash Acc	crual	1		n status was term i)(1)(A), check her	
	of y	ear (from Part II, co	ol (c), line	Ot	her (spec	cify)			1		in a 60-month tei	
		▶ \$	0.	(Part I, c	column (d	d) must be or	i cash basis))(1)(B), check her	
E	art l	Analysis of Reve	enue and Expe	nses (The	(a) Re	venue and	(h) Nationia		(a) Advisad s		(d) Disbu	
	-	total of amounts in a may not necessant			`éxpe	nses per	(b) Net inve		(c) Adjusted r	iei	for cha	aritable oses
		column (a) (see pag			b	ooks					(cash ba	
	1	Contributions, gifts, grants	, etc., received (attach	schedule) .		0						
	2		foundation is not re									
	3	Interest on savings and										
	4	Dividends and inter	est from securitie	s L								
	5 a	Gross rents							 			
	b	Net rental income or (le	oss)									
ē		Net gain or (loss) from		on line 10					·			
en	b	Gross sales price for al assets on line 6a										
Revenue	7	Capital gain net inc	ome (from Part I)	/, line 2) .							 	
-	8	Net short-term capit										
	9	Income modification							RE	ECE	IVED	
		and allowances · · ·	••									78 -
	-	Less Cost of goods sol							8 11	IN 1 1	5 2012	19
		Gross profit or (loss							 임 JU	M I	<u>v) 7117</u>	122
	11	Other income (attac				0	<u> </u>		- - 			
_	12	Total. Add lines 1 th				0			1 00	3DE	<u>₹N, UT</u>	
	13 14	Compensation of office										
S		Other employee sal	=				"					
Expenses	15	Pension plans, emp Legal fees (attach se									 	
ğ		Accounting fees (at										
ė m	,	Other professional f								-		
흝	17	Interest										
str	18	Taxes (attach schedule										
Ë	19	Depreciation (attacl	• • • •	Г								
and Administrative	20	Occupancy	•		-							
4	21	Travel, conferences										
au	22	Printing and publica										
	23	Other expenses (att		- 1								
Operating	24	Total operating an	•	Г		-	1					
pe		Add lines 13 through		·		0 .					<u> </u>	
0	25	Contributions, gifts,		l l		0					<u> </u>	0
_	26	Total expenses and disbu	= :			0						0
	27	Subtract line 26 fro	m line 12			*						
	a	Excess of revenue over e	xpenses and disburs	ements		0					<u> </u>	
	b	Net investment inc	ome (if negative,	enter -0-)			ļ	0.			 	

c Adjusted net income (if negative, enter -0-). .

For Paperwork Reduction Act Notice, see page 30 of the instructions.

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Form 990-PF (2010)

PAGE 1

JSA



		D-1	Attached schedules and amounts in the	Beginning of year	Eı	nd of year
P	art II	Balance Sheets	description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-beam	ng			
			cash investments			
	3	Accounts receivable				
		Less allowance for doul	btful accounts			
			btful accounts ▶			
			fficers, directors, t rustees, a nd o ther			
	•		' '			
	_		ich schedule) (see page 15 of the instructions)			
			eceivable (attach schedule)			
			btful accounts ▶		 	
sets			e			
SS		•	eferred charges			
Ÿ			e govemment obligations (attach schedule), .			
			stock (attach schedule)		. .	
	11 C	Investments - corporate Investments - land, buildings	bonds (attach schedule)			
	• •	and equipment basis Less accumulated deprecia (attach schedule)				
	12	•	loans			
		• -	ach schedule)			
	14	Land, buildings, and	•			
		Less accumulated deprecia	tion >			
ı			>)			
			completed by all fillers -s ee the			
			age 1, item I)	0.		0.
\dashv			ccrued expenses			
						
_						
Liabilities						
薑			rs, trustees, and other disqualified persons			_
Ē			tes payable (attach schedule)			
	22	Other liabilities (describe	; ▶)		··-	
	23	Total liabilities (add line	a 17 through 22\	0.		0.
\dashv			s 17 through 22)			<u> </u>
			low SFAS 117, check here ► 24 through 26 and lines 30 and 31.			
Ses	24 25 26 27	Unrestricted				
ă	25	Temporarily restricted .				
Ba	26	Permanently restricted .				
힏		Foundations that do	not follow SFAS 117,			
교		check here and com	plete lines 27 through 31. ▶ X			
	27		cipal, or current funds			
		Paid-In or capital surplus, or	land, bldg , and equipment fund			
Assets	29	Retained earnings, accumu	alated income, endowment, or other funds			
¥		Total net assets or f	fund balances (see page 1 7 of the			
Net		instructions)		0.		0.
	31	Total liabilities and ne	t assets/fund balances (see page 1 7			
			<u> </u>	0.		0.
P	art II	Analysis of Cha	inges in Net Assets or Fund	Balances		
			alances at beginning of year - Part		must agree with	
			d on prior year's return)			1 0.
2			line 27a			0.
3	Othe	r increases not include	ed in line 2 (itemize) ▶			3
						0.
		eases not included in	line 2 (itemize)			5
6	Total	net assets or fund ha	alances at end of year (line 4 minus	ine 5) - Part II. column (h), line 30	<u> </u>
<u>~</u>	· Utal	assets or fully be	named at one of your time a minus		,, <u> </u>	****

(a) List an	d describe the kind(s) of property sold (brick warehouse, or common stock, 200	(e g , real estate,	(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo , day, yr.)	(d) Date sold (mo., day, yr)
1a					
b			<u> </u>		
<u>C</u>					
d					
<u>e</u>	(0.5)	(a) Cost or other book	ļ		<u> </u>
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) mini	
a			1.		
b					
_ C					
<u>d</u>					
<u>e</u>	<u> </u>				
Complete only for assets	showing gain in column (h) and owne	1		Gains (Col (h) g	
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	COI	(k), but not less t Losses (from co	
а					
b					
C					
_d	 		ļ		
<u>e</u>			 		
2 Capital gain net income or		gain, also enter in Part I, line 7 }	2		
3 Net short-term capital gair	'') or (loss) as defined in sections 12	,	-		
	, line 8, column (c) (see pages 13				
<u> </u>	line 8		3		
Part V Qualification l	Jnder Section 4940(e) for Re-	duced Tax on Net Investment I	ncome		
	Touro tino part olarin.	F AVAILABLE FOR INITIAL outable amount of any year in the b Do not complete this part			Yes No
		r, see page 18 of the instructions be	efore mak	ing any entries.	····
(a)	(b)	(c)		(d)	
Base penod years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of nonchantable-use assets		Distribution ra (col (b) divided by	
2009					
2008					
2007					
2006			ļ		
2005		<u> </u>	<u> </u>		
2 Total of line 1, column (d)			2		
3 Average distribution ratio	for the 5-year base period - divide	the total on line 2 by 5 or by the	-		
•		s than 5 years	3		
4 Enter the net value of nor	ncharitable-use assets for 2010 fro	om Part X, line 5	4		
5 Multiply line 4 by line 3			5		
			6		
7 Add lines 5 and 6			7		
8 Enter qualifying distribution If line 8 is equal to or gree Part VI instructions on page		n Part VI, line 1b, and complete t	8 hat part u	using a 1% tax	rate Seethe

	Excise Tax Based on investment income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of the section 4940(b), 4940(c), or 4948 - see page 18 of the section 4940(b), 4940(c), or 4948 - see page 18 of the section 4940(c), or 4948 - see page 18 of the section 4940(c), or 4948 - see page 18 of the section 4940(c), or 4948 - see page 18 of the section 4940(c), or 4948 - see page 18 of the section 4940(c), or 4948 - see page 18 of the section 4940(c), or 4948 - see page 18 of the section 4940(c), or 4948 - see page 18 of the section 4940(c), or 4940(c), or 4948 - see page 18 of the section 4940(c), or 4940(c), or 4948 - see page 18 of the section 4940(c), or 4940(c)	ne ins	struction	ons)
1 a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1			
	Date of ruling or determination letter (attach copy of ruling letter if necessary - see instructions)			•
b	Domestic f oundations that me et the s ection 4940(e) re quirements i n P art V, c heck			0.
	here and enter 1% of Part I, line 27b			
С	All of her dom estic f oundations enter 2 % of 1 ine 2.7b E xempt f oreign organizations enter 4 % of Part I, line 12, col (b).			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 2			
3	Add lines 1 and 2			0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 4			0.
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0			0.
6	Credits/Payments			
	2010 estimated tax payments and 2009 overpayment credited to 2010			
	Tax para with approaches for extension of time to me (1 arm esco).			
	,			0.
7	Total credits and payments Add lines 6a through 6d			.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached			0.
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			
10 11	Enter the amount of line 10 to be Credited to 2011 estimated tax Refunded			
_	t VII-A Statements Regarding Activities			
1 a			Yes	No
	participate or intervene in any political campaign?	1a	100	X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 1.9			
	of the instructions for definition)?	1 b		х
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			
	published or distributed by the foundation in connection with the activities			
С	Did the foundation file Form 1120-POL for this year?	1 c		х
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation. ▶\$(2) On foundation managers ▶\$			
е	Enter the reimbursement (if any) p aid by the foundation during the year for political expenditure tax imposed			
	on foundation managers \$	ļ		
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		Х
	If "Yes," attach a detailed description of the activities	İ		
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of	!		
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			X
4 a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4 a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?	_4b	N/	A X
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	. 5	 	
_	If "Yes," attach the statement required by General Instruction T			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
	By language in the governing instrument, or Provided to a solution that of footback are not to be governing and the control of the cont			
	By state I egislation that effectively am ends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6	x	
7	Did the foundation have at least \$5,000 in assets at any time during the year? # "Yes," complete Part II, col (c), and Part XV	7		Х
	Enter the states to which the foundation reports or with which it is registered (see page 1.9 of the	'		
vu	NJ.			
b	If the an swer is "Yes" to line 7, has the foundation furnished alc opy of Form 9 90-PF to the Attorney General			
_	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8 b		х
9	is the foundation claiming status as a private oper ating foundation within the meaning of section 4942(j)(3) or			
	4942(j)(5) f or calendar y ear 2010 or the taxable y ear beginning in 2010 (see instructions for P art X IV on page			
	27)? If "Yes," complete Part XIV	9		Х
10	Did an y pers ons bec ome substantial c ontributors du ring t he t ax y ear? If "Yes," attach a schedule listing their			
	names and addresses	10		x
			O DE	

Pai	rt VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule (see page 20 of the instructions)	11		Х
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before			
	August 17, 2008?	12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13_	Х	
	Website address ►N/A			
14	The books are in care of STADLER FAMILY CHARITABLE FOUNDATION Telephone no	5-62	26	
	Website address ► N/A The books are in care of ► STADLER FAMILY CHARITABLE FOUNDATION Telephone no ► 212-26 Located at ►307 FREEMANS LANE FRANKLIN LAKES, NJ ZIP+4 ► 07417			
15	Section 4947 (a)(1) nonexempt charitable trusts filing Form 990-PF in fled of Form 1041 - Check here	Ņ/A	• • ▶	•
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At an yt ime during c alendar y ear 2 010, d id the f oundation h ave an i interest in or a is ignature or ot her au thority	•	Yes	
	over a bank, secunties, or other financial account in a foreign country?	16	L	X
	See page 20 of the instructions for exceptions and filling requirements for Form TD F 90-22 1 lif "Yes," einter			•
	the name of the foreign country	J		L
Pai	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1 a	During the year did the foundation (either directly or indirectly)			1
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No			ŀ
	(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 of Fernburse the expenses of, a disqualited person?	}		
	(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)? Yes X No	ľ		
	(6) Agreet o pay m oney or pr operty to a gov ernment 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, in terminating within 50 days /	ļ		
D	If any answer is "Yes" to 1 a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	4.5	N	, ,
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see page 22 of the instructions)?	1 b	IN	A
_	Organizations relying on a current notice regarding disaster assistance check here			
С	Did t he foundation en gage in a prior year in any of the acts des cribed in 1 a, ot her than e xcepted acts, t hat	1 c		х
2	were not corrected before the first day of the tax year beginning in 2010?	- 10		
-	operating foundation defined in section 4942(j)(3) or 4942(j)(5))	ļ		
a	At the end of tax year 2010, did the foundation have any undistributed income (lines 6d and			
u	6e, Part XIII) for tax year(s) beginning before 2010?	ĺ		
	If "Yes," list the years			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			ı
-	(relating t o i incorrect vialuation of a ssets) to the ly ear's undistributed income? (if applying siection 4942(a))(2) to			
	all years listed, answer "No" and attach statement - see page 22 of the instructions)	2b	N/	Α
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	>			
3 a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year?			
b	If "Yes," did it have excess bus iness holdings in 2010 as a result of (1) any purichase by the foundation or			
	disqualified pers ons after M ay 2 6, 1 969, (2) the lapse of the 5-y ear per iod (or longer per iod appr oved by the			
	Commissioner und er s ection 4943(c)(7)) t o d ispose o f ho ldings a cquired by gi ft o r bequest, or (3) the lapse o f			
	the 10-, 15-, or 20-year first phase holding penod? (Use Schedule C, Form 4720, to determine if the			
	foundation had excess business holdings in 2010)	3 b	N	
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
b	Did t he foundation m ake any investment in a prior year (but after December 3.1, 1969) that could jeopardize its			v
	charitable purpose that had not been removed from jeopardy before the first day of the taxyear beginning in 2010?	4b	n-PF	<u> </u>

Part	VII-B Statements Regarding Activities fo	r Which Form 4	720 May Be Requi	red (continued)				
5a	 VII-B Statements Regarding Activities for During the year did the foundation pay or incur any amour (1) Carry on propaganda, or otherwise attempt to influence (2) Influence the outcome of any specific public election directly or indirectly, any voter registration drive? (3) Provide a grant to an individual for travel, study, or oth (4) Provide a grant to an organization other than a charit section 509(a)(1), (2), or (3), or section 4940(d)(2)? (s) (5) Provide for any purpose other than religious, charitab purposes, or for the prevention of cruelty to children or If any answer is "Yes" to 5a(1)-(5), did any of the transa Regulations section 53 4945 or in a current notice regarding 	nt to ce legislation (section (see section 4955), o er similar purposes? able, etc., organizatio see page 22 of the ins le, scientific, literary, animals?	4945(e))? r to carry on, n described in structions) or educational	Yes X No Hes X No Hes X No Hes Cribed in		N/A		
С	Organizations relying on a current notice regarding disaster assistance check here							
6 a	Did the foundation, during the year, receive any funds, di on a personal benefit contract?	rectly or indirectly, to	personal benefit contrac		6b	X		
b Pari	If "Yes," did the foundation receive any proceeds or have Information About Officers, Directors, and Contractors	any net income attrib Trustees, Found	outable to the transaction dation Managers,	highly Paid Emplo	7b byees,	N/A		
1 L	ist all officers, directors, trustees, foundation ma (a) Name and address	anagers and their (b) Title, and average hours per week devoted to position	(c) Compensation (see (f) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation		se account, owances		
ATT	FACHMENT 1		0.	0.		0		
	Compensation of five highest-paid employees (oth	er than those inc	luded on line 1 - se	e page 23 of the inst	ructions).			
	Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expens	se account, owances		
	NONE							
								
Total	number of other employees paid over \$50,000					0-PF (2010)		

and Contractors (continued)	
3 Five highest-paid independent contractors for professional services (see page 23 of the instructions). If no (a) Name and address of each person paid more than \$50,000 (b) Type of services	one, enter "NONE." (c) Compensation
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE	
Total number of others receiving over \$50,000 for professional services	NONE
Part IX-A Summary of Direct Charitable Activities	
List the foundation's four largest direct chantable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficianes served, conferences convened, research papers produced, etc.	Expenses
1 N/A	
2	
3	
<u> </u>	
4	
Part IX-B Summary of Program-Related Investments (see page 24 of the instructions)	Amount
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 1 NONE	711104111
1 1010	
2	
All other program-related investments. See page 24 of the instructions	
3 NONE	
Total. Add lines 1 through 3	
	Form 990-PF (2010

Pa	Int X Minimum Investment Return (All domestic foundations must complete this part. Foreign see page 24 of the instructions.)	ign foundations	i,
1	Fair m arket value of assets no t used (o r held for use) d irectly in carry ing out charitable, etc.,		
	purposes		
а	Average monthly fair market value of securities	1a	0.
b	Average of monthly cash balances	1b	0.
С	Fair market value of all other assets (see page 25 of the instructions)	1c	0.
d	Total (add lines 1a, b, and c)	1d	0.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Cultivast line O from line 4 d	3	0.
4	Cash deemed held for charitable activities Enter 1 1/2 % of line 3 (for greater amount, see page 25 of		
	the instructions)	4	0.
5	the instructions) Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	0.
6	Minimum investment return. Enter 5% of line 5	6	0.
Pa	To Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) privations and certain foreign organizations check here ▶ and do not complete this private that is the private that the private that is the private that t		
1	Minimum investment return from Part X, line 6	1	0.
2a	Tax on investment income for 2010 from Part VI, line 5 2a 0.		
b	Income tax for 2010 (This does not include the tax from Part VI) 2b	1	
	Add lines 2a and 2b	2c	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	0.
4	Recoveries of amounts treated as qualifying distributions		
5	Add lines 3 and 4	5	0.
6	Deduction from distributable amount (see page 25 of the instructions)	6	
7	Distributable amount as adjusted Subtract lin e 6 from lin e 5. En ter here and on Part X III,		······································
	line 1	7	0.
Pa	rt XII Qualifying Distributions (see page 25 of the instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	0.
b	Program-related investments - total from Part IX-B	1b	0.
2	Program-related investments - total from Part IX-B Amounts paid to acquire assets uised (oir held for uise) directly in carrying out charitable, et ci,		
_	purposes	2	0.
3	Amounts set aside for specific charitable projects that satisfy the		· · · · · · · · · · · · · · · · · · ·
a	Suitability test (prior IRS approval required)	3a	0.
b	Cash distribution test (attach the required schedule)	L	0.
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	0.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		
	Enter 1% of Part I, line 27b (see page 26 of the instructions)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	0.
-	Note: The a mount on line 6 will be u sed in Part V, c olumn (b), in subsequent y ears when c all	culating whether	er the foundation
	qualifies for the section 4940(e) reduction of tax in those years	J	

Form **990-PF** (2010)

Pa	Part XIII Undistributed Income (see page 26 of the instructions)								
		(a)	(b)	(c)	(d)				
1	Distributable a mount for 2010 fr om Part X I,	Corpus	Years prior to 2009	2009	2010				
	line 7	•			0.				
2	Undistributed income, if any, as of the end of 2010								
_	Enter amount for 2009 only								
h	Total for pnor years 20 08 ,20 07 ,20 06			·					
3	Excess distributions carryover, if any, to 2010			·					
	From 2005								
	From 2006								
	From 2007								
	From 2008								
	From 2009								
	Total of lines 3a through e								
	Qualifying distributions for 2010 fr om Part XII,								
	line 4 ▶ \$0.								
а	Applied to 2009, but not more than line 2a								
	Applied to undistributed income of prior years (Election								
	required - see page 26 of the instructions)								
_	Treated as distributions ou t of c orpus (Election								
·	required - see page 26 of the instructions)								
đ	Applied to 2010 distributable amount								
	Remaining amount distributed out of corpus	0.							
5	Excess distributions carryover applied to 2010								
	(If an amount appears in column (d), the same								
6	amount must be shown in column (a)) Enter the net total of each column as								
	indicated below:								
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.							
ь	Prior y ears' undistributed in come S ubtract								
	line 4b from line 2b								
С	Enter t he am ount of prior y ears' undistributed income for which a notice of deficiency has been								
	issued, or on which the section 4942(a) tax has								
	been previously assessed		0.						
đ	Subtract I ine 6 c from I ine 6 b T axable								
_	amount - see page 27 of the instructions		0.						
е	Undistributed in come for 2 009 Subtract lin e 4a f rom I ine 2 a T axable amount - s ee p age	;							
	27 of the instructions								
f	Undistributed in come for 2 010. Subtract lin es								
	4d an d 5 f rom I ine 1 T his am ount m ust b e								
7	distributed in 2011 Amounts t reated as di stributions ou t of c orpus								
•	to s atisfy r equirements imposed by s ection								
	170(b)(1)(F) or 4942(g)(3) (see page 27 of the	0.							
8	instructions)								
•	applied on line 5 or line 7 (see page 2 7 of the								
_	instructions)								
9	Excess distributions carryover to 2011.	0.							
4.0	Subtract lines 7 and 8 from line 6a								
	Analysis of line 9 Excess from 2006								
	Excess from 2007								
	Excess from 2008			:					
	Excess from 2009								
	Excess from 2010 0 .								

Form 990-PF (2010)

Form	n 990-PF (2010)			45-24	470819			Page 10
Pa	rt XIV Private Oper	rating Foundations	(see page 27 of the	instructions and Pai	rt VII-A, quest	ion 9)	NOT F	APPLICABLE
1 a	If the foundation has r	eceived a ruling or d	etermination I etter t ha	titis aprivate o pera	ating			
	foundation, and the rulin-	g is effective for 2010, e	nter the date of the ruling		. ▶			
b	Check box to indicate wh	ether the foundation is a	private operating found	ation described in section		4942(j)	(3) or	4942(j)(5)
2 a	Enter t he le sser o f t he a d-	Тах уеаг		Prior 3 years) Total
	justed net income from Part	(a) 2010	(b) 2009	(c) 2008	(d) 2007		,,	, rota:
	I or the minimum investment return from Part X for each							
	year listed							
b	85% of line 2a							
c	Qualifying distributions from Part							
_	XII, line 4 for each year listed							
d	Amounts included in line 2c not							
	used directly for active conduct of exempt activities							
е	Qualifying d istributions made			•				
	directly f or ac tive conduct o f							
	exempt ac tivities Subtract I ine 2d from line 2c							
3	Complete 3a , b, or c for t he							
а	alternative test relied upon "Assets" alternative test - enter							
	(1) Value of all assets							
	(2) Value of a ssets qualifying							
	under section 4942(j)(3)(B)(i)							
þ	"Endowment" a Iternative test-				·			
	enter 2 /3 of m inimum i nvest- ment return shown in Part X,							
	line 6 for each year listed							
С	"Support" alternative test - enter						·	_
	(1) Total s upport of her t han							
	gross i nvestment income (interest, d ividends, r ents,							
	payments o n secunties							
	loans (section 512(a)(5)), or royalties)							
	(2) Support f rom g eneral							-
	public and 5 or more exempt or ganizations as							
	provided i n section 4942 ()(3)(B)(iii)							
	(3) Largest am ount of s up-							_
	port from an ex empt organization							
	(4) Grass investment income.							
Pa	rt XV Supplement	ary Information (C	omplete this part	only if the founda	ation had \$5	,000	or more	in assets
	<u> </u>	during the year - se		structions.)				
1	Information Regarding			. Ab 00/ - £4b - 4-4-				£
а	List a ny m anagers of the before the close of any	the foundation who need tax vear (but only if the	ave contributed more	etnan 2% oftne tota nore than \$5,000) <i>(</i> Se	r contributions se section 507/	receive (d)(2))	ea by the	roundation
	-	tax your (out only if a	iay navo coma botto i			/\-//		
	NONE							
b	List a ny managers of					equally	ıa rge p o	rtion of the
	ownership of a partner	ship or other entity) of	which the loundation	ilias a 1076 Ul greater	miterest.			
	NONE							
2	Information Regardin	a Contribution Grant	Gift, Loan, Scholarsh	ip. etc Programs:	·			
_	<u> </u>	_			able organ izat	tions s:	nd do on	not accor t
	Check here ▶ if t unsolicited r equests f	he foundation only r	nakes c ontributions	rants etc. (seen age	28 of thein	ilons ai struction	na uo es ns)to i ni	not accept
	organizations under of	her conditions, comple	ete items 2a, b, c, and	d.			,	
_	The name, address, a				addressed			
	N/A	· · · · · · · · · · · · · · · · · · ·						
b	The form in which app	lications should be sul	bmitted and information	on and materials they	should include			
	N/A							
С	Any submission deadle	nes						
	N/A							
d	Any restri ctions or lim	ı ıtatıons o n awards,	such as by geogra	oh ical a reas, ch arital	ble fi elds, k ind	ds of in	is titution	s, or o ther
	N/A							
	**, **						-	NO. DE

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Part XV Supplementary Information (continued)	·		
3 Grants and Contributions Paid Duri	ng the Year or Appr			
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation		
Name and address (home or business)	any foundation manager	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year	or substantial contributor	1.00.		
a Falu duling the year				
				I
		ļ		
		1		•
$\hat{}$				
				ļ
		1		
		!		
Tatal	l		▶ 3a	NONE
Total		· · · · · ·		110112
b Approved for future payment				
Ñ				
,				
		[;		
Total	<u> </u>		<u> </u>	
Total	 		▶ 3b	L

	A Analysis of Income-Produ			Evaluded by	y section 512, 513, or 514	(e)
Enter gross	amounts unless otherwise indicated	(a)	ated business income (b)	(c)	(d)	Related or exempt function income
1 Program	service revenue	Business code	Amount	Exclusion code	Amount	(See page 28 of the instructions)
a						
b						
c					-	
d						
е						
f						
-	and contracts from government agencies					
	ship dues and assessments					
	on savings and temporary cash investments					
	ds and interest from securities					
	al income or (loss) from real estate					
	-financed property					
	debt-financed property					
	I income or (loss) from personal property	<u> </u>			 	
	vestment income		,			
-	loss) from sales of assets other than inventory					
	ome or (loss) from special events					
	rofit or (loss) from sales of inventory					
	venue a					<u> </u>
				<u> </u>		
e	. Add columns (b), (d), and (e)			+		
Line No. ▼	Explain below how each a ctivit accomplishment of the foundation	y for which	h in come is reported of purposes (other tha	ın c olumn (ı n by providin	e) of P art XVI-A contribi g funds for such purpose	uted im portantly to t s). (See page 29 of t
	instructions)					
					- 	
. <u></u> .						
						
		_				
						
			<u>-</u>			
						
			·	· · · · · · · · · · · · · · · · · · ·		···
						
						
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						. ,
						-
		· · · · · · · · · · · · · · · · · · ·				
	 					

Part	XVII	Information Exempt Orga		ransfers To and 1	Transactio	ns and Rel	ationships With I	Nonchari	table
11	n s ec organiz	etion 501(c) of the C zations?	ode (other than	n gage in any of the fasection 501(c)(3) orga	nizations) or i			Yes	No
				nchantable exempt organiz				1a(1)	x
								1a(2)	Х
ь	other 1	transactions							
				ganization				16(1)	X
				empt organization				1b(2)	X
				s				1b(3)	X
								1b(4)	$\frac{x}{x}$
				undraising solicitations					X
				ner assets, or paid employe					Х
				es," c omplete t he f oll					arket
		• •		cesgiven by the repo	=				
				ement, show in c olum					
(a) Line	no.	(b) Amount Involved N/A	(c) Name of ne	on charitable exempt organiza) Description of tra /A	nsfers, transactions, and shar	nng arrangeme	ents
		и/ д				/ 11			
		···							
			·						
			<u> </u>						
		-							
			- 						
		•	•	iliated with, or related			· · · · · · · · · · · · · · · · · · ·	—,	.
		, ,	•	an section 501(c)(3)) or in	section 527?	·	L	Yes	No No
<u>D IT</u>	"Yes	complete the following: (a) Name of organization		(b) Type of organi	zation	T	(c) Description of relations	hin	
		(-)		1-7, 177 1 - 10-11			(-,		
	1	A. 1.	A III III						
Sign	belle	er penalties of penalty, identify, identify, identification, identification, in the context and points.	plete Declaration of	amined this retum, I ncluding preparer (other than taxpaye	accompanying or or fiduciary) is	schedules and st based on all inform	atements, and to the best o nation of which preparer has	any knowledg	ge and e,
			TEC.	フ	16/1	1/12			
Here	Pa	ignature of officer or truster		· · · · · · · · · · · · · · · · · · ·	Date	·//-	Title		
		Print/Type preparer's		Preparer's signature	~/	Date	F	אודי	
Paid	(Price mil	20			5/30	/12 Check if	200011	007
Prepa	IFEF	Elisa Tjio				3/30	seit-employed	200911	02/
Use C		1	LOITTE TAX				Firm's EIN ▶ 86-1	065772	
USE (, iiiy	1		NANCIAL CENTER		10281	212-4	36-2000	
		l NE	W YORK, N	<u> </u>		10201		990-PF	(2040)

EXPENSE ACCT AND OTHER ALLOWANCES ATTACHMENT 1

FORM 990PF, PART VIII - LIST OF C	OF OFFICERS, DIRECTORS, AND TRUSTEES		ATTACE	ATTACHMENT 1
NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE AND OT ALLOWP
CHRISTOPHER J. STADLER 307 FREEMANS LANE FRANKLIN LAKES, NJ 07417	PRESIDENT/SECRETARY/TRUSTEE		o	
LORETTA M. STADLER 307 FREEMANS LANE FRANKLIN LAKES, NJ 07417	TREASURER	.0	·	
KENNETH D. MESKIN 721 ROUTE 202-206, SUITE 200 BRIDGEWATER, NJ 08807	TRUSTEE	0	.0	
	GRAND TOTALS	0.	0	

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FEDERAL FOOTNOTES

ATTORNEY GENERAL OF NEW JERSEY DIDN'T REQUIRE COPY OF FORM 990PF FOR YEAR 2010, AS THERE WAS NO CONTRIBUTION RECEIVED BY THE FOUNDATION FROM THE PUBLIC.