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. Form 990-PF

Return of Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust

OMB No. 1545-0052

	epartm temat r	ent of the T Pevenue Se	reasury	N	Of4	e: The foundati	on may	Treat	ed a	s a Priv	ate Foundation	on anefv	tate	renor	ting requirements		20	009	
_						tax year begi		Le able to	400 C	- ~~py 01	, 2009				ang requirements			. 20	
_			hat apply:	Ĭ	Ė	Initial retur			Initia	l return	of a former p				····	F	inal re		
						Amended					ss change		_	T)	ame change			-	
_			Name of fo	ur	nda	ation								ヿ	A Employer identi	ficati	on numt	er er	
	Use t	he IRS																	
	lal	bel.	HOEHL E	·A	M.	ILY FOUND	OITA	1							03	-03	35437	4	
	Othe	rwise,	Number an	d	str	eet (or P O box	number i	mail is not o	deliver	ed to street	t address)	Roor	n/sui	te	B Telephone number (s	ee pag	e 10 of the i	instructions)	
	•	rint												ı					
		type. Specific	9762 BE	ΞN	IΤ	GRASS BEN	D								(2	39)	593	-8324	
		ctions.	City or tow	n,	sta	ate, and ZIP coo	de								C If exemption appli pending, check he	cation	ıs	>	
															D 1. Foreign organiz			re . ►[\Box
_			NAPLES,											_	2. Foreign organiz	zations	meeting th	ne _	
H	<u>C</u> he	eck type	e of organız	at	lor	n. 🔀 Secti	on 501(c)(3) exe	mpt	private f	oundation				85% test, check computation				
						empt charitable					ivate foundat	ion		_	E If private foundati	on sta	tus was ter	mmated c	
ı			et value of a					unting m			ash 💹 Acc	rual			under section 507				
			m Part II, co					ther (spe							F If the foundation			_ [_
		▶ \$				<u>,219.</u>	L `	coiumn (a) mu	ist de on	cash basis.)		-		under section 507	- 11 / 1	•		
	art					e and Expens		(a) Re			(b) Net inve	stmen	t	(0) Adjusted net			oursements naritable	3
		may n	not necessarii	ly (eq	ual the amounts	s in ´		nses ooks		incom			,-	income		pur	poses	
-	1 .					1 of the instruct							+				(cash b	oasis only)	
	1	Contribut	tions, gifts, grants	s, e fo	etc , oun	received (attach sch idation is not requ	edule) . ured to						-+			+			—
	2	Crieck J	attacl	h S	Sch	В										+			
	3		-			porary cash inves			256	5,603.	25	6,60	13			+	ATCH	1	—
	4	_				rom securities				3,003.	23	0,00	, , , , , , , , , , , , , , , , , , , 				ALCI	т	
	1					• • • • • • •				· · · · · · · · · · · · · · · · · · ·			\dashv			+			
4	1 _		,			of accets not on l		-1	, 411	1,168.				(e)	ECEIVED	1			
evenue	b	Gross s	ales price for a		dit	of assets not on l -1,411							-			4-7	낅		—
Š	7		on line 6a Lagin net inc	-	me	(from Part IV, I						Ì	6			T_{i}	ől		
چۆچ	8	•	•			ain	•						8	Αl	JG 3 0 2010		Ś		
\$0 \$0 \$0 \$0	9				_										·		Ϋ́		_
-	10 a	Gross sa	ales less returns wances	S										0	GDEN. U				
ඉව	b		ost of goods so									l							
AUG	С	Gross	profit or (loss	;) (att	tach schedule)													
Ħ	11	Other i	ncome (attac	ch	sc	hedule)				3,481.		5,66					<u>ATCH</u>	. 2	
a -	12	Total.	Add lines 1 t	hr	ou	<u>ah 11</u>		-1,	,136	5,084.	24	0,94	3.						
삙	13					lirectors, trustees,										-			
爱,	14					and wages .					_		_			—			
	15					e benefits										+-			
	16a					lule)				1,350.			0.		0				- 0
Ü	b					schedule) ^{ATCI}				5,886.	7	5,88	٠,			+			
tive	_ C	•				(attach schedul	e).^	· -	- / -	,,000.	 -	J, 00	, , ,			+			
tra	17						* * *		27	7,714.	1	5,35	55			+			
i.	18	•				page 14 of the inst				, , , ± 1 •		3,30	, , ,			+-			
Ē	19 20	•	,			hedule) and dep	-						\dashv			+			—
Ă	21									714.						+			
SCANNED Operating and Administrative Expenses	22					s							\dashv			+			
ב יי	23					schedule) ATC			137	7,824.	13	7,75	2.			\top		.	
į	24					ministrative ex							\dashv	-		\top			
ner						3			246	6,488	22	8,99	3.		0				0
Ō	25		-	-		nts paid				5,045.						1		576,0	45
	26		•	-		ents Add lines 24				2,533.	22	8,99	3.		0			576,0	45
-	27		ct line 26 fro																
						ses and disburseme	ents	1,	, 958	3,617.									_
						(if negative, en					1	1,95	0.						

Form **990-PF** (2009) PAGE 2

-0-

Part II	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End	of year
en su	amounts only. (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
1 C	ash - non-interest-bearing	835,352.	1,176,568.	1,176,568
	avings and temporary cash investments			
3 A	ccounts receivable			
L	ess. allowance for doubtful accounts ▶			
	receivable			
l L	ess: allowance for doubtful accounts			
	Frants receivable			
	deceivables due from officers, directors, trustees, and other			
	(see page 16 of the instructions)			
	other notes and loans receivable (attach schedule)			
	ess: allowance for doubtful accounts			
۔ ا	ess anowaries for dealer accounts and accounts anowaries for sale or use			
	repaid expenses and deferred charges			
SSI				
-	ivestments - U.S. and state government obligations (attach schedule)	Ĭ		
	nvestments - corporate stock (attach schedule)			<u> </u>
11 In ai	nvestments - corporate bonds (attach schedule),			
	attach schedule) nvestments - mortgage loans			
13 In	nvestments - other (attach schedule) ATCH 7	16,064,066.	13,370,180.	14,754,651
14 La	and, buildings, and	,		,
l ed	quipment basis ess accumulated depreciation attach schedule)			
(a	attach schedule)		· · · · · · · · · · · · · · · · · · ·	
1	Other assets (describe			
	otal assets (to be completed by all filers - see the instructions. Also, see page 1, item I)	16,899,418.	14,546,748.	15,931,219
		10,000,410.	14,540,740.	10,001,210
_	ccounts payable and accrued expenses			
	Grants payable			
	eferred revenue	395,885.	1,885.	AMCII O
≝ 20 Lo	oans from officers, directors, trustees, and other disqualified persons	393,003.	1,005.	ATCH 8
를 21 M	fortgages and other notes payable (attach schedule)			
22 0	Other liabilities (describe)			
23 T	otal liabilities (add lines 17 through 22)	395,885.	1,885.	
	oundations that follow SFAS 117, check here	0,000	2,000.	
σ a	nd complete lines 24 through 26 and lines 30 and 31.			
일 24 U	Inrestricted			
<u> </u>	emporarily restricted			
26 P	ermanently restricted			
	oundations that do not follow SFAS 117,			
<u> </u>	heck here and complete lines 27 through 31. ▶ 🗓			
	apital stock, trust principal, or current funds		·	
ΨΙ	aid-in or capital surplus, or land, bldg, and equipment fund	16,503,533.	14 544 062	
SS 29 R	etained earnings, accumulated income, endowment, or other funds	10,303,333.	14,544,863.	
₹ 30 T	otal net assets or fund balances (see page 17 of the	16 502 522	14 544 062	
	nstructions)	16,503,533.	14,544,863.	
	otal liabilities and net assets/fund balances (see page 17	16 000 410	1. 5.6 5.6	
	f the instructions)	16,899,418.	14,546,748.	<u> </u>
	Analysis of Changes in Net Assets or Fund I		· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·
	net assets or fund balances at beginning of year - Part II,	, column (a), line 30 (mus	t agree with	
			<u>1</u>	16,503,533
2 Enter a	amount from Part I, line 27a		2	-1,958,617
3 Other	amount from Part I, line 27a increases not included in line 2 (itemize) ▶ATTACH	IMENT 9	3	3
				14,544,919
5 Decrea	nes 1, 2, and 3ases not included in line 2 (itemize) ▶ATTACH	MENT 10	5	56
	net assets or fund balances at end of year (line 4 minus			14,544,863

P	art IV Capital Gains	s and Losses for Tax on Inv	estment Income		_	
		d describe the kind(s) of property sold (_	(b) How acquired P-Purchase	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a	CEE DADE TH COUR		5113. MEG 50.)	D-Donation	(,, ,,	
t						
-						
_	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) mini	
_a	1					
_ <u>t</u>)					
						
_0	1				_	
_e						
	complete only for assets s	howing gain in column (h) and owr			Gains (Col. (h) g	
	(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col (j), if any	col.	(k), but not less t Losses (from co	
_a	<u> </u>					
<u>_k</u>) <u></u>					
_0						
_e	<u> </u>		<u> </u>			
			gain, also enter in Part I, line 7 (loss), enter -0- in Part I, line 7	2	-1,	411,168.
3		n or (loss) as defined in sections 12				
		, line 8, column (c) (see pages 13				
	If (loss), enter -0- in Part I,	line 8	 	3		
			uced Tax on Net Investment Ince section 4940(a) tax on net investi			
w		·	outable amount of any year in the back. Do not complete this part.	ase period	d?	Yes X No
1	Enter the appropriate am-	ount in each column for each year	; see page 18 of the instructions be	efore mak	ing any entries.	· · · · · · · · · · · · · · · · · · ·
_	(a) Base penod years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of nonchantable-use assets		(d) Distribution ra (col (b) divided by	
	2008	875,992.	17,794,363.			0.049229
	2007	800,685.	21,371,400.			0.037465
_	2006	1,047,655.	20,294,308.			0.051623
_	2005	160,150.	4,457,453.			0.035929
_	2004	173,500.	3,592,420.			0.048296
2	Total of line 1, column (d)	· · · · · · · · · · · · · · · · · · ·		2		0.222542
3		for the 5-year base period - divide				
	number of years the found	dation has been in existence if less	s than 5 years	3		0.044508
4	Enter the net value of nor	ncharitable-use assets for 2009 fro	m Part X, line 5	4	14,	651,663.
5	Multiply line 4 by line 3			5		652,116.
6	Enter 1% of net investme	nt income (1% of Part I, line 27b)		6		120.
7	Add lines 5 and 6			7		652,236.
8	Enter qualifying distribution	ons from Part XII, line 4	n Part VI, line 1b, and complete t	8		576,045.
	If line 8 is equal to or green	eater than line 7, check the box i	n Part VI, line 1b, and complete t	nat part	using a 1% tax	rate. See the

Par	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of t	he ins	tructi	ons)
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.			
	Date of ruling or determination letter (attach copy of ruling letter if necessary - see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		2	239.
	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		- 2	239.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 4			0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		2	239.
6	Credits/Payments.			
а	2009 estimated tax payments and 2008 overpayment credited to 2009 6a 920 .			
	Exempt foreign organizations-tax withheld at source 6b 0.			
	Tax paid with application for extension of time to file (Form 8868) 6c 8,000.			
	Backup withholding erroneously withheld			
7	Total credits and payments Add lines 6a through 6d		8,9	920.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached			
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 Enter the amount of line 10 to be: Credited to 2010 estimated tax 240 Refunded 11			581 <u>.</u>
11	Enter the amount of line 10 to be: Credited to 2010 estimated tax ▶ 240 · Refunded ▶ 11		8,4	441.
Par	t VII-A Statements Regarding Activities			, .
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
	participate or intervene in any political campaign?	<u>1a</u>		Х
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19			
	of the instructions for definition)?	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			1
	published or distributed by the foundation in connection with the activities.			
C	Did the foundation file Form 1120-POL for this year?	1 c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			1
	(1) On the foundation \$\Bigsis \			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
	on foundation managers > \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
	If "Yes," attach a detailed description of the activities.			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of			١.,
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		Х
	If "Yes," attach the statement required by General Instruction T			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			
	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that		v	
	conflict with the state law remain in the governing instrument?	6	X	-
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	Λ.	
8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the instructions) \blacktriangleright VT ,			
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 ATTACHMENT . 11	8ъ		Х
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			1
	4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV on page			
	27)? If "Yes," complete Part XIV	9_		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		х

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 page 20 of the instructions)	11		X
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before			
	August 17, 2008?	12		<u>X</u> _
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address ▶ N/A			
14	The books are in care of ▶ ROBERT H. HOEHL Telephone no. ▶239-593	3-83	24	
	The books are in care of POBERT H. HOEHL Located at P9762 BENTGRASS BEND NAPLES, FL Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here			 г
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		▶	
	and enter the amount of tax-exempt interest received or accrued during the year			
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly): (1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No			
	(1) Ingage in the sale of statistings, or reasoning or properly many anoquement persons.		1	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person?			
	(3) Further goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualined person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? Yes X No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if			
	the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days)			
	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
b	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)?	1ь		Х
	Organizations relying on a current notice regarding disaster assistance (see page 20 of the instructions).			
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			
•	were not corrected before the first day of the tax year beginning in 2009?	1 c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5)).			
а	At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and			
	6e, Part XIII) for tax year(s) beginning before 2009?	1		
	If "Yes," list the years	1		
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)			
	to all years listed, answer "No" and attach statement - see page 20 of the instructions)	2b		
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	>			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business			
	enterprise at any time during the year?			
b	If "Yes," did it have excess business holdings in 2009 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	2 -		
	foundation had excess business holdings in 2009)	3b 4a	+	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	44	$\vdash \vdash \vdash$	<u> </u>
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2009?	4ь		Х

•	٠	٠	. •					
F	οп	m	99	0-	PF	: (2	0091	

compensation

NONE

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Emplo and Contractors (continued)	yees,
3 Five highest-paid independent contractors for professional services (see page 23 of the 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	▶ NONE
Part IX-A Summary of Direct Charitable Activities	
List the foundation's four largest direct chantable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficianes served, conferences convened, research papers produced, etc.	Expenses
1 N/A	
2	
*	
3	
4	
=	
Part IX-B Summary of Program-Related Investments (see page 23 of the instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 NONE	
2	
All other program-related investments. See page 24 of the instructions	
3 NONE	
Total. Add lines 1 through 3	

Pa	Minimum Investment Return (All domestic foundations must complete this part. Forei see page 24 of the 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	13,793,498.
b	Average of monthly cash balances	1b	1,081,287.
С	Fair market value of all other assets (see page 24 of the instructions)	1c	0.
d	Total (add lines 1a, b, and c)	1d	14,874,785.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Cubtract line 2 from line 1d	3	14,874,785.
4	Cash deemed held for charitable activities. Enter 1 1/2 % of line 3 (for greater amount, see page 25		
	of the instructions)	4	223,122.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	14,651,663.
6	Minimum investment return. Enter 5% of line 5	6	732,583.
Pa	Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) privations and certain foreign organizations check here ▶ and do not complete this privations.		
1	Minimum investment return from Part X, line 6	1	732,583.
2 a	Tax on investment income for 2009 from Part VI, line 5		
b	Income tax for 2009. (This does not include the tax from Part VI) 2b		
С	Add lines 2a and 2b	2c	239.
3	Distributable amount before adjustments. Subtract line 2c from line 1		732,344.
4	Recoveries of amounts treated as qualifying distributions		
5	Add lines 3 and 4	5	732,344.
6	Deduction from distributable amount (see page 25 of the instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	732,344.
Pa	rt XII Qualifying Distributions (see page 25 of the instructions)		
1 -	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		676 045
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	576,045.
b	Program-related investments - total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		•
_	purposes	2	0.
3	Amounts set aside for specific charitable projects that satisfy the		0
a	Suitability test (prior IRS approval required)	3a	0.
D A	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	576,045.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income	_	N1 /7
c	Enter 1% of Part I, line 27b (see page 26 of the instructions)	5	N/A 576 045
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	576,045.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating w qualifies for the section 4940(e) reduction of tax in those years	netner the fol	indation

Pa	Tt XIII Undistributed income (see page	26 of the instruction	ns)		
1	Distributable amount for 2009 from Part XI,	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
	line 7				732,344.
2	Undistributed income, if any, as of the end of 2009				
а	·				
ь	Enter amount for 2008 only				
3	Excess distributions carryover, if any, to 2009:				
a	From 2004				
b	From 2005				
c	From 2006 114, 965.				
d	From 2007				
e	From 2008				
_	Total of lines 3a through e	114,965.			
4					
•	line 4: ▶ \$576,045.				
а	Applied to 2008, but not more than line 2a				
	Applied to undistributed income of prior years (Election				
-	required - see page 26 of the instructions)				
С	Treated as distributions out of corpus (Election required - see page 26 of the instructions)				
d	Applied to 2009 distributable amount				576,045.
e		0.			-
5	Excess distributions carryover applied to 2009	114,965.			114,965.
	(If an amount appears in column (d), the same				
6	amount must be shown in column (a)) Enter the net total of each column as indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5				
b	Prior years' undistributed income Subtract			-	
	line 4b from line 2b				
С	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 page 27 of the instructions				
е	Undistributed income for 2008. Subtract line 4a from line 2a. Taxable amount - see page				
	27 of the instructions				
f	Undistributed income for 2009. Subtract lines				
•	4d and 5 from line 1. This amount must be				
_	distributed in 2010				41,334.
7	Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see page 27 of the				
8	Instructions)				
9	Excess distributions carryover to 2010.				
	Subtract lines 7 and 8 from line 6a				
10	Analysis of line 9.				
а	_ '				
b					1
c	Excess from 2007				
d	Excess from 2008				
е	Excess from 2009		1		

Pa	irt XIV Private Oper	rating Foundations (see page 27 of the	instructions and Pa	art VII-A, questi	on 9)	NOT A	PPLICABLE
1 a	If the foundation has	received a ruling or d	etermination letter tha	t it is a private oper	rating	•		
	foundation, and the ruling	g is effective for 2009, e	nter the date of the ruling		. ▶			
ь	Check box to indicate wh					4942(j)	(3) or	4942(j)(5)
2-	Fatanaka kan da kan ada	Tax year		Prior 3 years				
2 a	Enter the lesser of the ad- justed net income from Part	(a) 2009	(b) 2008	(c) 2007	(d) 2006		(8)	Total
	I or the minimum investment							
	return from Part X for each year listed]			
_								
D	85% of line 2a							
С	Qualifying distributions from Part XII, line 4 for each year listed							
đ	Amounts included in line 2c not							
•	used directly for active conduct of exempt activities							
е	Qualifying distributions made						-	_
	directly for active conduct of							
	exempt activities Subtract line 2d from line 2c							
3	Complete 3a, b, or c for the		·					
а	"Assets" alternative test - enter							
•	(1) Value of all assets							
	(2) Value of assets qualifying							
	under section							
b	4942(j)(3)(B)(i) "Endowment" alternative test-					-	_	
	enter 2/3 of minimum invest-							
	ment return shown in Part X, line 6 for each year listed							
С	"Support" alternative test - enter						****	
	(1) Total support other than							
	gross investment income							
	(interest, dividends, rents, payments on securities							
	loans (section 512(a)(5)),							
	or royalties) (2) Support from general			-				
	public and 5 or more exempt organizations as							
	provided in section 4942							
	(j)(3)(B)(III)							
	port from an exempt							
	organization (4) Gross investment income							
Pa		ary Information (C	omplete this part	only if the found	lation had \$5	.000	or more	in assets
	at any time	during the year - se	e page 28 of the in	structions.)	•	,		
1	Information Regardin	g Foundation Manage	rs:					
а	List any managers of	the foundation who h	ave contributed more	e than 2% of the total	al contributions	receive	ed by the	foundation
	before the close of any	y tax year (but only if th	ney have contributed r	nore than \$5,000) (S	See section 507(d)(2).)		
	N/A							
b	List any managers of	the foundation who	own 10% or more of	the stock of a corp	oration (or an	equally	large por	tion of the
	ownership of a partner	rship or other entity) of	f which the foundation	n has a 10% or greate	r interest.			
	N /2							
	N/A Information Regardin	a Contribution Grant	Gift Loan Scholarch	nin etc. Programs:		-		
-	Č	•		• •	:			
	Check here ▶ if the unsolicited requests f	ne roundation only i for funds. If the foun	nakes contributions dation makes difts o	io preselecteu char irants etc (see naci	e 28 of the in-	ions an	ia aces i ns) to ind	ividuals or
	organizations under ot				0 20 01 1110 1111) (i do(ioi	10) (0 1110	Widdaio oi
					no addroseod			
а	The name, address, a ATTACHMI	-	of the person to whor	n applications should t	Je addressed			
b	The form in which app	lications should be su	bmitted and information	on and materials they	should include.		_	
	NO SPECIFI	C FORM IS REQUI	IRED.					
c	Any submission deadle	· · · · · · · · · · · · · · · · · · ·						
	APPLICATIO	NS ARE ACCEPTEI	O AT ANY TIME.					
d	Any restrictions or li			aphical areas, charita	able fields, kind	ds of 11	nstitutions	, or other
	factors			,	-,			
	ATTACHMI	LNT 14						

Part XV Supplementary Information (co	ontinued)			
3 Grants and Contributions Paid Duri	ng the Year or Appr		uture Payment	
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	7.1100.11
a Paid during the year				
ATTACHMENT 15				
			<u> </u>	F7C 045
Total	· · · · · · · · · · · · · · · · · · ·		<u>▶ 3a</u>	576,045.
b Approved for future payment				
	,			
		<u> </u>		
Total			▶ 3b	

Program service revenue				section 512, 513, or 514	(e) Related or exempt function income
•	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(See page 28 of the instructions.)
b					
С					
d					
e					
f					
g Fees and contracts from government agencie	es				
Membership dues and assessments					
Interest on savings and temporary cash investmen				05.6.600	
Dividends and interest from securities			14	256,603.	
Net rental income or (loss) from real estate					
a Debt-financed property			-		
b Not debt-financed property			-		
Net rental income or (loss) from personal property	· -				-
Other investment income	1		1.0	1 411 160	
Gain or (loss) from sales of assets other than inver			18	-1,411,168.	
Net income or (loss) from special events .					
Gross profit or (loss) from sales of inventory					
Other revenue a b ATTACHMENT 16	- 			18,481.	
	_			10,401.	
c	1				* * **
d	-				
e				-1,136,084.	
Subtotal Add columns (b), (d), and (e)					-1,136,084
Total. Add line 12, columns (b), (d), and (e) se worksheet in line 13 instructions on page			• • • • • • •	13	1,130,00
· 1 · · · · · · · · · · · · · · · · · ·					ributed importantly
	ctivity for whi	ch income is report	ed in column	(e) of Part XVI-A cont	
Explain below how each a the accomplishment of the	ctivity for whi	ch income is report	ed in column	(e) of Part XVI-A cont	
ne No. Explain below how each a the accomplishment of the	ctivity for whi	ch income is report	ed in column	(e) of Part XVI-A cont	
Explain below how each a the accomplishment of the	ctivity for whi	ch income is report	ed in column	(e) of Part XVI-A cont	
Explain below how each a the accomplishment of the	ctivity for whi	ch income is report	ed in column	(e) of Part XVI-A cont	
Explain below how each a the accomplishment of the	ctivity for whi	ch income is report	ed in column	(e) of Part XVI-A cont	
Explain below how each a the accomplishment of the	ctivity for whi	ch income is report	ed in column	(e) of Part XVI-A cont	
Explain below how each a the accomplishment of the	ctivity for whi	ch income is report	ed in column	(e) of Part XVI-A cont	
Explain below how each a the accomplishment of the	ctivity for whi	ch income is report	ed in column	(e) of Part XVI-A cont	
Explain below how each a the accomplishment of the	ctivity for whi	ch income is report exempt purposes (ed in column (other than b	(e) of Part XVI-A cont	
Explain below how each a the accomplishment of the	ctivity for whi	ch income is report	ed in column (other than b	(e) of Part XVI-A cont	
Explain below how each a the accomplishment of the	ctivity for whi	ch income is report exempt purposes (ed in column (other than b	(e) of Part XVI-A cont	
Explain below how each a the accomplishment of the	ctivity for whi	ch income is report exempt purposes (ed in column (other than b	(e) of Part XVI-A cont	
Explain below how each a the accomplishment of the	ctivity for whi	ch income is report exempt purposes (ed in column (other than b	(e) of Part XVI-A cont	
Explain below how each a the accomplishment of the	ctivity for whi	ch income is report exempt purposes (ed in column (other than b	(e) of Part XVI-A cont	
Explain below how each a the accomplishment of the	ctivity for whi	ch income is report exempt purposes (ed in column (other than b	(e) of Part XVI-A cont	
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Explain below how each a the accomplishment of the	ctivity for whi	ch income is report exempt purposes (ed in column (other than b	(e) of Part XVI-A cont	
ne No. Explain below how each a the accomplishment of the	ctivity for whi	ch income is report exempt purposes (ed in column (other than b	(e) of Part XVI-A cont	
ne No. Explain below how each a the accomplishment of the	ctivity for whi	ch income is report exempt purposes (ed in column (other than b	(e) of Part XVI-A cont	
Explain below how each a the accomplishment of the	ctivity for whi	ch income is report exempt purposes (ed in column (other than b	(e) of Part XVI-A cont	

Form	990-PF	(2009)					03-035	4374		Р	age 13
Pa	rt XVII	Information Exempt Org		ransfers To an	d Transa	ctions	and Re	elationships With	Nonc		
1 a	in sec	ne organization direct ction 501(c) of the (zations? ers from the reporting	Code (other than	section 501(c)(3)	organizations	with a	any other section 5	organization described 27, relating to politica	1	Yes	No
а		-			_				1a(1)		Х
									- 1		X
b		transactions								ļ —	
	(1) Sa	les of assets to a nonc	haritable exempt	organization					. 1b(1)		X
											Х
	(3) Re	ental of facilities, equipr	nent, or other asse	ets					. 1b(3)		X
	(4) Re	imbursement arrangen	ents						. 1b(4)	<u> </u>	X
											X
										<u> </u>	X
										<u> </u>	X
đ		<u>-</u>		•	_			(b) should always sho			
		-		= -	-			foundation received les			
	value	in any transaction t	or snaring arran	gement, snow in co	olumn (a) tn	e value	or the g	goods, other assets, o	r servic	es re	ceived.
(a) l	ine no	(b) Amount involved	(c) Name of	nonchantable exempt orga	anization	(d) Des	cription of t	transfers, transactions, and sl	nanno ama	angeme	ents
		N/A				N/A					
											
									•		
		÷	!					·			
	.	·									
		•					•				
				•					····	_	
	section	n 501(c) of the Code (of	her than section s			ore tax-e	exempt or	ganizations described in		es [× No
	ii res	(a) Name of organization	Man.	(b) Type of o	roanization			(c) Description of relation	nshin		
		(4) 1121110 01 01 9211124		(2) 1) po oi o	gameaton	-		(b) Description of relate	иопр		
	-			- 15 - 55 -							
		-							-		
		penalties of perjury, I dec t is true, correct, and cor	lare that I have ex aplete Declaration	amined this return, incluing preparer (other than ta	ding accompar expayer or fidu	lying sched clary) is ba	dules and sales and s	statements, and to the best information of which prepa	of my k rer has a	nowled	ge and wledge
e e	Sig	nature of officer or trustee				Date	<i>l</i>	Title			
Sign Here	Paid Preparer's Use Only	Preparer's signature	anta	S CPA	Date	/ /&	Check i self-em	page 30 o P0064	See Sign If the insti 1183	áture o	
	Prep Use	Firm's name (or yours i	·	ER ATTIG & PLA ENNEDY DRIVE,		2166		EIN ▶ 20-368	ZU35		
	_	self-employed), address and ZIP code		BURLINGTON,	VT		407-21	66 Phone no 802-	383-0	399	
									_ ^^		

ATTACHMENT 1

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

NET INVESTMENT INCOME	252,862. 3,281. 460.	256, 603.
REVENUE AND EXPENSES PER BOOKS	252,862. 3,281. 460.	256,603.
		TOTAL
DESCRIPTION	DIVIDENDS OTHER INTEREST US INTEREST	

OTHER INCOME i PART I FORM 990PF,

ENTITIES	•
S) FROM PASS-THROUGH	SHIP FEE REIMBURSEMENT TAX REFUND
DESCRIPTION INCOME (LOS	PARTNERSHIP FEDERAL TAX

	NET	INVESTMENT	INCOME	-134,967.	119,307.	
REVENUE	AND	EXPENSES	PER BOOKS	-134,967.	119,307.	34.141

18,481.

TOTALS

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HOEHL FAMILY FOUNDATION

	CHARITABLE PURPOSES		0
	ADJUSTED NET INCOME		0.
	NET INVESTMENT INCOME		0
II	REVENUE AND EXPENSES PER BOOKS	4,350.	4,350.
ACCOUNTING FEES			TOTALS
FORM 990PF, PART I - ACCOUNTING FEES	DESCRIPTION	TAX PREPARATION FEE	

ATTACHMENT 4

HOTHER THIEFT TONDING

FORM 990PF, PART I - OTHER PROFESSIONAL FEES

	NET	INVESTMENT	INCOME	75,886.
REVENUE	AND	EXPENSES	PER BOOKS	75,886.
			DESCRIPTION	ASSET MANAGEMENT FEES

75,886.

75,886.

TOTALS

- TAXES FORM 990PF, PART I

HOEHL FAMILY FOUNDATION

NET INVESTMENT INCOME	15,355.	15,355.
REVENUE AND EXPENSES PER BOOKS	15,355. 12,359.	27,714.
DESCRIPTION	FOREIGN TAX WITHHELD FEDERAL EXCISE TAX PAID	TOTALS

- OTHER EXPENSES PART I FORM 990PF,

ë	INVESTMENT	INCOME	137,752.	
REVENUE	AND EXPENSES	PER BOOKS	137,752.	
		DESCRIPTION OTHER DEDICTIONS FROM PASS-	THROUGH ENTITIES BANK SERVICE CHARGE	

137,752.

137,824.

TOTALS

ATTACHMENT 6

INVESTMENTS	
- OTHER	
II.	
PART	
990PF,	
FORM	

ATTACHMENT 7	ENDING BOOK VALUE FMV	600,376. 11,295,267. 1,474,537. 1,992,519.	13,370,180.
FORM 990PF, PART II - OTHER INVESTMENTS	DESCRIPTION	ROCKEFELLER ALT STRATEGIES FD ROCKEFELLER GLOBAL EQUITY FUND 5500 FUND	TOTALS

ATTACHMENT 8 FORM 990PF, PART II - LOANS FROM OFFICERS, DIRECTORS, ETC. LENDER: ROBERT H. HOEHL, TRUSTEE ORIGINAL AMOUNT: 395,885. INTEREST RATE: 0.000000 REPAYMENT TERMS: SHOW SHORT TERM (DEMAND) REPAID IN 2010 SECURITY PROVIDED: NONE PURPOSE OF LOAN: CASH FLOW BEGINNING BALANCE DUE 395,885. 395,885. TOTAL BEGINNING LOANS FROM OFFICERS, DIRECTORS, ETC. TOTAL ENDING LOANS FROM OFFICERS, DIRECTORS, ETC. 1,885.

FORM 990PF, PART III - OTHER INCREASES IN NET WORTH OR FUND BALANCES

DESCRIPTION

AMOUNT

TAX EXEMPT INCOME FROM PASS-THROUGH

ENTITIES

3.

TOTAL

3.

FORM 990PF, PART III - OTHER DECREASES IN NET WORTH OR FUND BALANCES

DESCRIPTION

AMOUNT

NON DEDUCTIBLE EXPENSES

56.

TOTAL

56.

FORM 990PF, PART VII-A, LINE 8B - EXPLANATION OF NON-FILING

NO FILING REQUIRED.

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

HOEHL FAMILY FOUNDATION

NAME AND ADDRESS

TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION

> 9762 BENTGRASS BEND NAPLES, FL 34108 ROBERT H. HOEHL

TRUSTEE - AS REQUIRED

9762 BENTGRASS BEND CYNTHIA K. HOEHL NAPLES, FL 34108

TRUSTEE - AS REQUIRED

KRYSTIN B. DOWNES 1259 NORTH ROAD TULLY, NY 13159

TRUSTEE - AS REQUIRED

ROBERT F. HOEHL 73 SYDNEY DRIVE ESSEX, VT 05451

TRUSTEE - AS REQUIRED

SOUTH BURLINGTON, VT 05403 JOHN M. HOEHL 1535 SPEAR STREET

TRUSTEE - AS REQUIRED

GRAND TOTALS

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

ROBERT & CYNTHIA HOEHL 9762 BENTGRASS BEND NAPLES, FL 34108 239 593-8324

990PF, PART XV - RESTRICTIONS OR LIMITATIONS ON AWARDS

QUALIFIED CHARITABLE, RELIGIOUS, EDUCATIONAL AND/OR SCIENTIFIC ORGANIZATIONS

ATTACHMENT 15

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
BERGEN CATHOLIC HIGH SCHOOL ORADELL, NJ	NO RELATIONSHIP EXEMPT	GENERAL SUPPORT	500.
BURLINGTON EMERGENCY SHELTER BURLINGTON, VT	NO RELATIONSHIP EXEMPT	GENERAL SUPPORT	5,000
REDLANDS CHRISTIAN MIGRANT ASSOCIATION IMMOKALEE, FL	NO RELATIONSHIP EXEMPT	GENERAL SUPPORT	1,000.
BURLINGTON INTERNATIONAL WATERFRONT BURLINGTON, VT	NO RELATIONSHIP EXEMPT	GENERAL SUPPORT	2,000
CATHOLIC FAITH APPEAL BURLINGTON, VT	NO RELATIONSHIP EXEMPT	GENERAL SUPPORT	10,000
BREAST CANCER 3 DAY BURLINGTON, VT	NO RELATIONSHIP EXEMPT	GENERAL SUPPORT	100

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	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		
	AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
CHALLEHT OF COLLIER COINTY	NO RETAINMENT D	GENERAL SUPPORT	150.
NAPLES, FL	EXEMPT		
CHRISTIAN CHILDREN'S FUND	NO RELATIONSHIP	GENERAL SUPPORT	500.
RICHMOND, VA	EXEMPT		
PURE WATER FOR THE WORLD	NO RELATIONSHIP	GENERAL SUPPORT	000,00
BRATTLEBORO, VT	EXEMPT		
			,
BURLINGTON YMCA	NO RELATIONSHIP	GENERAL SUPPORT	2,500
BURLINGTON, VT	EXEMPT		
			;
THE STERN CENTER	NO RELATIONSHIP	GENERAL SUPPORT	260,000
WILLISTON, VT	EXEMPT		
VT ADULT LEARNING	NO RELATIONSHIP	GENERAL SUPPORT	200
BURLINGTON, VT	EXEMPT		

ATTACHMENT 15 (CONT'D)

3.15 30 PM

MWN07R 771P 8/10/2010

FURT 390FF, FARI AV - GRANIS AND CONTRIBUTIONS FALD DOLLING THE LEAR	סטניואס וחב ובמת		ATTACHMENT 15 (CONT'D)
	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		
	AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
TS JOSEPH TNDIAN SCHOOL	ON RELATIONSHIP	GENEBAL GIIBBORT	о С
CHAMBERLAIN, SD	EXEMPT		
FRANCISCAN MISSION ASSOCIATION	NO RELATIONSHIP	GENERAL SUPPORT	150
WASHINGTON, DC	EXEMPT		
HOSPITAL ALBERT SCHWEITZER	NO RELATIONSHIP	GENERAL SUPPORT	200
PITTSBURGH, PA	EXEMPT		
IMMOKALEE FOUNDATION	NO RELATIONSHIP	GENERAL SUPPORT	5,000
IMMOKALEE, FL	EXEMPT		
HABITAT FOR HUMANITY	NO RELATIONSHIP	GENERAL SUPPORT	.000,00
NAPLES, FL	EXEMPT		
MEALS ON WHEELS	NO RELATIONSHIP	GENERAL SUPPORT	1,000
BURLINGTON, VT	EXEMPT		

ATTACHMENT 15 (CONT'D)

RECIPIENT NAME AND ADDRESS HOLY CROSS SCHOOL PORTLAND, OR PRESERVATION TRUST OF VERMONT BURLINGTON, VT	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT NO RELATIONSHIP EXEMPT NO RELATIONSHIP EXEMPT	PURPOSE OF GRANT OR CONTRIBUTION GENERAL SUPPORT GENERAL SUPPORT	5,000
	NO RELATIONSHIP EXEMPT	GENERAL SUPPORT	100.
	NO RELATIONSHIP EXEMPT	GENERAL SUPPORT	100.
	NO RELATIONSHIP EXEMPT	GENERAL SUPPORT	2,000.
	NO RELATIONSHIP EXEMPT	GENERAL SUPPORT	2,000.

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ATTACHMENT 15 (CONT'D)

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

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
FRATERNAL ORDER OF POLICE NASHVILLE, TN	NO RELATIONSHIP EXEMPT	GENERAL SUPPORT	50.
POLICE PROTECTIVE FUND AUSTIN, TX	NO RELATIONSHIP EXEMPT	GENERAL SUPPORT	25
ST JOHN VIANNEY SOUTH BURLINGTON, VT	NO RELATIONSHIP EXEMPT	GENERAL SUPPORT	5,000
SOCIETY OF ST EDMUND COLCHESTER, VT	NO RELATIONSHIP EXEMPT	GENERAL SUPPORT	1,000.
CHRISTIAN APPALACHIAN PROGRAM MT VERNON, KY	NO RELATIONSHIP EXEMPT	GENERAL SUPPORT	100.
CYSTIC FIBROSIS FOUNDATION BETHESDA, MD	NO RELATIONSHIP EXEMPT	GENERAL SUPPORT	50.

FURM STUFF, FARI AV - GRANIS AND CONINIBULIONS FALD DUKLNG INE IEAK	DUKING THE TEAR		ATTACHMENT 15 (CONT'D)
	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		
	AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
DISMAS HOUSE	NO RELATIONSHIP	GENERAL SUPPORT	5,000
BURLINGTON, VT	EXEMPT		
AMERICAN LEGION	NO RELATIONSHIP	GENERAL SUPPORT	100
BURLINGTON, VT	EXEMPT		
	-		
NATIONAL WHEELCHAIR BASKETBALL ASSOCIATION	NO RELATIONSHIP	GENEAL SUPPORT	50
COLORADO SPRINGS, CO	EXEMPT		
ST JOSEPH'S HOUSE	NO RELATIONSHIP	GENERAL SUPPORT	2,000.
BURLINGTON, VI	ЕХЕМРТ		
VT FALLEN HEROES	NO RELATIONSHIP	GENERAL SUPPORT	5,000
ESSEX JUNCTION, VT	EXEMPT		
AMERICA'S SECOND HARVEST	NO RELATIONSHIP	GENERAL SUPPORT	10,100.
CHICAGO, IL	EXEMPT		

ATTACHMENT 15 (CONT'D)

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PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR	į	١
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	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		
	AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
SAVE THE CHILDREN	NO RELATIONSHIP	GENERAL SUPPORT	20,000
DIOCESE OF VENICE	NO RELATIONSHIP	GENERAL SUPPORT	2,000.
VENICE, FL	EXEMPT		
JUST GIVE	NO RELATIONSHIP	GENERAL SUPPORT	15,160.
SAN FRANCISCO, CA	EXEMPT		
BISHOP'S FUND	NO RELATIONSHIP	GENERAL SUPPORT	15,000.
BURLINGTON, VT	EXEMPT		
CATHOLIC CHARITIES	NO RELATIONSHIP	GENERAL SUPPORT	25,000
BURLINGTON, VT	EXEMPT		
FOOD FOR THE POOR	NO RELATIONSHIP	GENERAL SUPPORT	2,000.
COCONUT CREEK, FL	EXEMPT		

MWN07R 771P 8/10/2010

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

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		
	AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
THE BEFACE CANCED SOLITHV	N PETATIONCHE	Tangara (Tangara)	۳ ن
MESA, AZ	EXEMPT		3
COVENANT HOUSE	NO RELATIONSHIP	GENERAL SUPPORT	10,000
NEW YORK, NY	ЕХЕМРТ		
HEALING HANDS INTERNATIONAL	NO RELATIONSHIP	GENERAL SUPPORT	1,000
NASHVILLE, TN	EXEMPT		
SALVATION ARMY	NO RELATIONSHIP	GENERAL SUPPORT	200
BURLINGTON, VT	EXEMPT		
COLLIER PREGNANCY CENTER	NO RELATIONSHIP	GENERAL SUPPORT	2,000.
NAPLES, FL	EXEMPT		
BOYS TOWN	NO RELATIONSHIP	GENERAL SUPPORT	75.
BOYS TOWN, NE	EXEMPT		

ATTACHMENT 15 (CONT'D)

ATTACHMENT 15 (CONT'D)

THE YEAR	
THE	
PAID DURING	
PAID	
AND CONTRIBUTIONS	
AND	
GRANTS	
ı	
≳	
PART	
FORM 990PF,	

	AMOUNT	2,000	20,000.	1,000	200	2,000	5,000.
	PURPOSE OF GRANT OR CONTRIBUTION	GENERAL SUPPORT	GENERAL SUPPORT	GENERAL SUPPORT	GENERAL SUPPORT	GENERAL SUPPORT	GENERAL SUPPORT
RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND	FOUNDATION STATUS OF RECIPIENT	NO RELATIONSHIP EXEMPT	NO RELATIONSHIP EXEMPT	NO RELATIONSHIP EXEMPT	NO RELATIONSHIP EXEMPT	NO RELATIONSHIP EXEMPT	NO RELATIONSHIP EXEMPT
	RECIPIENT NAME AND ADDRESS	SPECTRUM YOUTH BURLINGTON, VT	OPPORTUNITY INTERNATIONAL OAKBROOK, IL	SHELBURNE FARMS SHELBURNE, VT	LAKE CHAMPLAIN MARITIME MUSEUM BASIN HARBOR, VT	WISCONSIN LUTHERAN MILWAUKEE, WI	FEED MY STARVING CHILDREN COON RAPIDS, MN

V 09-7 1

V 09-7 1

3 15 30 PM MWN07R 771P 8/10/2010

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

RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR

FOUNDATION STATUS OF RECIPIENT

PURPOSE OF GRANT OR CONTRIBUTION

1,000

AMOUNT

ATTACHMENT 15 (CONT'D)

RECIPIENT NAME AND ADDRESS

VERMONT - SCAM SHIELD WINTER SPRINGS, FL

NO RELATIONSHIP

EXEMPT

GENERAL SUPPORT

10,000.

BURLINGTON, VT UNITED WAY

NO RELATIONSHIP EXEMPT

GENERAL SUPPORT

576,045.

TOTAL CONTRIBUTIONS PAID

ATTACHMENT 15

PAGE 39

RELATED OR EXEMPT FUNCTION INCOME

AMOUNT

EXCLUSION

AMOUNT

BUSINESS

-134,967. 119,307. 34,141.

01

18,481.

FORM 990-PF, PART XVI-A - ANALYSIS OF OTHER REVENUE

				7-60
				>
				РМ
	ω ω			3:15:30
				15
	ENTITIES			: %
	FROM PASS-THROUGH FEE REIMBURSEMENT REFUND			8/10/2010
1	E FROM FEE RE REFUNI			771P
DESCRIPTION	OTHER INCOME PARTNERSHIP FEDERAL TAX	TOTALS		MWNO7R
				Į.

ATTACHMENT 16

SCHEDULE D . (Form 1041)

Department of the Treasury Internal Revenue Service

Capital Gains and Losses

► Attach to Form 1041, Form 5227, or Form 990-T. See the instructions for Schedule D (Form 1041) (also for Form 5227 or Form 990-T, if applicable).

OMB No 1545-0092

2009

Name of estate or trust Employer identification number HOEHL FAMILY FOUNDATION 03-0354374 Note: Form 5227 filers need to complete only Parts I and II. Short-Term Capital Gains and Losses - Assets Held One Year or Less (e) Cost or other basis (f) Gain or (loss) for (a) Description of property (b) Date acquired (c) Date sold (d) Sales once (see page 4 of the instructions) the entire year (Example 100 shares 7% preferred of "Z" Co.) (mo, day, yr) (mo, day, yr) Subtract (e) from (d) 1a **b** Enter the short-term gain or (loss), if any, from Schedule D-1, line 1b 1b Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824 Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts -513,075.3 Short-term capital loss carryover. Enter the amount, if any, from line 9 of the 2008 Capital Loss Net short-term gain or (loss). Combine lines 1a through 4 in column (f). Enter here and on line 13, -513,075. Long-Term Capital Gains and Losses - Assets Held More Than One Year (e) Cost or other basis (f) Gain or (loss) for (a) Description of property (b) Date acquired (c) Date sold the entire year Subtract (e) from (d) (d) Sales price (see page 4 of the (Example 100 shares 7% preferred of "Z" Co) (mo, day, yr) (mo, day, yr) instructions) 6a **b** Enter the long-term gain or (loss), if any, from Schedule D-1, line 6b..... 12,079. Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824 -910,172. Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts Capital gain distributions 9 10 10 Long-term capital loss carryover. Enter the amount, if any, from line 14 of the 2008 Capital Loss 11 Net long-term gain or (loss). Combine lines 6a through 11 in column (f) Enter here and on line 14a, -898,093. column (3) on the back.

For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

Schedule D (Form 1041) 2009

Sche	dule D. (Form 1041) 2009			Page 2
Pa	Summary of Parts I and II Caution: Read the instructions before completing this part.	(1) Beneficiaries' (see page 5)	(2) Estate's or trust's	(3) Total
13	Net short-term gain or (loss)			-513,075.
	Net long-term gain or (loss):			
а	Total for year			-898,093.
	Unrecaptured section 1250 gain (see line 18 of the wrksht.) 14b			_
C	28% rate gain			-1,411,168.
	Total net gain or (loss). Combine lines 13 and 14a	T Dod I loo do Who		
	e: If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4 (or Form 990 art V, and do not complete Part IV. If line 15, column (3), is a net loss, complete Part IV a			
	rt IV Capital Loss Limitation		, , , , , , , , , , , , , , , , , , , ,	
	Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, Part I, li	ne 4c. if a trust), the si	maller of:	
				3,000;
Note	The loss on line 15, column (3) or b \$3,000	e 22 (or Form 990-T, I	ine 34), is a loss, com	plete the Capital Loss
	rover Worksheet on page 7 of the instructions to figure your capital loss carryover Tax Computation Using Maximum Capital Gains Rates			
	n 1041 filers. Complete this part only if both lines 14a and 15 in column (2	l) are daine or an ar	nount is entered in	Part Lor Part II and
	e is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is more than		nount is entered in	raitioi raitii ailu
Cau	tion: Skip this part and complete the worksheet on page 8 of the instructions			
	ther line 14b, col. (2) or line 14c, col. (2) is more than zero, or			
	oth Form 1041, line 2b(1), and Form 4952, line 4g are more than zero.	ما المارية المارية المارية المارية المارية		
	n 990-T trusts. Complete this part only if both lines 14a and 15 are gain form 990-T, and Form 990-T, line 34, is more than zero. Skip this part and			
	er line 14b, col (2) or line 14c, col. (2) is more than zero.	complete the work	oncer on page o o	
17	Enter taxable income from Form 1041, line 22 (or Form 990-T, line 34)	17		·-·
18	Enter the smaller of line 14a or 15 in column (2)			
	but not less than zero			
19	Enter the estate's or trust's qualified dividends		<u> </u>	
	from Form 1041, line 2b(2) (or enter the qualified			
	dividends included in income in Part I of Form 990-T) 19			
20	Add lines 18 and 19	_		
21	If the estate or trust is filing Form 4952, enter the			
	amount from line 4g, otherwise, enter -0 ▶ 21	<u> </u>		
22	Subtract line 21 from line 20 If zero or less, enter -0	· · · · · · · · · · · · · · · · · · ·		
23	Subtract line 22 from line 17. If zero or less, enter -0-	23		
21	Enter the smaller of the amount on line 17 or \$2,300	24		
25	Is the amount on line 23 equal to or more than the amount on line 24?	24		
	Yes. Skip lines 25 and 26, go to line 27 and check the "No" box.			
	No. Enter the amount from line 23	25		
26	Subtract line 25 from line 24	26		
27	Are the amounts on lines 22 and 26 the same?			
	Yes. Skip lines 27 thru 30, go to line 31 No. Enter the smaller of line 17 or line 22	27		
28	Enter the amount from line 26 (If line 26 is blank, enter -0-)	28		
	• • • • • • • • • • • • • • • • • • • •			
29	Subtract line 28 from line 27			
30	Multiply line 29 by 15% (15)			
31	Figure the tax on the amount on line 23. Use the 2009 Tax Rate Sch			
	(see the Schedule Ginstructions in the instructions for Form 1041)		31	
32	Add lines 30 and 31		32	
33	Figure the tax on the amount on line 17 Use the 2009 Tax Rate Sch			
	(see the Schedule Ginstructions in the instructions for Form 1041)			
34	Tax on all taxable income. Enter the smaller of line 32 or line 33 here a			
	G, line 1a (or Form 990-T, line 36)	•		
				lo D /Form 10/1\ 2000

Name of estate or trust as shown on Form 1041. Do not enter name and employer identification number if shown on the other side **Employer identification number** HOEHL FAMILY FOUNDATION 03-0354374 Long-Term Capital Gains and Losses - Assets Held More Than One Year (d) Sales price (see page 4 of the instructions) (e) Cost or other basis (b) Date (a) Description of property (Example: 100 sh 7% preferred of "Z" Co.) (c) Date sold (f) Gain or (loss) Subtract (e) from (d) acquired (mo , day, yr) (see page 4 of the instructions) (mo., day, yr) 6a LITIGATION PROCEEDS **VARIOUS VARIOUS** 12,079. 12,079.

12,079.

FORM 990-PF - PART IV

Kind of Property		INS AND LOSSES FOR TAX ON INVEST Description				2 5 0	Date acquired	Date sold
Gross sale price less expenses of sale	Depreciation allowed/ allowable	Cost or other basis	FMV as of 12/31/69	Adj basis as of 12/31/69	Excess of FMV over adj basis		Gain or (loss)	
		TOTAL SHORT PARTNERSHIE ESTATES OR	T-TERM COMMO	ON TRUST FU			-513,075.	
		TOTAL LONG- PARTNERSHIE ESTATES OR	, s corpor	ATION, AND			-910,172.	
12,079.		LITIGATION PROPERTY TY		TIES		Р	VARIOUS 12,079.	VARIOUS
OTAL GAIN(L	oss)						-1411168.	
							;	
						. !		

Form 8.868

Department of the Treasury

(Rev April 2009)

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return

OMB No 1545-1709

itemai Revenue S	ervice							
If you are f	iling for an Automatic 3-N	Ionth Extension, cor	nplete only Part I and ched	ck this box			X	
			h Extension, complete on I an automatic 3-month ext					
Part I Auto	matic 3-Month Extens	ion of Time. Only s	submit original (no copies	s needed)				
corporation	required to file Form 990	-T and requesting an	automatic 6-month extens	ion - check this b	oox and comp	olete		
Part I only			• • • • • • • • • • • • • • • • • • • •			▶		
	orations (including 1120- ome tax returns	-C filers), partnership	os, REMICs, and trusts mu	ust use Form 7	004 to requ	iest an extens	ion of	
one of the ref electronically i eturns, or a co	turns noted below (6 m f (1) you want the addit omposite or consolidated	onths for a corpora ional (not automatic) From 990-T Instead	le Form 8868 if you want tion required to file Form i 3-month extension or (2) I, you must submit the full sit www irs gov/efile and cl	990-T) Howev you file Forms y completed and	er, you can 990-BL, 60 d signed pag	not file Form 69, or 8870, e 2 (Part II) of	8868 group	
ype or	Name of Exempt Organiza	tion			Employer identification number			
orint	HOEHL FAMILY FOUNDATION			03-0354374				
ile by the	Number street and room or suite no. If a P.O. box see instructions							
ue date for	9762 BENTGRAS	SS BEND						
ling your eturn See istructions	See City, town or post office, state, and ZIP code. For a foreign address, see instructions							
Check type o	f return to be filed (file a	separate application	for each return)					
Form 990		Form 990-T (corpo	pration)	For	rm 4720			
Form 990	-BL	Form 990-T (sec	401(a) or 408(a) trust)	Foi	rm 5227			
Form 990	-EZ	Form 990-T (trust	other than above)	Foi	rm 6069			
X Form 990	-PF	Form 1041-A		Foi	m 8870			
If the organ If this is for or the whole games and Ell I reques until	a Group Return, enter the group, check this box. • Ns of all members the extension of the	office or place of buse organization's four of the organization's four of the organization's for part tension will cover the organization of the o	FAX No siness in the United States, digit Group Exemption Num of the group, check this bor a corporation require npt organization return for ,, and ending,	ber (GEN) x ▶ ar	•	extension of		
	year is for less than 12 r			Final return		accounting pe	eriod	
			4720, or 6069, enter th	e tentative tax,	less any	. 00	2 ^	
	nonrefundable credits. See instructions. 3a \$ 8920							
b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments								
	made Include any prior year overpayment allowed as a credit 3b \$ 920							
c Balance Due. Subtract line 3b from line 3a Include your payment with this form, or, if required, deposit								
with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System) See								
instructio			<u> </u>				10	
=	• •	ectronic fund withdrav	wal with this Form 8868, se	ee Form 8453-E	O and Form	8879-EO ′		
or payment instructions For Privacy Act and Paperwork Reduction Act Notice, see Instructions. Form 8868 (Rev 4-2009)								
or Privacy A	cı and Paperwork Reduc	LION ACT NOTICE, SEE	instructions.		F	om 8868 (Rev	4-2009)	

DANAHER ATTIG & PLANTE PLC PO BOX 2166 SOUTH BURLINGTON, VT 05407

Form 8868 (Rev 4-2009) Page 2						
If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this box						
Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868						
	are filing for an Automatic 3-Month Extension, complete only Part I (on page					
Part II	Additional (Not Automatic) 3-Month Extension of Time. Only					
Type or	Name of Exempt Organization	Employer Identification number 03-0354374				
print	NOEND PARTET FOUNDATION					
File by the		For IRS use only				
extended due date f	9762 BENTGRASS BEND	2000				
filing the return Sec	City, town or post office, state, and ZIP code. For a foreign address, see instructions.					
instruction						
Check t	ype of return to be filed (File a separate application for each return)					
F	orm 990 X Form 990-PF	Form 1041-A Form 6069				
F	orm 990-BL Form 990-T (sec 401(a) or 408(a) trust)	Form 4720 Form 8870				
	orm 990-EZ Form 990-T (trust other than above)	Form 5227				
	Do not complete Part II if you were not already granted an automatic 3-mo	onth extension on a previously filed Form 8868.				
• The b	pooks are in the care of ROBERT H. HOEHL					
Telep	hone No. ▶ 239 593-8324 FAX No. ▶					
	organization does not have an office or place of business in the United States,	check this box				
If this	is for a Group Return, enter the organization's four digit Group Exemption Num	ber (GEN) If this is				
for the whole group, check this box						
list with the names and EINs of all members the extension is for.						
4 In	equest an additional 3-month extension of time until11/15/2010					
5 Fc	or calendar year 2009, or other tax year beginning	and ending				
6 If this tax year is for less than 12 months, check reason. Initial return Final return Change in accounting period						
7 St	ate in detail why you need the extension ADDITIONAL TIME IS NEED					
IN	INFORMATION NECESSARY TO COMPLETE AND FILE AN ACCURATE RETURN.					
8a If	this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the					
nonrefundable credits. See instructions						
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 and any amount paid						
tax payments made. Include any prior year overpayment allowed as a credit and any amount paid						
previously with Form 8868.						
c Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit						
with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. 8c \$						
Signature and Verification						
Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief,						
it is true, correct, and complete, and that I am authorized to prepare this form.						
	120165,004	ent Stole				
Signature	Title > A	Date V				
DANAHER ATTIG & PLANTE PLC Form 8868 (Rev. 4-2009)						
	150 KENNEDY DRIVE PO BOY 2166					

150 KENNEDY DRIVE, PO BOX 2166 SOUTH BURLINGTON, VT 05407-2166