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### 990-PF

Department of the Treasury Internal Revenue Service

### **Return of Private Foundation**

or Section 4947(a)(1) Nonexempt Charitable Trust

Treated as a Private Foundation

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0052

Open to Public Inspection

Form 990-PF (2012)

PAGE

For calendar year 2012 or tax year beginning 2012, and ending Name of foundation TORPEY CHARITABLE FOUNDATION A Employer identification number 20-5620042 C/O BRIAN TORPEY Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number (see instructions) (732) 380-9797 31 DEPUTY MINISTER DRIVE City or town, state, and ZIP code If exemption application is pending, check here COLTS NECK, NJ 07722 G Check all that apply Initial return Initial return of a former public charity D 1. Foreign organizations, check here Final return Amended return 2. Foreign organizations meeting the 85% test, check here and attach Address change Name change computation . . H Check type of organization: X Section 501(c)(3) exempt private foundation E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here . I Fair market value of all assets at end J Accounting method | X Cash | F If the foundation is in a 60-month termination Other (specify) of year (from Part II, col. (c), line under section 507(b)(1)(B), check here . > 69,967. (Part I, column (d) must be on cash basis.) *16)* ▶ \$ (d) Disbursements Part | Analysis of Revenue and Expenses (The (a) Revenue and (b) Net investment (c) Adjusted net for charitable total of amounts in columns (b), (c), and (d) expenses per may not necessarily equal the amounts in income income purposes books column (a) (see instructions)) (cash basis only) 25,000 Contributions, gifts, grants, etc , received (attach schedule) . if the foundation is not required to attach Sch B ATCH 1 Interest on savings and temporary cash investments 596 596. ATCH 2 Dividends and interest from securities Gross rents . . . . . . . . . . . . Net rental income or (loss) Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2) . LIMENT Net short-term capital gain . . . Income modifications . Gross sales less returns and allowances b Less Cost of goods sold . c Gross profit or (loss) (attach schedule) . . . . Other income (attach schedule) 25,601 601. 12 Total. Add lines 1 through 11 Compensation of officers-direct 13 Other employee salaries and 14 Expenses 15 Pension plans, employee benefits 16a Legal fees (affach stringule) .8. 2013. 2,865. Accounting fees (attach schedule)ATCH Administrative Other professional fees (attach 17 18 Taxes (attach schedule) (see instructions) . . . . . 19 Depreciation (attach schedule) and depletion. 20 21 Travel, conferences, and meetings 22 Printing and publications . . . . . . . . . . . . 69. Other expenses (attach schedule) ATCH . 4 . 23 Total operating and administrative expenses. 24 2,934 Add lines 13 through 23 . . . . . . . . . . 36,075 36,075 25 Contributions, gifts, grants paid . . . . . . 39,009. 36,075 26 Total expenses and disbursements. Add lines 24 and 25 Subtract line 26 from line 12 -13,408a Excess of revenue over expenses and disbursements 601. b Net investment income (if negative, enter -0-)

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

|              | art II | Attached schedules and amounts in the Balance Sheets description column should be for end-of-year    | Beginning of year             | End o                                   | of year                                 |
|--------------|--------|--|-------------------------------|---|---|
| L            | artii  | amounts only (See instructions.)   | (a) Book Value                | (b) Book Value                          | (c) Fair Market Value                   |
|              | 1      | Cash - non-interest-bearing  |                               |   |   |
|              | 2      | Savings and temporary cash investments   | 58,779.                       | 43,921.                                 | 43,921                                  |
|              | 3      | Accounts receivable  |                               |   |   |
|              |        | Less allowance for doubtful accounts ▶   |                               |   |   |
|              | 4      | Pledges receivable   |                               | 1811 1                                  |   |
|              |        | Less allowance for doubtful accounts ▶   |                               |   | · ·                                     |
|              | 5      | Grants receivable  |                               |   |   |
|              | 6      | Receivables due from officers, directors, trustees, and other  |                               |   |   |
|              |        | disqualified persons (attach schedule) (see instructions)  |                               |   |   |
|              | 7      | Other notes and loans receivable (attach schedule)   |                               |   | - · · · · · · · · · · · · · · · · · · · |
|              | -      | Less allowance for doubtful accounts ▶   |                               |   | •                                       |
| Ø            | 8      | Inventories for sale or use  |                               | • | <del></del>                             |
| Assets       | 9      | Prepaid expenses and deferred charges  |                               | <del></del>                             | <del></del>                             |
| As           |        | Investments - U S and state government obligations (attach schedule)                                 |                               |   |   |
|              |        | Investments - corporate stock (attach schedule) ATCH 5   | 39,060.                       | 39,060.                                 | 24,596                                  |
|              |        | Investments - corporate stock (attach schedule)  |                               |   |   |
|              | 11     | Investments - land, buildings, and equipment basis Less' accumulated depreciation (attach schedule)  |                               |   |   |
|              | 12     | Investments - mortgage loans   |                               |   |   |
|              | 13     | Investments - other (attach schedule)  |                               |   |   |
|              | 14     | Land, buildings, and equipment basis   |                               |   |   |
|              |        | (attach schedule)  |                               |   |   |
|              | 15     | Other assets (describe ATCH 6 )  |                               | 1,450.                                  | 1,450                                   |
|              | 16     | Total assets (to be completed by all filers - see the  |                               |   |   |
|              |        | ınstructions Also, see page 1, item I)   | 97,839.                       | 84,431.                                 | 69,967                                  |
|              | 17     | Accounts payable and accrued expenses  |                               |   |   |
|              | 18     | Grants payable   |                               |   |   |
| S            | 19     | Deferred revenue   |                               |   |   |
| ≝            | 20     | Loans from officers, directors, trustees, and other disqualified persons                             |                               |   |   |
| Liabilities  | 21     | Mortgages and other notes payable (attach schedule)  |                               |   |   |
| <b>=</b>     | 22     | Other liabilities (describe  |                               |   |   |
|              |        |  |                               |   |   |
|              | 23     | Total liabilities (add lines 17 through 22)  | 0                             | 0                                       |   |
| es           |        | Foundations that follow SFAS 117, check here ▶ and complete lines 24 through 26 and lines 30 and 31. |                               |   |   |
| nces         | 24     | Unrestricted   |                               |   |   |
| ala          | 25     | Temporarily restricted   |                               |   |   |
| 9            | 26     | Permanently restricted   |                               |   |   |
| or Fund Bala |        | Foundations that do not follow SFAS 117,   |                               |   |   |
| ř            |        | check here and complete lines 27 through 31. $\triangleright X$                                      |                               |   |   |
| S            | 27     | Capital stock, trust principal, or current funds   |                               |   |   |
| Assets       | 28     | Paid-in or capital surplus, or land, bldg , and equipment fund                                       |                               |   |   |
| As           | 29     | Retained earnings, accumulated income, endowment, or other funds                                     | 97,839.                       | 84,431.                                 |   |
| Net          | 30     | Total net assets or fund balances (see instructions)   | 97,839.                       | 84,431.                                 | •                                       |
| _            | 31     | Total liabilities and net assets/fund balances (see  |                               |   |   |
| _            |        | instructions)  | 97,839.                       | 84,431.                                 |   |
|              |        | Analysis of Changes in Net Assets or Fund I  |                               | ····-                                   |   |
| 1            |        | I net assets or fund balances at beginning of year - Part  |                               | _                                       |   |
|              |        | of-year figure reported on prior year's return)  |                               |   | 97,839                                  |
| 2            | Ente   | r amount from Part I, line 27a   |                               | 2                                       | -13,408                                 |
| 3            | Othe   | er increases not included in line 2 (itemize) ▶  |                               | 3                                       |   |
| 4            | Add    | lines 1, 2, and 3  |                               | 4                                       | 84,431                                  |
|              |        | reases not included in line 2 (itemize) ▶  |                               | 5                                       |   |
| <u>6</u>     | Tota   | I net assets or fund balances at end of year (line 4 minus l   | ine 5) - Part II, column (b), | , line 30 6                             | 84,431                                  |

|      | _ |
|------|---|
| Page | 3 |

| Part IV Capital Gains                    | and Losses for Tax on Inv                   | estment Income   |   |   |                                  |
|--|---|--|---|---|----------------------------------|
| 7.7                                      | d describe the kind(s) of property sold (   | · -  | (b) How<br>acquired<br>P - Purchase<br>D - Donation | (c) Date<br>acquired<br>(mo , day, yr ) | (d) Date sold<br>(mo , day, yr ) |
| 1a                                       |   |  | ļ   |   |                                  |
| <u>b</u>                                 |   |  |   |   |                                  |
| С  |   |  | <del> </del>  |   |                                  |
| <u>d</u>                                 |   |  | ļ   |   |                                  |
| <u>e</u>                                 |   |  | <u> </u>  | L                                       | <u> </u>                         |
| (e) Gross sales pnce                     | (f) Depreciation allowed (or allowable)     | (g) Cost or other basis<br>plus expense of sale                        |   | (h) Gain or (lo<br>(e) plus (f) mini    |                                  |
| _a                                       |   |  | <u> </u>  | <u></u> .                               |                                  |
| _b                                       |   |  | <del> </del>  |   |                                  |
| <u>c</u>                                 |   |  | <u> </u>  |   |                                  |
| <u>d</u>                                 |   |  | <del> </del>  |   |                                  |
| e Consolitate anhyter apparts            |   | d by the foundation on 12/24/60  | 1   |   |                                  |
| Complete only for assets                 | showing gain in column (h) and owne         |  |   | Gains (Col (h) g<br>(k), but not less t |                                  |
| (i) F M V as of 12/31/69                 | (j) Adjusted basis<br>as of 12/31/69        | (k) Excess of col (i)<br>over col (j), if any                          | 001   | Losses (from co                         |                                  |
| <u>a</u>                                 |   |  |   |   |                                  |
| <u>b</u>                                 |   |  | ļ   | · · · · · · · · · · · · · · · · · · ·   |                                  |
| _ <b>C</b>                               |   |  |   |   |                                  |
| <u>d</u>                                 |   |  | <u> </u>  |   | <del></del>                      |
| <u>e</u>                                 | - 16  |  |   |   |                                  |
| 2 Capital gain net income or             |   | gain, also enter in Part I, line 7 (loss), enter -0- in Part I, line 7 | 2   |   |                                  |
| 3 Net short-term capital dair            | יי ا<br>or (loss) as defined in sections 12 |  |   |   |                                  |
|  | rt I, line 8, column (c) (see inst          |  |   |   |                                  |
| _  |   |  | 3   |   |                                  |
|  |   | duced Tax on Net Investment I  | _   |   |                                  |
|  |   | e section 4940(a) tax on net invest                                    |   | me )                                    |                                  |
| (. c. cp                                 | - p,  |  |   | ,                                       |                                  |
| If section 4940(d)(2) applies,           | leave this part blank                       |  |   |   |                                  |
| 300tion 10 10(0)(2) applico,             | iouro uno pari siarii.                      |  |   |   |                                  |
| Was the foundation liable for            | the section 4942 tax on the distrib         | outable amount of any year in the b                                    | ase peno  | d?                                      | Yes X No                         |
| If "Yes," the foundation does            | not qualify under section 4940(e).          | Do not complete this part.   |   | <u> </u>                                |                                  |
| 1 Enter the appropriate am               | ount in each column for each year           | ; see the instructions before making                                   | g any entri   | es.                                     |                                  |
| (a)<br>Base penod years                  | (b)   | (c)  |   | (d)<br>Distribution ra                  | atio                             |
| Calendar year (or tax year beginning in) | Adjusted qualifying distributions           | Net value of nonchantable-use assets                                   |   | (col (b) divided by                     | col (c))                         |
| 2011                                     | 36,390.                                     | 71,576.  |   |   | 0.508411                         |
| 2010                                     | 72,219.                                     | 65,425.  |   |   | 1.103844                         |
| 2009                                     | 35,014.                                     | 43,364.  |   |   | 0.807444                         |
| 2008                                     | 53,407.                                     | 31,103.  |   |   | 1.717101                         |
| 2007                                     | 27,123.                                     | 17,596.  |   |   | 1.541430                         |
|  |   |  |   |   |                                  |
| 2 Total of line 1, column (d)            |   |  | 2   |   | 5.678230                         |
| _  | for the 5-year base period - divide         |  |   |   | 1 125646                         |
| number of years the foun                 | dation has been in existence if less        | s than 5 years   | 3   |   | 1.135646                         |
|  |   | - · · · · -  | .   |   | 70 007                           |
| 4 Enter the net value of nor             | ncharitable-use assets for 2012 fro         | om Part X, line 5  | 4   |   | 72,237.                          |
|  |   |  | _   |   | 00 026                           |
| 5 Multiply line 4 by line 3              |   |  | 5   |   | 82,036.                          |
|  |   |  |   |   | c                                |
| 6 Enter 1% of net investme               | nt income (1% of Part I, line 27b)          |  | 6   |   | 6.                               |
|  |   |  | _   |   | 92 042                           |
| 7 Add lines 5 and 6                      |   |  | 7   |   | 82,042.                          |
| O Fator coaldona data                    | on from Dort VII. Co. 4                     |  |   |   | 36,075.                          |
| 8 Enter qualifying distribution          |   |  | 8   | using a 1% to                           |                                  |
| Part VI instructions.                    | eater than line 1, theth the box i          | in Fait VI, line TD, allu complete                                     | mai part  | using a 1/0 tax                         | crate see the                    |
| JSA                                      | ·   |  |   | Form                                    | 990-PF (2012)                    |

| Par | t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see in  | <u>ıstru</u> | ctions         | s)       |
|-----|--|--------------|----------------|----------|
| 1 a | Exempt operating foundations described in section 4940(d)(2), check here  and enter "N/A" on line 1  |              |                |          |
|     | Date of ruling or determination letter (attach copy of letter if necessary - see instructions)   |              |                |          |
| b   | Domestic foundations that meet the section 4940(e) requirements in Part V, check   |              |                | 12       |
|     | here ▶ and enter 1% of Part I, line 27b  |              |                |          |
| С   | All other domestic foundations enter 2% of line 27b. Exempt foreign 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  |              |                | 12       |
| 4   | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 4  |              |                | <u> </u> |
| 5   | Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0  |              |                | 12.      |
| 6   | Credits/Payments.  |              |                |          |
| а   | 2012 estimated tax payments and 2011 overpayment credited to 2012 6a   |              |                |          |
| b   | Exempt foreign organizations - tax withheld at source  |              |                |          |
| c   | Tax paid with application for extension of time to file (Form 8868) 6c 12.   |              |                |          |
| d   | Backup withholding erroneously withheld  |              |                |          |
| 7   | Total credits and payments Add lines 6a through 6d   |              |                | 12.      |
| 8   | Enter any penalty for underpayment of estimated tax. Check here If Form 2220 is attached 8   |              |                |          |
| 9   | Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed  |              |                |          |
| 10  | Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid  |              |                |          |
| 11  | Enter the amount of line 10 to be Credited to 2013 estimated tax ▶ Refunded ▶ 11   |              |                |          |
|     | t VII-A Statements Regarding Activities  |              |                | 1        |
| 1a  | During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate   | <u> </u>     | Yes            | No       |
|     | or intervene in any political campaign?  | 1a           |                | X        |
| b   | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the  |              |                | l .      |
|     | definition)?   | 1b           |                | X        |
|     | If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or   | İ '          |                |          |
|     | distributed by the foundation in connection with the activities  |              |                | X        |
|     | Did the foundation file Form 1120-POL for this year?   | 1c           | <del> </del> - | ^        |
| d   | Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year  |              |                | İ        |
|     | (1) On the foundation > \$ (2) On foundation managers > \$   |              |                |          |
| е   | Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on   |              |                |          |
| _   | foundation managers > \$   |              |                | - x      |
| 2   | Has the foundation engaged in any activities that have not previously been reported to the IRS?  | 2            |                | +        |
| _   | If "Yes," attach a detailed description of the activities  |              | ĺ              |          |
| 3   | Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes | 3            |                | X        |
| 4-  |  | 4a           |                | X        |
|     | Did the foundation have unrelated business gross income of \$1,000 or more during the year?  | 4b           | ·              | X        |
|     | If "Yes," has it filed a tax return on Form 990-T for this year?  Was there a liquidation, termination, dissolution, or substantial contraction during the year?   | 5            |                | Х        |
| 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   |              |                | ļ        |
| Ü   | By language in the governing instrument, or  |              |                | İ        |
|     | By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict  |              |                | 1        |
|     | 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? If "Yes," complete Part II, col (c), and Part XV   | 7            | X              |          |
| 8a  | Enter the states to which the foundation reports or with which it is registered (see instructions)   |              |                |          |
|     | NJ,  |              |                | 1        |
| b   | If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)  |              |                |          |
|     | of each state as required by General Instruction G? If "No," attach explanation  | 8b           |                | Х        |
| 9   | Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or  |              |                |          |
|     | 4942(j)(5) for calendar year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If "Yes," complete  |              |                |          |
|     | Part XIV   | 9            | <u> </u>       | Х        |
| 10  | Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and   |              |                |          |
|     | addresses  | 10           | Х              |          |
|     |  |              | ON-DE          |          |

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| Par | t VII-A Statements Regarding Activities (continued)   |        |     |            |
|-----|---|--------|-----|------------|
| 11  | At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the   |        |     |            |
|     | meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions  | 11     |     | X          |
| 12  | Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified  |        |     |            |
|     | person had advisory privileges? If "Yes," attach statement (see instructions)   | 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   | استندا |     |            |
| 14  | The books are in care of ▶ BRIAN AND KAREN TORPEY Telephone no ▶ 732-380  | -979   | 7 · |            |
| • • | The books are in care of ▶ BRIAN AND KAREN TORPEY  Located at ▶31 DEPUTY MINISTER DRIVE COLTS NECK, NJ  Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here |        |     |            |
| 15  | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here   |        |     | П          |
|     | and enter the amount of tax-exempt interest received or accrued during the year   |        |     | ш          |
| 16  | At any time during calendar year 2012, did the foundation have an interest in or a signature or other authority   |        | Yes | No         |
|     | over a bank, secunities, or other financial account in a foreign country?   | 16     |     | X          |
|     | See the instructions for exceptions and filing requirements for Form TD F 90-22 1 If "Yes," enter the name of   | 10     |     | -          |
|     | the foreign country   |        |     |            |
| Par | t VII-B Statements Regarding Activities for Which Form 4720 May Be Required   |        |     |            |
| 🗸 I | File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.   | Ī      | Yes | No         |
| 4.  | During the year did the foundation (either directly or indirectly)  |        | 103 | 110        |
| Та  | (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   |        |     |            |
|     |   | 1      | l   |            |
|     | disquarries person  | 1      |     |            |
|     | (b) Furnish goods, Scribbs, or radinates to (or decept them notify a disqualities posses).  |        | ļ   |            |
|     | (1, 1 a) compensation to a pay or reminested and expenses and expenses process.   |        | ŀ   |            |
|     | (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)?   |        | l   |            |
|     |   |        |     |            |
|     | (6) Agree to pay money or property to a government official? (Exception. Check "No" if the  |        | l   |            |
|     | foundation agreed to make a grant to or to employ the official for a period after   |        | 1   |            |
|     | termination of government service, in terminating within our days /   |        | 1   |            |
| D   | 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 instructions)?   | 1b     |     |            |
|     | Organizations relying on a current notice regarding disaster assistance check here  |        | i   | i          |
| С   | Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that  |        | 1   | X          |
| _   | were not corrected before the first day of the tax year beginning in 2012?  | 1c     |     |            |
| 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))   |        | ļ   | ,          |
| а   | At the end of tax year 2012, did the foundation have any undistributed income (lines 6d and   |        |     | 1          |
|     | 6e, Part XIII) for tax year(s) beginning before 2012? Yes X No  |        |     |            |
|     | If "Yes," list the years  |        |     | į          |
| b   | Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)  |        |     |            |
|     | (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to  | -      |     | v          |
|     | all years listed, answer "No" and attach statement - see instructions )   | _2b    | -+  | <u>X</u> _ |
| 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   | of "Yes," did it have excess business holdings in 2012 as a result of (1) any purchase by the foundation or   |        |     | ,          |
|     | disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the   | .      |     |            |
|     | Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of  |        |     |            |
|     | the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the  |        | -   | -          |
|     | foundation had excess business holdings in 2012)  | 3ь     |     |            |
|     | Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?   | 4a     |     | X          |
| b   | Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its  |        |     | ٠          |
|     | charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2012?  | 4b     |     | <u> X</u>  |

| Pai      | t VII-B Statements Regarding Activities for   | or Which Form 4   | 720 May Be Requ                                 | ired (continued)   |                          |                       |
|----------|---|---|---|--|--------------------------|-----------------------|
| 5a       | During the year did the foundation pay or incur any amou  | int to  |   |  |                          |                       |
|          | (1) Carry on propaganda, or otherwise attempt to influe   | nce legislation (section  | 1 4945(e))?                                     | Yes X No   | ,                        |                       |
|          | (2) Influence the outcome of any specific public ele  | ction (see section  | 4955), or to carry or                           | 1,   |                          |                       |
|          | directly or indirectly, any voter registration drive?   |   |   | . Yes X No   | ,                        |                       |
|          | (3) Provide a grant to an individual for travel, study, or ot                                   | her sımılar purposes?   |   | Yes X No   | ,                        |                       |
|          | (4) Provide a grant to an organization other than a   | charitable, etc., org   | janization described i                          | n  |                          |                       |
|          | section 509(a)(1), (2), or (3), or section 4940(d)(2)? (  | see instructions)   |   | Yes X No   | ,                        |                       |
|          | (5) Provide for any purpose other than religious, ch  | aritable, scientific,   | literary, or educationa                         | al   |                          |                       |
|          | purposes, or for the prevention of cruelty to children of                                       |   |   |  | ,                        |                       |
| ь        | If any answer is "Yes" to 5a(1)-(5), did any of the   |   |   |  | n                        | 1                     |
| -        | Regulations section 53 4945 or in a current notice regard                                       |   |   |  | 5b                       |                       |
|          | Organizations relying on a current notice regarding disas                                       | <del>-</del>  |   |  |                          |                       |
| _        | If the answer is "Yes" to question 5a(4), does the  |   |   |  |                          |                       |
| ٠        | because it maintained expenditure responsibility for the g                                      |   |   |  | ,                        |                       |
|          | If "Yes," attach the statement required by Regulations sec                                      |   |   |  |                          |                       |
| 6-       | Did the foundation, during the year, receive any fund   |   | etly to nay promium                             | e  |                          |                       |
| ба       | , , , ,   | •   | • • • •   | Yes X No   | .                        |                       |
|          | on a personal benefit contract?   |   |   |  |                          | -x                    |
| b        |   | city or indirectly, on a  | personal benefil contrac                        | ж  | 6b                       | <del></del>           |
| _        | If "Yes" to 6b, file Form 8870  |   |   | Yes X No   |                          |                       |
|          | At any time during the tax year, was the foundation a pa  |   |   | . — —  |                          | X                     |
|          | If "Yes," did the foundation receive any proceeds or have Information About Officers, Directors |   |   |  | 7b                       | ^                     |
| ۲a       | information About Officers, Directors and Contractors   | , musices, roun   | dation managers,                                | mgmy raid Empr   | oyees,                   |                       |
| 1        | List all officers, directors, trustees, foundation r  |   |   |  |                          |                       |
|          | (a) Name and address  | (b) Title, and average<br>hours per week<br>devoted to position | (c) Compensation<br>(If not paid,<br>enter -0-) | (d) Contributions to<br>employee benefit plans<br>and deferred compensation    | (e) Expens<br>other all  |                       |
| <b>-</b> |   |   |   | _  |                          | _                     |
| ATO      | CH 7  |   | 0   | 0  |                          | 0                     |
|          |   |   |   |  |                          |                       |
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|          |   |   |   |  |                          |                       |
|          |   |   |   |  |                          |                       |
| 2        | Compensation of five highest-paid employees "NONE."   | (other than thos  | se included on line                             |  | ons). If no              | one, enter            |
| (a       | Name and address of each employee paid more than \$50,000                                       | (b) Title, and average<br>hours per week<br>devoted to position | (c) Compensation                                | (d) Contributions to<br>employee benefit<br>plans and deferred<br>compensation | (e) Expens<br>other allo | e account,<br>owances |
|          |   |   |   |  |                          |                       |
|          | NONE  |   |   |  |                          |                       |
|          |   |   |   |  |                          |                       |
|          |   | 1   |   |  |                          |                       |
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|          |   | ·   |   | <u> </u>   |                          |                       |
| Tota     | il number of other employees paid over \$50,000 .   |   |   | ▶  |                          |                       |

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Form 990-PF (2012) Page 7 Part Vill Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued) Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE." (a) Name and address of each person paid more than \$50,000 (b) Type of service (c) Compensation NONE Total number of others receiving over \$50,000 for professional services . . . . . . . . . . . . . .  $\triangleright$ Part IX-A **Summary of Direct Charitable Activities** List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of Expenses organizations and other beneficianes served, conferences convened, research papers produced, etc Summary of Program-Related Investments (see instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. Amount 1 NONE All other program-related investments. See instructions 3 NONE

Form **990-PF** (2012)

Total. Add lines 1 through 3.

Page 8

| Pa  | Minimum Investment Return (All domestic foundations must complete this part. Foreign see instructions.)   | gn foundatio   | ns,              |
|-----|---|----------------|------------------|
| 1   | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,   |                |                  |
|     | purposes:   |                |                  |
| а   | Average monthly fair market value of securities   | 1a             | 21,987.          |
| b   | Average of monthly cash balances  | 1b             | 51,350.          |
| С   | Fair market value of all other assets (see instructions)  | 1c             |                  |
| d   | Total (add lines 1a, b, and c)  | 1d             | 73,337.          |
| е   | Total (add lines 1a, b, and c)  Reduction claimed for blockage or other factors reported on lines 1a and  |                |                  |
|     | 1c (attach detailed explanation)1e  |                |                  |
| 2   | Acquisition indebtedness applicable to line 1 assets  | 2              |                  |
| 3   |   | 3              | 73,337.          |
| 4   | Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see   |                |                  |
|     |   | 4              | 1,100.           |
| 5   | Instructions)  Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4   | 5              | 72,237.          |
| 6   | Minimum investment return. Enter 5% of line 5   | 6              | 3,612.           |
| Pa  | Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here and do not complete this process. | part )         |                  |
| 1   | Minimum investment return from Part X, line 6   | 1              | 3,612.           |
| 2 a | Tax on investment income for 2012 from Part VI, line 5 2a 12.   |                | 1                |
| b   | Income tax for 2012 (This does not include the tax from Part VI.) 2b  | 1              |                  |
| С   | Add lines 2a and 2b   | 2c             | 12.              |
| 3   | Distributable amount before adjustments. Subtract line 2c from line 1   | 3              | 3,600.           |
| 4   | Recoveries of amounts treated as qualifying distributions   | 4              |                  |
| 5   | Add lines 3 and 4   | 5              | 3,600.           |
| 6   | Deduction from distributable amount (see instructions)  | 6              |                  |
| 7   | Distributable amount as adjusted. Subtract line 6 from line 5 Enter here and on Part XIII,  |                |                  |
|     | line 1  | 7              | 3,600.           |
| Pa  | art XII Qualifying Distributions (see instructions)   |                |                  |
| 1   | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes   |                | 26.075           |
| а   | Expenses, contributions, gifts, etc - total from Part I, column (d), line 26  | 1a             | 36,075.          |
| b   | Program-related investments - total from Part IX-B  Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,                                | 1b             |                  |
| 2   | nurnen oo   | 2              |                  |
| 3   | Amounts set aside for specific charitable projects that satisfy the   | -              |                  |
| a   |   | 3a             |                  |
| b   | Suitability test (prior IRS approval required)  Cash distribution test (attach the required schedule)   | 3b             | <del></del>      |
| 4   | Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4   | 4              | 36,075.          |
| 5   | Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income   | -              | 30,0,0,          |
| ,   | Enter 1% of Part I, line 27b (see instructions)   | 5              | n                |
| 6   | Adjusted qualifying distributions. Subtract line 5 from line 4  | 6              | 36,075.          |
| U   | Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when call  |                |                  |
|     | qualifies for the section 4940(e) reduction of tax in those years.  | culating write | mer me roundadon |

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Part XIII Undistributed Income (see instructions) (a) (b) (c) Years prior to 2011 Corpus 2011 2012 Distributable amount for 2012 from Part XI, 3,600. Undistributed income, if any, as of the end of 2012: Enter amount for 2011 only . . Total for pnor years 20 10 ,20 09 ,20 08 Excess distributions carryover, if any, to 2012 26,247 From 2007 . . . . . . 51,884. From 2008 . . . . . . 32,870. From 2009 . . . . . . 68,996. From 2010 . . . . . . 32,820. From 2011 . . . . . . 212,817. Total of lines 3a through e . . . . . . . . . . . Qualifying distributions for 2012 from Part XII. 36,075. line 4 ▶ \$ a Applied to 2011, but not more than line 2a . . . b Applied to undistributed income of prior years (Election required - see instructions). . . . . . Treated as distributions out of corpus (Election 3,600. d Applied to 2012 distributable amount ..... 32,475 Remaining amount distributed out of corpus . . Excess distributions carryover applied to 2012 (If an amount appears in column (d), the same amount must be shown in column (a) ) Enter the net total of each column as indicated below: 245,292 Corpus Add lines 3f, 4c, and 4e. Subtract line 5 Prior years' undistributed income Subtract line 4b from line 2b Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed . . . . . . . . . . . . . d Subtract line 6c from line 6b. Taxable amount - see instructions . . Undistributed income for 2011 Subtract line 4a from line 2a Taxable amount - see f Undistributed income for 2012 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2013 . . . . . . . . . . . . . . . . Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions) Excess distributions carryover from 2007 not applied on line 5 or line 7 (see instructions) 26,247. Excess distributions carryover to 2013. 219,045 Subtract lines 7 and 8 from line 6a . . . . . . . Analysis of line 9. 51,884. Excess from 2008 . . . 32,870. Excess from 2009 . . . 68,996 Excess from 2010 . . . 32,820. Excess from 2011 . . . 32,475. Excess from 2012 . .

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Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other

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factors

NONE

|    | 990-PF (2012),                                |  |             | ···.                             | Page 11                               |
|----|---|--|-------------|----------------------------------|---------------------------------------|
| Pa | t XV Supplementary Information                | (continued)  |             | <u> </u>                         |                                       |
| 3_ | Grants and Contributions Paid Dur             | Ing the Year or Appl                               | roved for F | -uture Payment                   | · · · · · · · · · · · · · · · · · · · |
|    | Recipient Name and address (home or business) | show any relationship to<br>any foundation manager | status of   | Purpose of grant or contribution | Amount                                |
| a  | Paid during the year                          | or substantial contributor                         | recipient   |                                  |                                       |
| ŭ  | , are defining the year                       |  |             |                                  |                                       |
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|    |   |  | <u></u>     |                                  |                                       |
|    | Total   | <u> </u>   | <u>,</u>    | <u>▶</u> 3a                      | 36,075                                |
| b  | Approved for future payment                   |  |             |                                  |                                       |
|    |   |  |             |                                  |                                       |
|    |   |  |             |                                  |                                       |
|    |   |  |             |                                  |                                       |
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|    |   |  |             |                                  |                                       |
|    | Total   | <u></u>  |             | ▶ 3b                             | L                                     |

| er gross am  | nounts unless otherwise indicated      | Unrelate              | ed business income | Excluded by           | section 512, 513, or 514       | (e)<br>Related or exemp              |
|--|--|-----------------------|--------------------|-----------------------|--------------------------------|--------------------------------------|
| Program se   | ervice revenue                         | (a)<br>Business code  | (b)<br>Amount      | (c)<br>Exclusion code | (d)<br>Amount                  | function income<br>(See instructions |
| а  |  |                       |                    | <del></del>           |                                |                                      |
|  |  |                       |                    | _                     |                                |                                      |
|  |  | - <del></del>         |                    |                       |                                |                                      |
|  |  |                       |                    |                       |                                | <del></del>                          |
| e<br>f   |  |                       | ***                |                       |                                |                                      |
|  | d contracts from government agencies   | -                     |                    |                       |                                |                                      |
| -  | ip dues and assessments                |                       |                    |                       |                                |                                      |
| nterest on s   | savings and temporary cash investments |                       |                    | 14                    | 5.                             | <u> </u>                             |
|  | and interest from securities           |                       |                    | 14                    | 596.                           |                                      |
|  | income or (loss) from real estate      |                       | . <u></u>          |                       |                                |                                      |
|  | nanced property                        |                       |                    |                       |                                | <del> </del>                         |
|  | ot-financed property                   |                       |                    | <del></del>           | · -                            |                                      |
|  | come or (loss) from personal property  |                       | <u></u>            |                       |                                |                                      |
|  | stment income                          |                       |                    |                       |                                |                                      |
| ,  | e or (loss) from special events        |                       |                    |                       |                                | <del></del>                          |
|  | it or (loss) from sales of inventory   |                       |                    |                       |                                |                                      |
| •  | nue a                                  |                       |                    |                       |                                | 44                                   |
|  |  |                       |                    |                       |                                |                                      |
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| l  |  |                       |                    |                       |                                |                                      |
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| Subtotal A<br>Fotal. Add I<br>workshee                     | add columns (b), (d), and (e)          | ulations ) to the Acc | omplishment of E   | xempt Purp            | oses                           |                                      |
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| Subtotal A<br>Fotal. Add I<br>e workshee<br>rt XVI-B       | Ind columns (b), (d), and (e)          | ulations ) to the Acc | omplishment of E   | xempt Purp            | oses e) of Part XVI-A contribu | ited importantly to                  |
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| Form         | 990-PF (2   | 2012)  | TORPEY C  | HARITABLE F  | OUNDATION  |   | 20-562   | 0042 г   | Page 13               |
|--------------|---|--|---|--|--|---|--|--|-----------------------|
|              | t XVII  | Information R  | egarding Tra  |  |  | ons and Relations   |  |  |                       |
|              | in sectorganic<br>Transfe<br>(1) Cas<br>(2) Oth<br>Other to<br>(1) Sai<br>(2) Put<br>(3) Re<br>(4) Re | Exempt Organ e organization direct tion 501(c) of the Co zations? ers from the reportin sh her assets transactions. les of assets to a no rchases of assets fro ntal of facilities, equi imbursement arrange   | nizations  ly or indirectly ode (other than a foundation to                 | engage in any of section 501(c)(3) a noncharitable  mpt organization ble exempt organ assets   | f the following ) organization exempt organ                        | with any other organs) or in section 527, r                           | nization described elating to political                              | 1a(1) 1a(2) 1b(1) 1b(2) 1b(3) 1b(4) 1b(5)            |                       |
| c<br>d       | (6) Per<br>Sharing<br>If the value of   | rformance of service<br>g of facilities, equipn<br>answer to any of th<br>of the goods, other  | es or membersh<br>nent, mailing list<br>ne above is "Ye<br>assets, or servi | ip or fundraising :<br>ts, other assets, c<br>s," complete the<br>ces given by the   | solicitations .<br>or paid employ<br>following sc<br>reporting fou | ees   | hould always show  | 1b(6)<br>1c<br>the fair r                            | market                |
| (a) L        | ne no   | (b) Amount involved  | 1   | oncharitable exempt of   |  | (d) Description of transfe  | <del></del>  |  |                       |
|              | describ   | ed in section 501(c)   | of the Code (ot   |  |  | N/A  or more tax-exempt in section 527?                               | organizations [  | Yes X  |                       |
| D            | it Yes  | complete the follow<br>(a) Name of organization  |   | (b) Type o   | of organization  |   | e) Description of relations  | <b></b>  | <del></del>           |
| Sigr<br>Here | Sign  | perallies of perjury, I declaration of the declarat | re hat I have examing reparer (other than ta                                | ped this return, including expayer) is based on all information of the preparer's significant of | g accompanying softermation of which p                             | edules and statements, and to reparer has any knowledge  Tritle  Date | the best of my knowledge  May the IRS with the pre (see instructions | e and belief, it discuss this eparer shown s)? X Yes | return<br>below<br>No |
| Use          | Only  | Firm's address > 33  |   |  | TE 125   |   | I HITS LIN P 22 20   |  |                       |
|              |   | · ·  | D BANK, N   |  |  | 07701-6765  | Phone no 732-84  | 12-3113  |                       |

Schedule B (Form 990, 990-EZ, or 990-PF)
Department of the Treasury
Internal Revenue Service

### **Schedule of Contributors**

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

OMB No 1545-0047

2012

| Name of the organization  |  |   | Employer identification number   |
|---|--|---|--|
| TORPEY CHARITABLE 1 C/O BRIAN TORPEY                                  | FOUNDATION   |   | 20-5620042   |
| Organization type (check or   | ne):   |   | 20-3620042   |
|   |  |   |  |
| Filers of:  | Section:   |   |  |
| Form 990 or 990-EZ  | 501(c)( ) (enter number) organization  |   |  |
|   | 4947(a)(1) nonexempt charitable trust not treated  | as a private fou  | indation   |
|   | 527 political organization   |   |  |
| Form 990-PF   | X 501(c)(3) exempt private foundation  |   |  |
|   | 4947(a)(1) nonexempt charitable trust treated as a   | a private foundat   | tion   |
|   | 501(c)(3) taxable private foundation   |   |  |
| Note. Only a section 501(c)(<br>instructions.<br>General Rule         | 7), (8), or (10) organization can check boxes for both the Gen   | eral Rule and a S   | Special Rule See   |
| X For an organizatio  | n filing Form 990, 990-EZ, or 990-PF that received, during the one contributor. Complete Parts I and II.   | ne year, \$5,000 d  | or more (in money or   |
| Special Rules   |  |   |  |
| under sections 509  | c)(3) organization filing Form 990 or 990-EZ that met the 33 9(a)(1) and 170(b)(1)(A)(vi) and received from any one contri<br>65,000 or <b>(2)</b> 2% of the amount on (i) Form 990, Part VIII, line and II  | butor, during the   | e year, a contribution of  |
| during the year, to   | c)(7), (8), or (10) organization filing Form 990 or 990-EZ that tal contributions of more than \$1,000 for use <i>exclusively</i> for reposes, or the prevention of cruelty to children or animals. Con  | eligious, charita   | ble, scientific, literary,   |
| during the year, co<br>not total to more the<br>year for an exclusive | c)(7), (8), or (10) organization filing Form 990 or 990-EZ that ontributions for use exclusively for religious, charitable, etc., purpose that some states of the total contributely religious, charitable, etc., purpose. Do not complete any canization because it received nonexclusively religious, charitals are  | urposes, but the<br>outions that were<br>of the parts unles<br>ble, etc., contrib | ese contributions did<br>be received during the<br>sisthe <b>General Rule</b><br>outions of \$5,000 or |
| 990-EZ, or 990-PF), but it mi   | t is not covered by the General Rule and/or the Special Rules ust answer "No" on Part IV, line 2 of its Form 990, or check the PF, to certify that it does not meet the filing requirements of the second sec | he box on line H  | of its Form 990-EZ or on   |
| For Paperwork Reduction Act Noti                                      | ce, see the Instructions for Form 990, 990-EZ, or 990-PF.  | Schedule I  | 3 (Form 990, 990-EZ, or 990-PF) (2012)   |

Name of organization TORPEY CHARITABLE FOUNDATION C/O BRIAN TORPEY

Employer identification number 20-5620042

| Part I | Contributors (see instructions). U | se duplicate copies of Part | I if additional space is needed. |
|--------|------------------------------------|-----------------------------|----------------------------------|
|--------|------------------------------------|-----------------------------|----------------------------------|

| (a)        | (b) Name, address, and ZIP + 4   | (c) Total contributions    | (d)<br>Type of contribution  |
|------------|--|----------------------------|--|
| 1_         | BRIAN AND KAREN TORPEY  31 DEPUTY MINISTER DRIVE  COLTS NECK, NJ 07722 | \$25,000.                  | Person X Payroll Noncash (Complete Part II if there is a noncash contribution) |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4                                      | (c) Total contributions    | (d) Type of contribution   |
|            |  | \$                         | Person Payroll Noncash (Complete Part II if there is a noncash contribution.)  |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4                                      | (c)<br>Total contributions | (d)<br>Type of contribution  |
|            |  | \$                         | Person Payroll Noncash (Complete Part II if there is a noncash contribution.)  |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4                                      | (c)<br>Total contributions | (d)<br>Type of contribution  |
|            |  | \$                         | Person Payroll Noncash (Complete Part II if there is a noncash contribution.)  |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4                                      | (c)<br>Total contributions | (d)<br>Type of contribution  |
|            |  | \$                         | Person Payroll Noncash (Complete Part II if there is a noncash contribution.)  |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4                                      | (c)<br>Total contributions | (d)<br>Type of contribution  |
|            |  | \$                         | Person Payroll Noncash  (Complete Part II if there is a noncash contribution)  |

Name of organization TORPEY CHARITABLE FOUNDATION
C/O BRIAN TORPEY

Employer identification number 20~5620042

|                           | C/O BRIAN TORILLI  |  | 20-3020042           |
|---------------------------|--|--|----------------------|
| Part II                   | Noncash Property (see instructions). Use duplicate copies of F | Part II if additional space is ne              | eded.                |
| (a) No.<br>from<br>Part I | (b)<br>Description of noncash property given                   | (c) FMV (or estimate) (see instructions)       | (d)<br>Date received |
|                           |  | \$   |                      |
| (a) No.<br>from<br>Part I | (b)  Description of noncash property given                     | (c) FMV (or estimate) (see instructions)       | (d)<br>Date received |
|                           |  | \$   |                      |
| (a) No.<br>from<br>Part I | (b) Description of noncash property given                      | (c) FMV (or estimate) (see instructions)       | (d)<br>Date received |
|                           |  | \$   |                      |
| (a) 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) 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) No.<br>from<br>Part I | (b)  Description of noncash property given                     | (c) FMV (or estimate) (see instructions)       | (d)<br>Date received |
|                           |  | 1  |                      |

Name of organization TORPEY CHARITABLE FOUNDATION
C/O BRIAN TORPEY

Employer identification number 20-5620042

| Part III | Exclusively religious, charitable | , etc., individual o | contributions to section | 501(c)(7), (8), | or (10) organizations |
|----------|-----------------------------------|----------------------|--------------------------|-----------------|-----------------------|
|          | that total more than \$1,000 for  | the year. Comple     | ete columns (a) through  | (e) and the fol | lowing 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.) > \$

|                           | Jse duplicate copies of Part III if addition | onal space is needed. |         |                                      |
|---------------------------|--|-----------------------|---------|--------------------------------------|
| (a) No.<br>from<br>Part I | (b) Purpose of gift                          | (c) Use of            | gift    | (d) Description of how gift is held  |
|                           |  |                       |         |                                      |
|                           |  |                       |         | ~                                    |
|                           |  | (e) Transfer          | of gift | <u> </u>                             |
|                           | Transferee's name, address, ar               | nd ZIP + 4            | Relatio | nship of transferor to transferee    |
|                           |  |                       |         |                                      |
|                           |  |                       |         |                                      |
| (a) No.<br>from<br>Part I | (b) Purpose of gift                          | (c) Use of            | gıft    | (d) Description of how gift is held  |
|                           |  |                       |         |                                      |
|                           |  |                       |         |                                      |
|                           | ,  | (e) Transfer          | of gift |                                      |
|                           | Transferee's name, address, ar               | nd ZIP + 4            | Relatio | nship of transferor to transferee    |
|                           |  |                       |         |                                      |
|                           |  |                       |         |                                      |
|                           |  |                       |         |                                      |
| (a) No.<br>from<br>Part I | (b) Purpose of gift                          | (c) Use of            | gift    | (d) Description of how gift is held  |
|                           |  |                       |         |                                      |
|                           |  |                       |         |                                      |
|                           |  | (e) Transfer          | of gift | <u> </u>                             |
|                           | Transferee's name, address, ar               | nd ZIP + 4            | Relatio | nship of transferor to transferee    |
|                           |  |                       |         |                                      |
|                           |  |                       |         |                                      |
| (a) No.<br>from           | (1) 0  | (a) Na a af           |         | /d\ Dagasinting of hour sift is hold |
| Part I                    | (b) Purpose of gift                          | (c) Use of            | gm      | (d) Description of how gift is held  |
|                           |  |                       |         |                                      |
|                           |  |                       |         |                                      |
|                           |  | (e) Transfer          | of gift |                                      |
|                           | Transferee's name, address, ar               | nd ZIP + 4            | Relatio | nship of transferor to transferee    |
|                           |  |                       |         |                                      |
|                           |  |                       |         |                                      |
|                           | <u> </u>                                     |                       |         |                                      |

FORM 990PF, PART I - OTHER EXPENSES

DESCRIPTION

REVENUE

AND EXPENSES

PER BOOKS

60. 9.

TOTALS 69.

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# FORM 990PF, PART I - INTEREST ON TEMPORARY CASH INVESTMENTS

| NET<br>INVESTMENT<br>INCOME             | 5.            | 5.    |
|---|---------------|-------|
| REVENUE<br>AND<br>EXPENSES<br>PER BOOKS | 5.            | 5.    |
|   |               | TOTAL |
| DESCRIPTION                             | TD AMERITRADE |       |

ATTACHMENT 1 PAGE 18

ATTACHMENT 2 PAGE 19

### PART I - DIVIDENDS AND INTEREST FROM SECURITIES FORM 990PF,

| REVENUE NET AND EXPENSES INVESTMENT PER BOOKS INCOME | .596. 596.    | 596.  |
|--|---------------|-------|
| REV A EXPE   |               | TOTAL |
| DESCRIPTION  | TD AMERITRADE |       |

ATTACHMENT 3 PAGE 20

|                          | ADJUSTED<br>NET<br>INCOME               |                     |        |
|--------------------------|---|---------------------|--------|
|                          | NET<br>INVESTMENT<br>INCOME             |                     |        |
|                          | REVENUE<br>AND<br>EXPENSES<br>PER BOOKS | 2,865.              | 2,865. |
| PART I - ACCOUNTING FEES |   | REPARATION          | TOTALS |
| FORM 990PF, PART I       | DESCRIPTION                             | TAX RETURN PREPARAT |        |

CHARITABLE PURPOSES 20-5620042

## FORM 990PF, PART II - CORPORATE STOCK

| DESCRIPTION  200 SH HEINZ H J CO COM 650 SH AMERICAN CAPITAL LTD 178 SH AMERICAN CAPITAL LTD 4200 SH LEGEND MEDIA INC COM 115 SH MICROSOFT CORP COM 1500 REGEN BIOLOGIES INC COM |             | LID<br>LID<br>C COM<br>OM<br>OM   |
|--|-------------|---|
|  | DESCRIPTION | 200 SH HEINZ H J CO COM<br>650 SH AMERICAN CAPITAI<br>178 SH AMERICAN CAPITAI<br>4200 SH LEGEND MEDIA IN<br>115 SH MICROSOFT CORP C |

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| ENDING<br>FMV        | 11,536.<br>7,813.<br>2,140.<br>3,072.                   | 24,596. |
|----------------------|---|---------|
| ENDING<br>BOOK VALUE | 9,010.<br>17,517.<br>573.<br>5,120.<br>2,310.<br>4,530. | 39,060. |

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FORM 990PF, PART II - OTHER ASSETS

DESCRIPTION

DONATION REIMB RECEIVABLE

ENDING BOOK VALUE

ENDING

1,450.

1,450.

1,450.

TOTALS

1,450.

| AND TRUSTEES     |      |
|------------------|------|
| AND              |      |
| DIRECTORS,       |      |
| IST OF OFFICERS, |      |
| OF               | $\ $ |
| LIST             |      |
| 1                |      |
| PART VIII        |      |
| PART             |      |
| 990PF,           |      |
| FORM             |      |

| EXPENSE ACCT AND OTHER ALLOWANCES                       | 0  | 0   | 0            |
|---|--|---|--------------|
| CONTRIBUTIONS 1<br>TO EMPLOYEE<br>BENEFIT PLANS         | 0  | 0   | 0            |
| COMPENSATION  | 0  | 0   | 0            |
| TITLE AND AVERAGE HOURS PER<br>WEEK DEVOTED TO POSITION | TRUSTEE  | TRUSTEE   | GRAND TOTALS |
| NAME AND ADDRESS  | BRIAN A. TORPEY<br>31 DEPUTY MINISTER DR<br>COLTS NECK, NJ 07722 | KAREN A. TORPEY<br>31 DEPUTY MINISTER DRIVE<br>COLTS NECK, NJ 07722 |              |

### FORM 990PF, PART XV - NAME, ADDRESS AND PHONE FOR APPLICATIONS

BRIAN AND KAREN TORPEY 31 DEPUTY MINISTER DRIVE COLTS NECK, NJ 07722

|  | RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND |                                  |         |
|--|---|----------------------------------|---------|
| RECIPIENT NAME AND ADDRESS   | FOUNDATION STATUS OF RECIPIENT              | PURPOSE OF GRANT OR CONTRIBUTION | AMOUNT  |
| RANNEY SCHOOL<br>235 HOPE ROAD<br>TINTON FALLS, NJ 07724                           | NONE  | GENERAL SUPPORT                  | 10,000. |
| AMERICAN CANCER SOCIETY 6725 LYONS ST PO BOX 7 EAST SYRACUSE, NY 13057-0902        | NONE  | GENERAL SUPPORT                  | 150.    |
| GEORGETOWN UNIVERSITY<br>BOX 0734<br>WASHINGTON, DC 20073-0734                     | NONE  | MAIN CAMPUS GEORGETOWN FUND      | 10,000. |
| CASA OF MONMOUTH COUNTY<br>613 HOPE ROAD, BLDG 4, 2ND FLOOR<br>EATONTOWN, NJ 07724 | NONE  | GENERAL SUPPORT                  | 6,000.  |
| BIG BROTHES BIG SISTERS OF MONMOUTH & OCEAN<br>174 MAIN ST<br>EATONTOWN, NJ 07724  | NONE  | GENERAL SUPPORT                  | 1,250.  |
| MERCER CENTER<br>1106 MAIN STREET<br>ASBURY PARK, NJ 07712                         | NONE  | GENERAL SUPPORT                  | 1,500.  |

ATTACHMENT 9 (CONT'D)

### TORPEY CHARITABLE FOUNDATION

## FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

|   | RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR<br>AND |                                  |        |
|---|--|----------------------------------|--------|
| RECIPIENT NAME AND ADDRESS  | FOUNDATION STATUS OF RECIPIENT                 | PURPOSE OF GRANT OR CONTRIBUTION | AMOUNT |
| HOLIDAY EXPRESS<br>966 SHREWSBURX AVENUE<br>TINTON FALLS, NJ 07724    | NONE   | GENERAL SUPPORT                  | 1,000. |
| GEORGETOWN UNIVERSITY<br>BOX 0734<br>WASHINGTON, DC 20073-0734        | NONE   | PROCTOR HARVEY CLINICAL SKILLS   | 5,000. |
| GEORGETOWN UNIVERSITY<br>BOX 0734<br>WASHINGTON, DC 20073-0734        | NONE   | MEDICAL DEAN'S EDUCATIONAL FUND  | 300.   |
| MERIDIAN HEALTH<br>1345 CAMPUS PARKHAY, SUITE A2<br>NEPTUNE, NJ 07753 | NONE   | WOMEN'S PHILANTHROPIC FUND       | 250.   |
| MOMS MAKING MIRACLES<br>WWW.MOMSMAKINGMIRACLES.ORG                    | NONE   | GENERAL SUPPORT                  | 100.   |
| RONALD MCDONALD HOUSE   | NONE   | GENERAL SUPPORT                  | 350.   |

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20-5620042

FORM 990PE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR

FOUNDATION STATUS OF RECIPIENT

PURPOSE OF GRANT OR CONTRIBUTION

AMOUNT

ATTACHMENT 9 (CONT'D)

175.

MONMOUTH MEDICAL CENTER 300 2ND AVENUE

LONG BRANCH, NJ

RECIPIENT NAME AND ADDRESS

NONE

GENERAL SUPPORT

36,075.

TOTAL CONTRIBUTIONS PAID

ATTACHMENT 9 PAGE 28

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### Form **8868**

(Rev January 2013)

Application for Extension of Time To File an Exempt Organization Return

Department of the Treasury

OMB No. 1545-1709

| nternal Revenue Service ► File a separate application for each return.  |  |  |   |   |  |             |         |                     |                    |
|---|--|--|---|---|--|-------------|---------|---------------------|--------------------|
| <ul> <li>If you are</li> </ul>  | filing for an  | Automatic 3-Month Extension, o   | omplete o   | nly Part I and check th   | is box   |             |         |                     | ► X                |
| <ul> <li>If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form).</li> </ul>  |  |  |   |   |  |             |         |                     |                    |
| Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868   |  |  |   |   |  |             |         |                     |                    |
| a corporation 8868 to req   | n required t<br>uest an ext  | You can electronically file Form to file Form 990-T), or an addition ension of time to file any of the associated With Certain Persona | al (not aut<br>forms liste  | tomatic) 3-month exter<br>ed in Part I or Part II w   | ision of time. You can<br>ith the exception of F | eleo<br>orm | 8870    | cally fi<br>0, Info | le Form<br>rmation |
|   |  | details on the electronic filing of the  |   |   |  |             |         |                     |                    |
|   |  | Month Extension of Time. On  |   |   |  |             |         | onpro.              |                    |
|   |  | o file Form 990-T and requesting   |   | <del> </del>  |  | mal         |         |                     |                    |
| Part I only   |  |  |   |   |  |             |         | . <b></b>           | ▶ 🗌                |
|   |  | ncluding 1120-C filers), partnersh   | ıps, REMIC  | Ss, and trusts must use I   | Form 7004 to request a                           | ı ex        | ensic   | on of tu            | ne                 |
| to file incom   |  |  |   |   | Enter filer's identify                           |             |         |                     | tructions          |
| Type or   |  | empt organization or other filer, see in   | structions  |   | Employer identification n                        | umb         | er (Eli | N) or               |                    |
| print   |  | CHARITABLE FOUNDATION  |   |   |  |             |         |                     |                    |
| -   |  | AN TORPEY  |   |   | 20-562004  | 12          |         |                     |                    |
| File by the<br>due date for   | Number, st   | reet, and room or suite no If a P O. box   | ς see instruc   | ctions.   | Social security number (S                        | SSN)        |         |                     |                    |
| filing your   | 31 DEPU  | JTY MINISTER DRIVE   |   |   |  |             |         |                     |                    |
| retum See<br>instructions   | City, town o   | or post office, state, and ZIP code. For   | a foreign add   | dress, see instructions   | <del></del>                                      |             |         |                     |                    |
| mstructions   | COLTS 1  | NECK, NJ 07722   |   |   |  |             |         |                     |                    |
| Enter the Re  | turn code f  | or the return that this application i  | s for (file a   | separate application fo   | or each return)                                  |             |         |                     | 0 4                |
| Application   |  |  | Return  | Application   |  |             |         | T R                 | Return             |
| Is For  |  |  | Code  | Is For  |  |             |         | - 1                 | Code               |
|   | F 000  |  |   |   | \  |             |         | <del></del>         |                    |
| Form 990 or   |  | EZ   | 01  | Form 990-T (corporat  | ion)   |             |         | +                   | 07                 |
| Form 990-BL   |  |  | 02  | Form 1041-A   |  |             |         |                     | 80                 |
| Form 4720-  |  |  | 03  | Form 4720   |  |             |         |                     | 09                 |
| Form 990-PF   | <del> </del>   |  | 04  | Form 5227   |  |             |         |                     | 10                 |
| Form 990-T  | (sec. 401(a  | ı) or 408(a) trust)  | 05  | Form 6069   | orm 6069   |             |         |                     | 11                 |
| Form 990-T (trust other than above)   |  |  | 06  | Form 8870   |  |             |         | 12                  |                    |
| Telephone If the orga If this is for the whole a list with the I reque until for the  | e No.  anization do  ar a Group F  e group, che  anames an  st an autom  organizatio  calendar ye  tax year ente | es not have an office or place of be return, enter the organization's found this box   | pusiness in air digit Gro it is for pa on is for. coration reexempt org | the United States, checking Exemption Number ( int of the group, check to the group of the grou | his box  | ibov<br>20  | and a   | . – –               |                    |
|   |  |  |   |   |  |             |         |                     |                    |
| 3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any  |  |  |   |   |  | 10          |         |                     |                    |
|   |  | dits See instructions  | 4720 or   | 6069 enter any ro   | afundable crodite and                            |             | \$      |                     | 12.                |
| <b>b</b> If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made Include any prior year overpayment allowed as a credit. |  |  |   |   |  | 0           |         |                     |                    |
|   |  | <del> </del>   |   |   |  |             | \$      |                     |                    |
|   |  |  |   |   | 12.  |             |         |                     |                    |
|   |  | make an electronic fund withdrawal   |   | orm 8868, see Form 8453-  | EO and Form 8879-EO fo                           |             | _       | t ınstru            | ctions             |
|   |  | rwork Paduction Act Notice see Instr   |   |   |  |             |         | 6 <b>9</b> /Pa      |                    |