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Form **990-EZ**

Department of the Treasury Internal Revenue Service

Short Form Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation) Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990 All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 at the end of the year may use this form The organization may have to use a copy of this return to satisfy state reporting requirements

OMB No 1545-1150

2009

Open to Public Inspection

For the	e 2009 calendar	year, or tax year beginning <u>,</u> 2009, and ending		7				
Check if	applicable	C	D Employ	er identification number				
Address	change Please use IRS	WILHELM REICH INFANT TRUST CORP.	01-0	0485254				
Name ch	hanne label or	C/O MARY BOYD HIGGINS	E Telepho					
Initial rel		P.O. BOX 687	· '	-864-3443				
Terminal	tion Specific	RANGELEY, ME 04970	207	-664-3443				
Amende		•	F Group	Exemption				
Applicati	ion pending		Numbe	er >				
•,	• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts G Accounting method X Cash Accrual							
_	must attach a completed Schedule A (Form 990 or 990-EZ). Other (specify) ▶							
30/-1	N / 7	H Check ► _		organization is not				
	ite: ► N/A	000 57 ***		nedule B (Form 990,				
	empt status (check o	$\frac{1}{1} \frac{1}{1} \frac{1}$	<u>`</u>					
Check	if the org	anization is not a section 509(a)(3) supporting organization and its gross receipts a for Form 990 return is not required, but if the organization chooses to file a return, be suri	ire normal	ly not more than				
			e to lile a c	complete return				
. Add lir	nes 5b, 6b, and 1	b, to line 9 to determine gross receipts, if \$500,000 or more, file Form 990	>	\$ 323,096.				
	d of Form 990-E							
Part I		Expenses, and Changes in Net Assets or Fund Balances (See the	Instructi					
	· -	ts, grants, and similar amounts received	1	69,969.				
	_	revenue including government fees and contracts	2					
		s and assessments .	3					
4 1	Investment incor		4	37,655.				
5a (Gross amount fro	om sale of assets other than inventory 5a 186, 2						
b l	Less cost or oth	er basis and sales expenses 5b 257,7	785.					
[c (Gain or (loss) from s	ale of assets other than inventory (Subtract In 5b from In 5a) See Statement 1	5	c -71,532.				
•ั่ 6 st	Special events and ad	tivities (complete applicable parts of Schedule G). If any amount is from gaming, check here						
E N a(Gross revenue (r	of including \$ of contributions	_					
() I	reported on line		576.					
_	•	nses other than fundraising expenses 6b	, , , , ,					
	•	from special events and activities (Subtract line 6b from line 6a)	6	7,576.				
1		· · · · · · · · · · · · · · · · · · ·	162.	7,570.				
				1				
	Less cost of goo		361.	4 201				
í	. ,	oss) from sales of inventory (Subtract line 7b from line 7a)	7					
8 (Other revenue (descr	be ► <u>See Statement 2</u>	_) <u>8</u>	11,597.				
9 1	Total revenue A	dd lines 1, 2, 3, 4, 5c, 6c, 7c, and 8	▶ 9	60,450.				
10 (Grants and similar	ar amounts paid (attach schedule) See Statement 3	10	600.				
111 6	Benefits paid to	or for members	11					
E		ompensation, and employee benefits RECEIVED	12	91,275.				
Pl		and other payments to independent contractors.	13	10,767.				
N I		utilities, and maintenance & MAY 1 7 2010	14	31,493.				
Ē 15 G		utilities, and maintenance ions, postage, and shipping MAY 17 2010	15	3,430.				
3)		ribe ► See Statement 4) 16	42,528.				
1		Add lines 10 through 16 OGDEN 117	/ ► 17	180,093.				
								
-1	Excess or (defici	f) for the year (Subtract line 17 from line 9)	18	-119,643.				
\$ 19	Net assets or fur	d balances at beginning of year (from line 27, column (A)) (must agree with end-of	f-year					
S 19 I	figure reported o	n prior year's return).	19	975,061.				
र् 20 (•	net assets or fund balances (attach explanation) See Statement 5	20	162,048.				
	Net assets or fur	d balances at end of year Combine lines 18 through 20	▶ 21	1,017,466.				
art II	Balance S	heets. If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990	0 instead	of Form 990-EZ				
		(See the instructions for Part II) (A) Beginning		(B) End of year				
22 Cash	n, savings, and ii		, 625. 2					
	and buildings		, 216. 2					
	-		, 932 . 24		\sim			
	ıl assets (desem		, 773. 2 !		W			
6 Tota			,712. 2		ω,			
,			, 061. 2		۲,			
AA Family			, 001.]2		7			
	rnvacy Act and	Paperwork Reduction Act Notice, see separate instructions.		Form 990-EZ (2009)				
D D		TEEA0803L 01/30/10		. ^	1			
				\wedge	1/			

Par	t III Statement of Program Se	rvice Accomplishments	(See the instruction	ons.)		Expenses
What i	s the organization's primary exempt purpose? Ed		(Reg	uired for section		
Desc	ribe what was achieved in carrying out the the services provided, the number of am title	ne organization's exempt purp f persons benefited, or other	ooses In a clear and corelevant information for	oncise manner, each	orgai 4947	uired for section c)(3) and (4) nizations and section (a)(1) trusts, optional thers)
	Provide educational servi	useum and	10. 0	110137		
`	nature center.					
00	(Grants \$) If the	nis amount includes foreign g	rants, check here	-	28 a	180,093.
29			- -			
30	(Grants \$) If the	nis amount includes foreign g	rants, check here		29 a	
		nis amount includes foreign g	rants, check here	>	30 a	
31	Other program services (attach schedul (Grants \$) If the	e) nis amount includes foreign gi	rants, check <u>her</u> e	▶ □	31 a	
	Total program service expenses (add l				32	180,093.
Par	t汎V靈 List of Officers, Directors	, Trustees, and Key Em	ployees. List each or	ne even if not com	pens	ated (See the instrs.)
	(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (If not paid, enter -0)	(d) Contributions employee benefit plar deferred compensa	ns and	(e) Expense account and other allowances
	y Boyd Higgins	Executive Direc			0.	0.
	. Box 687	40.00		l .		
	geley, ME 04970	7.				
	ert Dayton .Box 2093	Director 3.00			0.	0.
	Harbor, NY 11963	3.00				
	in Hinchey	Director	0.		0.	0.
	6 Main Street	3.00				
	stonbury, CT 06033					
Mar	y Henderson	Secretary	0.		0.	0.
	Main Street	3.00				
Str	atton, ME 04982					
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D A A				 _		

Form 990-EZ (2009) WILHELM REICH INFANT TRUST CORP.

01-0485254

Page 2

Sa	Pai	Other Information (Note the statement requirements in the instrs for Part V)		_	
33 Were any changes made to the organizing or governing documents? If Yes,* attach a conformed copy of the changes 35 If exignizate high ecores from bisiness activities, such as these control of hers 2, 6 a, and 7a (ameng others), but not reported any form of the property of the organization have unrelated bissenses gross income of \$1,000 or more or was it subject to section 6033(e) notice reporting, and proys that requirements? b) If Yes; has it filed a tax return on Form 990-T for this year? 36 Dot the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If Yes; complete agricultate parts of Schedule N 37 a Einter amount of political expenditures, direct or indirect, as described in the instructions 37a 0.0 37 b Einter amount of political expenditures, direct or indirect, as described in the instructions 37a 0.0 38 a Out the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such solars made in a prince year and still objects any such solars made in a prince year and still objects and the end of the period covered by this return? b) If Yes; complete Schedule L, Part II and enter the total amount involved 38 b				Yes	No
34 Were any changes made to the organization of countering of countering if it Yes, attach a conformed copy of the changes 35 If the organization activement from business sixtless, such as these reported an inter 2, 5s, and 2 (princy often), but not reported in Firm 990-T, attach is distincted explaining with graphitation at 30 ct report the interior of from 951. a Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice reporting, and proxy tax requirements? bit Yes, has it field a tax return on Form 990-T for this year? 55 Did the organization undergood all quidation, desolution, termination, or significant disposition of net assets during the year? If Yes, complete applicable parts of Schedule N 72 Enter amount of political expenditures, direct or individual as described in the instructions 73 Did the organization flore from 1126-PDC for this year? 58 Did the organization flore from 1126-PDC for this year? 59 Did the organization flore from on, or make any loans to, any officer, director, trustee, or key employee or were any such flores made in a prior year and soil outstanding at the end of the period covered by this return? 88 Did the organization flore from 1126-PDC for this year? 98 Did the organization flore from 1126-PDC for this year? 9 Section 501(c)(7) organizations Enter amount of tax imposed on the organization during the year under section 9912 by 50 cross the section 4910 by the organization of the properties of section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on the organization under the year of signalified persons during the year of signalified persons during the year of signalified persons during the year under section 9912 by the organization of signalified persons during the year of signalified persons during the fax year year long section 993 or 390.0227 if a post of signalified persons during the year of signalified persons during the year under section 993 or 390.0227 if a post of signalif	33		33		Х
35 If the organization has concert from business activates, such as those reported on inter 2, 53, and 7s (among others), but not reported on from 99-1, attach is attentive objaming with or eight of the control 98-1. a Did the organization have surrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice reporting, and proxy tax requirements? b If Yes', has it field a tax return on Form 990-1 for this year? 5 Did the organization ordered a legislation, desolution, ferrimation, or significant disposition of net assets during the year? If Yes', complete applicable paths of Schedule N 5 Did the organization of political expenditures, direct or indirect, as described in the instructions \$\bigselow{1}37a\$	34	,	-		_
reporting, and proxy tax requirements? \$\frac{35}{16}\$ \ \text{ if Yes's, hist filed a tax return on Form 990-T for this year?} \$\frac{35}{16}\$ \ \text{ if Yes's, hist filed a tax return on Form 990-T for this year?} \$\frac{35}{16}\$ \ \text{ if Yes's, complete a good filed to the organization of metassets during the year? If \text{ if Yes's, complete a good filed to reduce, direct or indirect, as described in the instructions \(\begin{array}{c} 37a \) \text{ o. } \text{ 37b} \text{ 37b} \text{ 37b} \text{ 37b} \text{ 37b} \text{ 37b} \text{ 37b} \text{ 37b} \text{ 37b} \text{ 37b} \text{ 37b}	35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T			
b If Yes, 'has it filed a tax return on Form 990-T for this year?' 36 Did the organization undergo a liquidation, dissolution, fermination, or significant disposition of net assets during the year?' If Yes, 'complete applicable parts of Schedule N. 378 Einer amount of political expenditures, direct or indirect, as described in the instructions. * 379	ŧ	a Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy tax requirements?	35 a		X
year? If Yes,' complete applicable parts of Schedule N 378 Enter amount of political spenditures, street or indirect, as described in the instructions * 37a	l		35 b		
B Did the organization file Form 1120-POL for this year? 388 Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return? 38 Section 501(c)(7) organizations Enter. 38 Initiation fees and capital contributions included on line 9 39 Section 501(c)(7) organizations Enter. 39 Invitation fees and capital contributions included on line 9 39 Cross recepts, included on line 9, for public use of club facilities 40 Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under section 4911 ► 0., section 4915 ► 0. 40 Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4955 ► 0. 40 Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4955 excess benefit transaction with a disqualified person and that the insarcation has not been reported on any of the organization with a disqualified person and that the insarcation has not been reported on any of the organization per Forms 990 or 990-E22 11 years. Organizations of the organizations of the organization on the organization in a prior year and that the insarcation has not been reported on any of the organization in a prior year and that the insarcation is not been reported on any of the organization in the organization in the organization on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958. 40 Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 400 regionalization organization and prior year and the first person of the organization and the organization and prior year and the properties of the organization and the organization and prior year and the properties of the organization and prior year and the organization and the organization and prior year and years. 42 The organization and the organization maintain an office outside	36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If 'Yes,' complete applicable parts of Schedule N			
38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return? 38b			A. 12 - 12		
bill Yes, complete Schedule L, Part II and enter the total amount involved 38 b N/A 39 Section 501(c)(7) organizations Enter. 38 b N/A 39 Section 501(c)(7) organizations Enter. 39 Initiation fees and capital contributions included on line 9 30 Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911 → 0. section 4912 → 0. section 4915 → 0. s	ı	b Did the organization file Form 1120-POL for this year?		12 36 747	
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e All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886.7 42 a The organization's books are in care of ► Mary Boyd Higgins Located at ► P_O.Box 687, Rangeley, ME b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of a Foreign Bank and Financial Accounts. c At any time during the calendar year, did the organization maintain an office outside of the U S? If "Yes," enter the name of the foreign country: **See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of a Foreign Bank and Financial Accounts. c At any time during the calendar year, did the organization maintain an office outside of the U S? If "Yes," enter the name of the foreign country: **Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ 43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here and enter the amount of tax-exempt interest received or accrued during the tax year **Ves No 44 Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ 45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes."	•	d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization.			
42a The organization's books are in care of ► Mary Boyd Higgins Located at ► P. O. Box 687, Rangeley, ME Description of the organization and the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of a Foreign Bank and Financial Accounts. C At any time during the calendar year, did the organization maintain an office outside of the U S? If 'Yes,' enter the name of the foreign country As Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here and enter the amount of tax-exempt interest received or accrued during the tax year As Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here and enter the amount of tax-exempt interest received or accrued during the tax year As In the organization maintain any donor advised funds? If 'Yes,' Form 990 must be completed instead of Form 990-EZ If 'Yes,' In the organization maintain any donor advised funds? If 'Yes,' Form 990 must be completed instead of Form 990-EZ See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of a Foreign Bank and Financial Accounts. As Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here and enter the amount of tax-exempt interest received or accrued during the tax year As In the organization maintain any donor advised funds? If 'Yes,' Form 990 must be completed instead of Form 990-EZ	€	All organizations. At any time during the tax year, was the organization a party to a prohibited tax			Y Y
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See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of a Foreign Bank and Financial Accounts. c At any time during the calendar year, did the organization maintain an office outside of the U S? If 'Yes,' enter the name of the foreign country: 43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here and enter the amount of tax-exempt interest received or accrued during the tax year 44 Did the organization maintain any donor advised funds? If 'Yes,' Form 990 must be completed instead of Form 990-EZ 45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If 'Yes,'	t	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a	12 h	Yes	
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43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here and enter the amount of tax-exempt interest received or accrued during the tax year 44 Did the organization maintain any donor advised funds? If 'Yes,' Form 990 must be completed instead of Form 990-EZ 45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If 'Yes,'		· · · · · · · · · · · · · · · · · · ·		142	
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and enter the amount of tax-exempt interest received or accrued during the tax year Yes No Poid the organization maintain any donor advised funds? If 'Yes,' Form 990 must be completed instead of Form 990-EZ 44 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If 'Yes,'		If Yes, enter the name of the foreign country.			
and enter the amount of tax-exempt interest received or accrued during the tax year Yes No Poid the organization maintain any donor advised funds? If 'Yes,' Form 990 must be completed instead of Form 990-EZ 44 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If 'Yes,'					
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Yes No 44 Did the organization maintain any donor advised funds? If 'Yes,' Form 990 must be completed instead of Form 990-EZ 45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If 'Yes,'	43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here	1	-	N/A
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Did the organization maintain any donor advised funds? If 'Yes,' Form 990 must be completed instead of Form 990-EZ 44			1	Vac	N _C
of Form 990-EZ 44 X 45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If 'Yes,'				162	140
45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If 'Yes,' Form 990 must be completed instead of Form 990-F7	44	Did the organization maintain any donor advised funds? If 'Yes,' Form 990 must be completed instead of Form 990-EZ	44		Х
	45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If 'Yes,' Form 990 must be completed instead of Form 990-F7	45		x

Only

BAA

(207)

Phone no

864-5771

Form 990-EZ (2009)

No

►|X| Yes

Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only. All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 46-49b and complete the tables for lines 50 and 51. See Statement No Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I 46 Х 46 Х Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II 47 48 Х Is the organization a school as described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E 49a Did the organization make any transfers to an exempt non-charitable related organization? 49 a X b If 'Yes,' was the related organization a section 527 organization? 49 b Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter 'None (b) Title and average hours per week devoted to position (d) Contributions to employee benefit plans and deferred compensation (e) Expense account and other allowances (c) Compensation (a) Name and address of each employee paid more than \$100,000 None f Total number of other employees paid over \$100,000 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter 'None (a) Name and address of each independent contractor paid more than \$100,000 (b) Type of service (c) Compensation None d Total number of other independent contractors each receiving over \$100,000 Under penalties of perjury, I declare that I have examined this/return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Sign Here Signature of officer Executive Di Type or print name and title Preparer's Identifying Number (See instructions) Check if **Paid** Preparer's signature Richard 1/4 Walker ► X N/A employed Pre-Richard M. Walker C.P.A parer's Firm's name (or yours if self-employed), address, and ZIP + 4 N/A Ùse PO Box 1170 EIN

Rangeley, ME 04970-1170

May the IRS discuss this return with the preparer shown above? See instructions

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Name	of the organization WILH	ELM REICH INFA	ANT TRUST CORP.] ' '		tion number	
<u> </u>		MARY BOYD HIGO							<u>485254</u>		
Par	Reason for Pu	<u>blic Charity Statւ</u>	is (All organizations	must_d	comple	te this	part.	<u>See ı</u>	<u>nstruct</u>	ions	
The c	organization is not a pri	vate foundation becai	use it is (For lines 1 thro	ough 11,	check c	nly one	box)				
1	A church, convention of churches or association of churches described in section 170(b)(1)(A)(i).										
2	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)										
3	A hospital or coope	erative hospital servic	e organization described	ın secti	on 170(b)(1)(A)((iii).				
4	A medical research	n organization operate	ed in conjunction with a h	nospital	describe	d in sec	ction 17	0(b)(1)(A)(iii) Er	iter the hospita	l's
	name, city, and sta						. _				
5	170(b)(1)(A)(iv). (0	Complete Part II)	of a college or university			_	_	rnmenta	I unit de	scribed in secti	on
6 7	X An organization that		governmental unit descri i substantial part of its si art II)					t or fror	n the ger	neral public des	scribed
8			170(b)(1)(A)(vi). (Comple	te Part	II)						
9	from activities relate investment income	d to its exempt function	more than 33-1/3 % of its ns — subject to certain excisss taxable income (less complete Part III)	eptions.	and (2) r	no more	than 33-	1/3 % of	its suppo	ort from aross	after
10	An organization or	ganized and operated	exclusively to test for pu	ublic saf	ety See	section	n 509(a)	(4).			
11											
	a Type I b Type II c Type III – Functionally integrated d Type III – Other										
е											
f											
g	Since August 17, 2	006, has the organiza	ition accepted any gift o	r contrib	oution fr	om any	of the f	ollowing	persons		1
	(i) a person who	directly or indirectly	controls, either alone or	together	with pe	rsons d	escribei	d in (ii)	and (III)	Yes	5 No
	below, the go	verning body of the s	upported organization?	.090		.,		()		11g (i)	
	(ii) a famıly mem	ber of a person desc	cribed in (i) above?							11 g (ii)	
	(iii) a 35% contro	lled entity of a persor	n described in (i) or (ii) a	bove?						11 g (iii)	
h	Provide the following	ng information about	the supported organization	ons						-	
	(i) Name of Supported Organization	(ii) EIN	(III) Type of organization (described on lines 1-9 above or IRC section (see instructions))	organizat	Is the tion in col d in your erning ment?	l col	ou notify nzation in (i) of upport?	(vi) organizat (i) organi U	Is the tion in col zed in the S ?	(vii) Amount of S	upport
	·			Yes	No	Yes	No	Yes	No		
				 							
				<u> </u>							
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Total			はないできる。	17.73.7			沙海道	量沙岭			

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I)								
Sec	tion A. Public Support	г		 -				
begi	ndar year (or fiscal year nning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total	
` 1	Gifts, grants, contributions and membership fees received (Do not include 'unusual grants')	66,389.	85,144.	714,361.	112,451.	69,969.	1,048,314.	
2	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf						0.	
3	The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge.						0.	
4	Total. Add lines 1-through 3	66,389.	85,144.	714,361.	112,451.	69,969.	1,048,314.	
5	The portion of total contributions by each person (other than a governmental unit or publicly supported							
	organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f).						0.	
6	Public support. Subtract line 5 from line 4						1,048,314.	
<u>Sec</u>	tion B. Total Support	·	<u> </u>					
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total	
7	Amounts from line 4	66,389.	85,144.	714,361.	112,451.	69,969.	1,048,314.	
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources	28,728.	29,665.	65,643.	57,680.	37,655.	219,371.	
9	Net income from unrelated business activities, whether or not the business is regularly carried on						0	
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) See Part IV	14,550.	14,542.	8,765.	11,876.	11,597.	61,330.	
11	Total support. Add lines 7 through 10					で 一番から 2 mm	1,329,015.	
12	Gross receipts from related activ	rities, etc (see ins	structions)			12	0.	
13	First five years. If the Form 990 organization, check this box and	is for the organization here	ation's first, secor	nd, third, fourth, o	or fifth tax year as	s a section 501(c)	(3)	
Sec	tion C. Computation of Pul	blic Support P	ercentage					
14 15	14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f) 14 78.9%							
16a 33-1/3 support test — 2009. If the organization did not check the box on line 13, and the line 14 is 33-1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization								
b 33-1/3 support test — 2008. If the organization did not check a box on line 13, or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization								
17 a	17a 10%-facts-and-circumstances test — 2009 If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization.							
	10%-facts-and-circumstances te or more, and if the organization organization meets the 'facts-and	meets the 'facts-a d-circumstances'	and-circumstances test The organi	s' test, check this zation qualifies as	box and stop her a publicly suppo	e. Explain in Part rted organization	IV how the ▶	
18	Private foundation. If the organi	zation did not che	ck a box on line,	13, 16a, 16b, 17a	, or 1/b, check th	nis box and see in:	structions -	

Partill Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I) Section A. Public Support (c) 2007 (d) 2008 **(e)** 2009 (f) Total Calendar year (or fiscal yr beginning in) ► (a) 2005 **(b)** 2006 Gifts, grants, contributions and membership fees received (Do not include 'unusual grants') Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge 6 Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, 3 received from disqualified persons **b** Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the amount on line 13 for the vear c Add lines 7a and 7b · 1000年, THE PARTY OF THE P The Section of the Section 8 Public support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal yr beginning in) **(b)** 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total (a) 2005 9 Amounts from line 6 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources **b** Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b 11 Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on 12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) 13 Total support. (add Ins 9, 10c, 11, and 12) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage % 15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f)) 15 16 Public support percentage from 2008 Schedule A, Part III, line 15 16 % Section D. Computation of Investment Income Percentage % 17 17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f)) % 18 Investment income percentage from 2008 Schedule A, Part III, line 17 18 19a 33-1/3 support tests - 2009. If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

b 33-1/3 support tests - 2008. If the organization did not check a box on line 14 or 19a, and line 16 is more than 33-1/3%, and line 18

is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Schedule /	A (Forn	n 990 or	990-E	Z) 2009	_WI	LHELM	REICH	INFAN	IT TR	<u>UST</u>	CORP.	01-0485254	Page 4
Part IV	Sup	pleme	ntal Ir	ıforma	tion.	Compl	ete this	part to	provid	de th	e expla	01-0485254 in anations required by Part II, line 10; ditional information. See instructions	
	Part	II, line	17a	or 17b	; and	Part I	II, line 1	2. Prov	ide ar	<u>ıy oth</u>	ner add	ditional information. See instructions	<u>. </u>
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2009 Schedule A, Part IV - Supplemental Information WILHELM REICH INFANT TRUST CORP. C/O MARY BOYD HIGGINS 01-0485254

5/05/10 09 23AM

Part II, Line 10 - Other Income

Nature and Source 2009 2008 2007 2006 2005

Other Income 11,597. 11,876. 8,765. 14,542. 14,550.

Total \$\frac{1}{5}\$ 11,597. \$\frac{1}{5}\$ 11,876. \$\frac{1}{5}\$ 8,765. \$\frac{1}{5}\$ 14,542. \$\frac{1}{5}\$ 14,550.

· •				
2009	Federal Statements	_		Page 1
Client 744	WILHELM REICH INFANT TRUST CORP. C/O MARY BOYD HIGGINS			01-0485254
5/05/10				09 23AM
Statement 1 Form 990-EZ, Part I, Line 5c Net Gain (Loss) from Noninvent	tory Sales			ı
Publicly Traded Securitie	es .			
Gross Sales Price: Cost or Other Basis:	186,253. 257,785.			
	Total Gain (Loss) Publicly Traded Secu	ırities	; \$	-71,532.
	Total Net Gain (Loss) From Noninventory	g Sales	\$	-71,532.
Statement 2 Form 990-EZ, Part I, Line 8 Other Revenue				
Royalties Stumpage	,		\$	9,887. 1,710. 11,597.
Statement 3 Form 990-EZ, Part I, Line 10 Grants and Similar Amounts Pai	id			,
Class of Activity: Cash Amount Given:	Scholarships		\$	600.
Statement 4 Form 990-EZ, Part I, Line 16 Other Expenses				
Depreciation Director Expense Insurance Miscellaneous Office Expenses			\$	9,899. 1,229. 4,336. 2,183. 4,291.
Outside Services Program Expense Travel		Total	\$	3,279. 12,815. 4,496. 42,528.
Statement 5 Form 990-EZ, Part I, Line 20 Other Changes In Net Assets Or	r Fund Balances			

Net Unrealized Gains and Losses on Investments

1	^	^	
		u	

Federal Statements

Page 2

Client 744

WILHELM REICH INFANT TRUST CORP. C/O MARY BOYD HIGGINS

01-0485254

5/05/10

09 23AM

Statement 6 Form 990-EZ, Part II, Line 24 Other Assets

Endowment	Fund	
Furniture	and Fixtures	3
	una ranouron	•

	<u>Beq</u>	ginning	Ending		
	\$	8,600.	\$	8,600.	
		8,332.		6,549.	
Total	\$	16,932.	\$	15,149.	

Statement 7 Form 990-EZ, Part II, Line 26 **Total Liabilities**

Accounts	Payable	and	Accrued	Expenses
Payable t	to Ōffice	ers,	Director	rs, Etc.

	Bec	ginning	 <u>Ending</u>
	\$	2,162.	\$ 1,486.
		2,550.	2,550.
Total	\$	4,712.	\$ 4,036.

Statement 8 Form 990-EZ, Part VI Regarding Transfers Associated with Personal Benefit Contracts

(a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?(b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? No

No