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OMB No. 1545-0052

Return of Private Foundation
or Section 4947(a)(1) Nonexempt Charitable Trust
Treated as a Private Foundation
on may be able to use a copy of this return to satisfy state rer 2009 -

	ar year 2009, d	or tax year begi				, and end			, 20
G Check a	Il that apply:	Initial retur			of a former p	oublic cha	<del>-</del> -		Final return
	- Fig	Amended r	eturn	X Addre	ss change			me change	
	Name of fou	Indation					1	A Employer Identific	cation number
Use the IR		TOUALTOING	нт сто	RY, INCORPORA	ren		1	03-	0355660
label. Otherwise	<b></b>			mail is not delivered to stree		Room/su	uta I	3 Telephone number (see	
print	Number and	Street (or P.O. box	numbern	man is not denvered to stree	t audiess)	1 Nooninse	ine   '	2 I Brebuone number (see	page 10 of the analoguous)
or type.	P.O. BOX	x 190				ļ		(80	2) 985-3575
See Specif	City or town	, state, and ZIP cod		<del></del>		<u> </u>	- 1	If exemption applicat	
Instruction	s. Only or town,	, state, and zii ooc					- 1.	pending, check here	····· [-
	SHELBURN	NE, VT 0548	2				Ţ,	<ol> <li>1. Foreign organizati</li> <li>2. Foreign organizati</li> </ol>	
H Check to				c)(3) exempt private	foundation			85% test, check he computation	ere and attach
		nexempt chantable		Other taxable p		tion		•	
	ket value of all	assets at end	J Acco	unting method X C		crual	E	If private foundation under section 507(b)	- I
	from Part II, col			ther (specify)					in a 60-month termination
16) ▶ \$		19,487.	(Part I,	column (d) must be or	n cash basis.)	- <b>-</b>	'		(1)(B), check here .
Part I An	alysis of Reve	nue and Expens	es (The					A at a section of	(d) Disbursements
tota	I of amounts in c	olumns (b), (c), and equal the amounts	d (d)	(a) Revenue and expenses per	(b) Net inve		(c)	Adjusted net income	for charitable purposes
ma col	y not necessarily ımn (a) (see pag	equal the amounts ie 11 of the instruct	ions).)	books	Incom				(cash basis only)
		etc , received (attach sch foundation is <b>not</b> requ		54,473		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1.		
2 Chec	k ▶ ☐ if the f	foundation is <b>not r</b> equ	ired to		- 1 - 1 - 1 - 1 - 1 - 1	- 1 1mg			
3 Inter		temporary cash inves	- · ·				ļ		1.1.1111
4 Divi	dends and intere	est from securities							
5a Gros	s rents		}	·					<u> </u>
b Net	ental income or (lo	ss)					-=		
6a Net	gain or (loss) from	sale of assets not on I	ine 10				<u></u>	- ( ] ] ] ]	
b Gros	s sales price for all ts on line 6a						1, 45		
6a Net of Gross asset 7 Cap	ital gain net ınco	ome (from Part IV, I	ne 2) .		<u> </u>				
8 Net		al gain			Ar. 45				
		s · · · · · · ·			1 2			<del></del>	
	s sales less retums allowances			g year gr					
1	Cost of goods sold			<u> </u>				<u> </u>	
		(attach schedule)		<del></del>	- · · ·		ļ		F. F.
T .		h schedule)		54,473	<del>                                     </del>		<u> </u>		
		rough 11	1	0 0					
		rs, directors, trustees,		_ <del></del>	<del> </del>		<del> </del>		
14 Oth		aries and wages .	• • • • {	_ <del></del>	<del> </del>		<del> </del>		
	sion plans, empl	hedule) ATCH	· i · · · l	1,873	<u> </u>	0.		0.	
K loa Leg		rach schedule) <sup>ATCI</sup>		570	<del> </del> -	Ō.	t	0.	<del></del>
	ounting rees (att	es Zettach schedul	.,*	21,082	<del>                                     </del>				21,0
17 Into	BECEIV	es fattach schedul	ا ا	<u> </u>	<del>                                     </del>		<u> </u>		
18 ctaxe		(see page 1970 the inst	1		<del> </del>				
19 (Oep					<del> </del>				L. L.
20 700	upancy	( <b>stif</b> ) edule) and dei	Siedoii.	11,030	1				11,0
21 Tre	el, conterences,	and meetings			1				
8 22 Prin									
23 Oth		ach schedule) ATC	Н 4	14,590	Ţ			_	13,7
ا مت		i administrative ex							
hhA lo	-	h 23		49,145	1	0.	[	0.	45,8
25 Cor		grants paid							
1	=	rsements. Add lines 24		49,145		0.		0.	45,8
$\overline{}$	tract line 26 from								≤
· ·		penses and disburseme	ents	5,328	]	- '	-		
1		ome (if negative, en				-0-	-	and grants	r za 🔩
			/				T	-0-	

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

For Privacy Act and Paperwork Reduction Act Notice, see page 30 of the instructions. \* ATCH 3 JsA 9E1410 1 0000 0913AM 771P 6/28/2010 12:54:54 PM V 09-6.4

Form 990-PF (2009) PAGE 1

В	art I	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End o	of year
_		amounts only (See instructions.)	i (a) book value i	(b) Book Value	
	1	Cash - non-interest-bearing	14,159.	19,487.	19,487.
	2	Savings and temporary cash investments			
	3	Accounts receivable			
		Less: allowance for doubtful accounts			
	4	Pledges receivable	٠,-		-
		Less: allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see page 16 of the instructions)			
	7	Other notes and loans receivable (attach schedule)			-
	-	Less: allowance for doubtful accounts		~ #	• • • • • • • • • • • • • • • • • • • •
<b>,</b>	8	Inventones for sale or use			
Assets	9	Prepaid expenses and deferred charges			
188	10 a	Investments - U S. and state government obligations (attach schedule)			
`		Investments - corporate stock (attach schedule)			
		Investments - corporate bonds (attach schedule)			
	11	Investments - land, buildings,			
		and equipment basis Less accumulated depreciation (attach schedule)	la mandamani da la Maria.	11	
	12	(attach schedule)			
	13				
	14	Investments - other (attach schedule)  Land, buildings, and equipment: basis  Less accumulated depreciation [attach schedule] [11,704].			ATCH-5.
		equipment: basis Less accumulated depreciation   11,704.			
	15	(attach schedule) Other assets (describe			
	16	Total assets (to be completed by all filers - see the			
	10	instructions. Also, see page 1, item I)	14,159.	19,487.	19,487.
_	17	Accounts payable and accrued expenses			13,101
	18				
m	19	Grants payable			
Liabilities	20	Deferred revenue			
三	21	Loans from officers, directors, trustees, and other disqualified persons		<u></u>	. 1
Ë	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe			
	23	Total liabilities (add lines 17 through 22)			
_		To the second se		<del></del>	
		Foundations that follow SFAS 117, check here ▶ and complete lines 24 through 26 and lines 30 and 31.			
Ś		,			-
ဦ	24	Unrestricted			
ョョ	25	Temporarily restricted	i i		
Ã	26	Permanently restricted	+	<del>-</del>	
Ĕ	24 25 26	Foundations that do not follow SFAS 117,			
F		check here and complete lines 27 through 31. ▶ X	.		3
0	27	Capital stock, trust principal, or current funds			
Net Assets	28	Paid-in or capital surplus, or land, bldg , and equipment fund	14,159.	19,487.	- <u> </u>
Ass	29	Retained earnings, accumulated income, endowment, or other funds	14,133.	13,401.	
e t	30	Total net assets or fund balances (see page 17 of the	14,159.	19,487.	,
Z		instructions)	14,139.	15,407.	
	31	Total liabilities and net assets/fund balances (see page 17	14 150	10 407	
		of the instructions)	14,159.	19,487.	427
_		Analysis of Changes in Net Assets or Fund		,	
1		I net assets or fund balances at beginning of year - Part II			14 150
		of-year figure reported on prior year's return)			14,159.
		er amount from Part I, line 27a		2	5,328.
3	Othe	er increases not included in line 2 (itemize)		3	
4	Add	lines 1, 2, and 3			19,487.
		reases not included in line 2 (itemize) ▶	·	5	——————————————————————————————————————
<u>6</u>	Tota	I net assets or fund balances at end of year (line 4 minus	line 5) - Part II, column (b)	), line 30 6	19,487.
					Form 990-PF (2009)

(a) List an	s and Losses for Tax on Inv d describe the kind(s) of property sold ( rick warehouse; or common stock, 200	(e.g., real estate,	(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)		
1a			- BONISSON				
b							
c							
d							
е							
(e) Gross sales price	(e) Gross sales price  (f) Depreciation allowed (or allowable)  (g) Cost or other basis plus expense of sale						
<u>a</u>			ļ				
b			<del> </del>		· · · · · · · · · · · · · · · · · · ·		
С			<u> </u>				
<u>d</u>			ļ				
<u>e</u>		1	<del> </del>				
Complete only for assets s		ned by the foundation on 12/31/69	4 17	Gains (Col (h) g (k), but not less			
(i) F M.V. as of 12/31/69	as of 12/31/09 Over coil. (j), if any						
a			ļ				
b			<u> </u>				
С			ļ				
d			ļ				
е	<u> </u>	<u> </u>	<u> </u>				
2 Capital gain net income or		gain, also enter in Part I, line 7 }	2				
Net short-term capital gair	n or (loss) as defined in sections 12	222(5) and (6).					
If gain, also enter in Part I,	, line 8, column (c) (see pages 13	and 17 of the instructions).	1				
If (loss), enter -0- in Part I,	line 8		3				
		uced Tax on Net Investment In	come				
		outable amount of any year in the b	ase perio	d?	Yes X N		
<del></del>		<del></del>	oforo mak	ing any entries			
(a)		r; see page 18 of the instructions be	elore mak	ing any entries (d)	•		
Base penod years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of nonchantable-use assets		Distribution r (col (b) divided by	col (c))		
2008	19,423.	14,159.	<b>├</b>		1.371778		
2007			ļ <u> </u>				
2006			<del>                                     </del>	· · · ·			
2005			<del> </del>				
2004	<u> </u>		<del>                                     </del>				
Total of line 1, column (d)			2		1.371778		
3 Average distribution ratio	for the 5-year base period - divide	e the total on line 2 by 5, or by the					
number of years the found	dation has been in existence if less	s than 5 years	3		0.685889		
Enter the net value of nor	ncharitable-use assets for 2009 fro	om Part X, line 5	4	<del></del> -	16,571.		
Multiply line 4 by line 3	· · · · · · · · · · · · · · · · · · ·		5		11,366.		
Enter 1% of net investme	nt income (1% of Part I, line 27b)		6				
					11,366.		
If line 8 is equal to or great VI instructions on page	eater than line 7, check the box	in Part VI, line 1b, and complete	that part	using a 1% ta	x rate. See th		

Par	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of	the in	structi	ons)
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.	, ix		
	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			0.
	here ► X and enter 1% of Part I, line 27b		-	- /- [
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4%	<u>.</u> .		يا
	of Part I, line 12, col. (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 2			
3	Add lines 1 and 2			0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 4			0.
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0			0.
6	Credits/Payments:	-	-	,
	2009 estimated tax payments and 2008 overpayment credited to 2009   6a		-	
	Exempt foreign organizations-tax withheld at source 6b 0.		- 3	
	Tax paid with application for extension of time to the (Form 6000).			
ď	Backup withholding erroneously withheld		4 "	^
7	Total credits and payments. Add lines 6a through 6d			0.
8	Enter any penalty for underpayment of estimated tax. Check here If Form 2220 is attached			0.
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
11 Doc	Enter the amount of line 10 to be: Credited to 2010 estimated tax ▶ Refunded ▶ 11			
	t VII-A Statements Regarding Activities	, - <u>s</u> _	T.,	г
18	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	-	Yes	No X
L	participate or intervene in any political campaign?	. <u>1a</u>	<del> </del>	
Ь	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19	1		x
	of the instructions for definition)?	· 1b	11 83	^
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.	-	1,75-	
_	Did to the state of the state point at the state of the s	1c	- "	Х
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:	16		
•	(1) On the foundation (1) any of tax on pointed experiences (section 4933) imposed during the year.	-	1, 2	
_	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed		- 1.4	
•	on foundation managers. > \$		- 1	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		Х
_	If "Yes," attach a detailed description of the activities.			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of			=
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		Х
ь	If "Yes," has it filed a tax return on Form 990-T for this year?	1		Х
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			X
	If "Yes," attach the statement required by General Instruction T.		ءَ ۔	2 J.
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:	-		
	By language in the governing instrument, or	-	- 25	-
	By state legislation that effectively amends the governing instrument so that no mandatory directions that	_		l'
	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	X	
8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the	-	-	,
	instructions) $ ightharpoonup VT$ ,	_		-
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General		_	1
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	Х	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			
	4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV on page		_	1
	27)? If "Yes," complete Part XIV	9	Х	<u> </u>
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			.,
	names and addresses	10		X

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		13	X	L
	Website address WWW.CLIOHISTORY.ORG			
14	The books are in care of KIM ROBISON Telephone no.     802-98	5-35	75 <b>-</b> -	<b>_</b>
	The books are in care of ► KIM ROBISON Telephone no. ► 802-98.  Located at ► PO BOX 415 CHARLOTTE, VT ZIP+4 ► 05445	. <b></b> .		<del></del>
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		<del></del>	
	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?		1	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a		†	
	disqualified person?	. "		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	i		:
	(5) Transfer any income or assets to a disqualified person (or make any of either available for	1		
	the benefit or use of a disqualified person)?	-	,	- 1
	(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.) Yes No	-	1	
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations		-	-
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)?	1b	ļ	A TE
	Organizations relying on a current notice regarding disaster assistance check here	1 2	.]:	
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		
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private	- '	1 1	
	operating foundation defined in section 4942(j)(3) or 4942(j)(5)):	1.5		
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? Yes X No			
	If "Yes," list the years			-
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)	"		
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)		-	x
	to all years listed, answer "No" and attach statement - see page 20 of the instructions.)	2b	<del>                                     </del>	
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	<b>D</b>	-	-	
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?		- <del> </del> · .	
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	1	-	-
	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	<b>.</b>		
	foundation had excess business holdings in 2009.)	3 b	+	X
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its chantable purposes?	4a		<del>  ^</del>
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?	4 b	1	X

Total number of other employees paid over \$50,000 . . . . . . . . .

Part VIII Information About Officers, Directors, Trustees, Foundation Mana and Contractors (continued)		
3 Five highest-paid independent contractors for professional services (see page 23 c	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 charitable activities during the tax year. Include relevant statistical inform of organizations and other beneficianes served, conferences convened, research papers produced, etc.	ation such as the number	Expenses
1 CLIO CONTINUES TO WORK ON ITS EDUCATION EXHIBITS FOR T WORLD WIDE WEB, OUR PURPOSE IS TO PROVIDE EDUCATIONAL	HE	
MATERIAL ABOUT HISTORY WITH AVAILABILITY TO ALL.		45,861
2		
3 <sub></sub>		
4		
Part IX-B Summary of Program-Related Investments (see page 23 of the instr		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 1 NONE	2.	Amount
	·	
2		•
All other program-related investments See page 24 of the instructions.		
3 NONE		
Total. Add lines 1 through 3		

Pá	Minimum Investment Return (All domestic foundations must complete this part. Foreit see page 24 of the instructions.)	ign foundation	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	
b	Average of monthly cash balances	1b	16,823.
C	Fair market value of all other assets (see page 24 of the instructions)	1c	0.
d	Total (add lines 1a, b, and c)	1d	16,823.
8	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)	ļ ļ	
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Out to and the another and the and	3	16,823.
4	Cash deemed held for charitable activities Enter 1 1/2 % of line 3 (for greater amount, see page 25		
		4	252.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	16,571.
6	Minimum investment return. Enter 5% of line 5	6	829.
Pa	Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) privation foundations and certain foreign organizations check here ► X and do not complete this privation.	ate operating	
1	Minimum investment return from Part X, line 6		<del></del>
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		
C	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	<del></del>
5	Add lines 3 and 4	5	<del></del>
6	Deduction from distributable amount (see page 25 of the instructions)	6	<del></del>
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	
Pa	rt XII Qualifying Distributions (see page 25 of the instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes	'	
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	45,861.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	1	
	purposes	2	0.
3	Amounts set aside for specific charitable projects that satisfy the	<u> -                                    </u>	
а	Suitability test (prior IRS approval required)	3a	0.
b	Cash distribution test (attach the required schedule)	3b	0.
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	45,861.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.	1 1	
	Enter 1% of Part I, line 27b (see page 26 of the instructions)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4		45,861.
	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.	vhether the fou	ndation

Form	n 990-PF (2009)	03-0355660 Pag								
Pa	rt XIII Undistributed Income (see page	e 26 of the instructions)								
		(a)	(b)	(c)	(d)					
1	Distributable amount for 2009 from Part XI,	Corpus	Years prior to 2008	2008	2009					
	line 7	······································			, =					
2	Undistributed income, if any, as of the end of 2009	-			tr 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,					
a	Enter amount for 2008 only			0.						
b	Total for pnor years. 20 07 .20 06 .20 05			1 2	7-2					
3	Excess distributions carryover, if any, to 2009:			*						
a	From 2004		_							
a h	From 2005	,	1							
	• • • • • • • • • • • • • • • • • • • •	_								
C	From 2006									
a	From 2007		_ * _ ·							
9	From 2008									
f	Total of lines 3a through e			) · · · · · · · · · · · · · · · · · · ·	ee e					
4	Qualifying distributions for 2009 from Part XII,									
	line 4: ▶ \$ 45,861.	- " "								
а	Applied to 2008, but not more than line 2a			0.	7 6 7					
b	Applied to undistributed income of prior years (Election									
	required - see page 26 of the instructions)	2 2 2 2 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3		, - ,						
C	Treated as distributions out of corpus (Election		・   -   *   *   *   *   *   *   *   *   *	79						
	required - see page 26 of the instructions)	, w.,	7 1	स्त्रा १ कडिन <b>र</b>						
đ	Applied to 2009 distributable amount	, 4								
е	Remaining amount distributed out of corpus	45,861.	***							
5	Excess distributions carryover applied to 2009.									
	(If an amount appears in column (d), the same amount must be shown in column (a).)			·						
6	Enter the net total of each column as	era (j.a.)								
	indicated below:			7 34,7.						
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	45,861.		t see						
ь	Prior years' undistributed income. Subtract									
	line 4b from line 2b	late modital kind								
C	Enter the amount of prior years' undistributed			<u>*</u> -						
	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	21								
_	amount - see page 27 of the instructions			i i	L1 -					
e	Undistributed income for 2008. Subtract line		* · ·		,					
	4a from line 2a. Taxable amount - see page 27 of the instructions			0.						
				18.						
T	Undistributed income for 2009. Subtract lines 4d and 5 from line 1. This amount must be									
	distributed in 2010				0.					
7	Amounts treated as distributions out of corpus		7 m x 2							
	to satisfy requirements imposed by section									
	170(b)(1)(F) or 4942(g)(3) (see page 27 of the instructions)			- -						
8	Excess distributions carryover from 2004 not	-								
	applied on line 5 or line 7 (see page 27 of the instructions)		-							
9	Excess distributions carryover to 2010.		- 2							
3	Subtract lines 7 and 8 from line 6a	45,861.	- :	_						
10	Analysis of line 9			ч -	-					
a	Excess from 2005	,	-		-					
	Excess from 2006									
Ь										
C	Excess from 2007									
d	Excess from 2008			,						
_ e	EXCESS HOTH 2009   30,001.			1						

1 a	If the foundation has	•		•	ting	
	foundation, and the ruling	g is effective for 2009, ent	er the date of the ruling .		<b>▶</b> {	
b	Check box to indicate wh	ether the foundation is a p	private operating founda	tion described in section	X 4942(j)	(3) or 4942(j)(5)
2.	Total the larger of the ed	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	(e) Total
	I or the minimum investment	<del>                                     </del>	177	(0/250)		
	return from Part X for each	ì				
	year listed	<del></del>		<del></del>	<del></del>	
þ	85% of line 2a					
C	Qualifying distributions from Part	[				
	XII, line 4 for each year listed .	45,861.	19,423.			65,284.
q	Amounts included in line 2c not	ĺ				
	used directly for active conduct of exempt activities					
e	Qualifying distributions made					
•	directly for active conduct of	1				
	exempt activities Subtract line	45,861.	19,423.			65,284.
3	2d from line 2c	73,001.	15,425.			03,204.
,	Complete 3a, b, or c for the alternative test relied upon					
а	"Assets" alternative test - enter					
	(1) Value of all assets	19,487.	14,159.			33,646.
	(2) Value of assets qualifying					
	under section					0.
b	4942(j)(3)(B)(i) "Endowment" alternative test-		<del></del>			<del></del> _
	enter 2/3 of minimum invest-					
	ment return shown in Part X,	0.	0.			^
	line 6 for each year listed		0.			0.
C	"Support" alternative test - enter	l	į			
	(1) Total support other than					
	gross investment income (interest, dividends, rents,					
	payments on securities	]				
	loans (section 512(a)(5)), or royalties)	54,473.	13,000.			67,473.
	(2) Support from general		<del></del>			i
	public and 5 or more					
	exempt organizations as provided in section 4942					0.
	(j)(3)(B)(III)	<del></del>				
	<li>(3) Largest amount of sup- port from an exempt</li>		,			_
	organization					<u>0.</u>
	(4) Gross investment income.	<u>                                     </u>				0.
Pa	rt XV Supplement	ary Information (Co	mplete this part of	only if the founda	tion had \$5,000 c	or more in assets
	at any time of	during the year - see	page 28 of the ins	tructions.)		
1	Information Regarding	g Foundation Managers	:			
а	List any managers of	the foundation who ha	ve contributed more	than 2% of the total	contributions receive	d by the foundation
	before the close of any	tax year (but only if the	y have contributed m	ore than \$5,000). (Se	e section 507(d)(2).)	
	LOLA VAN WA	ACENEN				
_			<del></del>		<del></del>	
b	List any managers of					large portion of the
	ownership of a partner	ship or other entity) of v	which the foundation	has a 10% or greater i	nterest.	
	NONE					
2	Information Regarding	g Contribution, Grant, (	Gift, Loan, Scholarshi	p, etc., Programs:		
	Check here ► X If t	he foundation only ma	akes contributions to	n preselected charita	ible organizations an	d does not accent
	unsolicited requests f	or funds. If the found	ation makes gifts, or	ants etc. (see page	28 of the instruction	s) to individuals or
	organizations under of	her conditions, complete	e items 2a. b. c. and o	l.		0, 10 11.0.11.0.00
						<del></del>
а	The name, address, a	na telepnone number of	the person to whom	applications should be	addressed.	
b	The form in which app	lications should be subr	nitted and information	n and materials they s	hould include:	
	Any submission deadli	nes.				
•	. 1.y out income dodding					
	A	. 14 - 4		1 . 1	1- 6-14- 11 1 1	11.0
ď	Any restrictions or li	mitations on awards,	such as by geograp	onical areas, charitab	ie tields, kinds of in	stitutions, or other
	factors:					

Part XIV Private Operating Foundations (see page 27 of the instructions and Part VII-A, question 9)

Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment									
Recipient Recipient	If recipient is an individual,								
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount					
a Paid during the year	or substantial contributor	recipient							
a Pald during the year	,								
			1						
			1						
			1						
			(						
**									
•									
			1						
			ļ						
			•	<u> </u>					
Total	<del> </del>	<del></del>	▶ 3a						
<b>b</b> Approved for future payment									
			)						
			<u> </u>						
			!						
		l							
		Ì							
		1	Į Į						
		1							
			<b>†</b>						
			Į į						
		1							
Total			▶ 3b						

Part X	(VI-A Analysis of Income-Produ	cing Activ	vities			
Enter gr	oss amounts unless otherwise indicated.	Unreia (a)	ated business income (b)	Excluded b	y section 512, 513, or 514 (d)	function income
1 Prog	ram service revenue:	Business code		Exclusion code		(See page 28 of the instructions.)
b .						
c .					- ·	
ď						
е						
f						
g F	Fees and contracts from government agencies					
2 Mem	bership dues and assessments					
3 Intere	est on savings and temporary cash investments					
4 Divid	dends and interest from securities					
5 Net r	rental income or (loss) from real estate:	***************************************		:		
	Debt-financed property					
d d	Not debt-financed property	ļ			, <u> </u>	
	ental income or (loss) from personal property .					
7 Othe	er investment income					
	or (loss) from sales of assets other than inventory					
	income or (loss) from special events					
	ss profit or (loss) from sales of inventory					
11 Othe	er revenue: a					
Ь.				-		
		ļ				·
	1			· <u> </u>		
e .		· .			<u></u>	
12 Subt	otal. Add columns (b), (d), and (e)			<u> </u>		·
(See wee	1. Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions on page 28	to varify calcu	dations \		13	
	VI-B Relationship of Activities			mnt Durn	0505	
Line No	Explain below how each active the accomplishment of the formage 29 of the instructions.)	ity for which	ch income is reported exempt purposes (ot	in column her than b	(e) of Part XVI-A con by providing funds for	tributed importantly to such purposes). (See
				<u>.</u>	<u> </u>	
			NOT APPLICABLE	<u> </u>		
	Ĭ					

Form 990-PF (200	9)						0222000				Pag	10 TJ
Part XVII	Information Re		ransfers	To and	Transaction	s and	Relatio	nships	With	Noncl	harita	ıble
	Exempt Organiz	zations				_			_	_		

1	in se	he organization directly ction 501(c) of the Co izations?	de (other than	n section 501(c)(	(3) organizatior	ns) or in :	any other org section 527,	anization of relating to	described political		Yes	No
а		izations? fers from the reporting fo										- · · · · ·
		ash								<u>1a(1)</u>		X
		ther assets	• • • • • • •	• • • • • • • • •	• • • • • • •			· · · · · ·	• • • • • •	1a(2)		X
b		transactions:										
	(1) S	ales of assets to a nonch	aritable exempt	organization					• • • • • }	1b(1)		X
		urchases of assets from a								1b(2)		$\frac{\Lambda}{X}$
		ental of facilities, equipme								1b(3)		X
		eimbursement arrangeme								1b(4)		X
		oans or loan guarantees .								1b(5)		X
		erformance of services or										
C		ng of facilities, equipment										X
đ		e answer to any of the			_				-			
		of the goods, other a		- •								
	value	in any transaction or	sharing arran	igement, show in	n column (d)	the value	of the good	s, other a	ssets, or s	service	es rec	eived.
		(1) Amount minted	(=) Nome of			(4) 5						
(a) i	.ine no.	(b) Amount involved N/A	(c) Name of	nonchantable exemp	t organization	N/A	cription of trans	ers, transacuo	ons, and snan	ng ama	ngeme	nts
		N/A				IN/A						
						<del></del>						
						+						
		<del> </del>		<del></del>		<del> </del>						
		<del> </del>				<del>-                                    </del>						
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_		<del></del>		<del></del>	<del></del> -	<del> </del>	<del></del>					
		<del> </del>				<del> </del>						
				<del></del>		<del> </del>						
	le the	foundation directly or i	indeposits office	atod with as solet	tod to one or		warnt arrani		aribad in			
Za		n 501(c) of the Code (other	•				. •			٦,,	s 🗀	7 No
_		s," complete the following		out(c)(3)) or in sec	CUON 52/?	• • • • •			٠٠٠٠ لـ		s <u>∟</u>	3 110
	11_16:	(a) Name of organization	scriedule.	(b) Type	of organization			(c) Descriptio	n of relationsh	)ID		
		(=) itomo or organization		( , ype	organization			, D00011pti0	51 15/4(16)151	<b>.</b>		
	<del></del> -											
				<del></del>							-	
	Under	penalties of perjury, I declar	re that I have ex	amined this return.	including accomp	anving scher	dules and stater	nents, and to	the best of	mv kr	nowled	ge and
	belief,	it is true, correct and comp	le Declaration	of preparer (other th	an taxpayer or fic	luciary) is ba	sed on all infor	mation of wh	ich preparer	has ar	y know	Medge
ł	\ /	7 Mw Van	Maxeu	w		( July 1	12. 2010	Kliri	ut m	/		
ø		gnature of officer or trustee	1009 1000			Date	- 4 007 - P	Title				
후			<del>- U</del> -		Date	<del>/! -</del>	T		Preparer's i	dentif	/ina	
늗	<b>o</b> -	]	)	0/7			Check if		number (See	Signa	ture o	
Sign Here	흔들	Preparer's signature	nn 1	1han	10-1	28-10	> self-employ		page 30 of th P007172		ucuons	,
ا رد	Paid Preparer's Use Only	Firm's name (or yours if	DANAHI	ER ATTIG &	PLANTE PL	.C			0-36820	_		
l	r 2	self-employed), address,		ENNEDY DRIV					3 3 3 3 3 3	<del></del>		
Ì		and ZIP code		BURLINGTON			407-2166	Phone no.	802-38	3-0	399	
		L			., .			i none no.			0 DE	

#### Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury
Internal Revenue Service
Name of the organization

### **Schedule of Contributors**

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

OMB No. 1545-0047

CITO VICINITATION	IISTORY, INCORPORATED	Employer identification number
CLIO, VISUALIZING H	IISTORI, INCORPORATED	03-0355660
Organization type (check one	a).	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)( ) (enter number) organization	
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private f	oundation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private found	dation
	501(c)(3) taxable private foundation	
	covered by the <b>General Rule</b> or a <b>Special Rule.</b> 7), (8), or (10) organization can check boxes for both the General Rule and a	a Special Rule. See
General Rule		
	filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,00 one contributor. Complete Parts I and II.	O or more (in money or
Special Rules		
sections 509(a)(1)	e)(3) organization filing Form 990 or 990-EZ that met the 331/3 % support to and 170(b)(1)(A)(vi), and received from any one contributor, during the year 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, ii	ar, a contribution of the greater
the year, aggregate	e)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from excontributions of more than \$1,000 for use exclusively for religious, charitates, or the prevention of cruelty to children or animals. Complete Parts I, II,	ble, scientific, literary, or
the year, contribution aggregate to more year for an exclusive applies to this organ	(7), (8), or (10) organization filing Form 990 or 990-EZ that received from sors for use <i>exclusively</i> for religious, charitable, etc., purposes, but these conthan \$1,000. If this box is checked, enter here the total contributions that ely religious, charitable, etc., purpose. Do not complete any of the parts un nization because it received nonexclusively religious, charitable, etc., continuous.	ontributions did not were received during the less the <b>General Rule</b> ributions of \$5,000 or more
990-EZ, or 990-PF), but it mus	is not covered by the General Rule and/or the Special Rules does not file st answer "No" on Part IV, line 2 of its Form 990, or check the box on line F, to certify that it does not meet the filing requirements of Schedule B (Form 990).	H of its Form 990-EZ,
For Privacy Act and Paperwork Redi for Form 990, 990-EZ, or 990-PF.	uction Act Notice, see the Instructions Schedul	e B (Form 990, 990-EZ, or 990-PF) (2009)

_	~6	
0	OI .	of Part I

Schedule B (Form 990, 990-EZ, or 990-PF) (2009)						of	_ of Part
Name of organization	CLIO,	VISUALIZING	HISTORY,	INCORPORATED	Employer Iden	tification numb	er
•					1 03	-0355660	)

Parti	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	LOLA VAN WAGENEN  PO BOX 415  CHARLOTTE, VT 05445	\$\$ 32,500.	Person Payroll Noncash  (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
2	LISA STEELE P.O. BOX 190 SHELBURNE, VT 05482	\$\$	Person Payroll Noncash  (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

ATTACHMENT 1

	,
FEES	
LEGAL	
- 1	
Η	
PART	
990PF,	
FORM	

CLIO, VISUALIZING HISTORY, INCORPORATED

CHARITABLE	0
ADJUSTED NET INCOME	0
NET INVESTMENT INCOME	0
REVENUE AND EXPENSES PER BOOKS	1,873.
	TOTALS
DESCRIPTION LEGAL FEES	

ATTACHMENT 2

FEES	
ACCOUNTING	
ı	ı
Η	ı
PART	
990PF,	
ORM	

CHARITABLE		0
ADJUSTED NET INCOME		.0
NET INVESTMENT INCOME		0
REVENUE AND EXPENSES PER BOOKS	570.	570.
		TOTALS
DESCRIPTION	ACCOUNTING	

OTHER PROFESSIONAL FEES ı PART I FORM 990PF,

DESCRIPTION

CONSULTANTS

REVENUE

PER BOOKS EXPENSES

21,082.

21,082.

TOTALS

CHARITABLE PURPOSES

21,082.

21,082.

ATTACHMENT 3

12:54:54 PMV 09-6.4

0913AM 771P 6/28/2010

12:54:54 PMV 09-6.4 6/28/2010 0913AM 771P

REVENUE AND

- OTHER EXPENSES

PART I

FORM 990PF,

PER BOOKS EXPENSES

DESCRIPTION

BANK FEES SUPPLIES TELEPHONE WEBSITE

91

304. 564. 12,257.

624. 750.

14,590.

CHARITABLE PURPOSES

304.

564. 12,257. 624.

3,749.

TOTALS

OFFICE EXPENSE INSURANCE

INVESTMENT	
FOR IN	
HELD	
T. NOT	
EQUIPMENT	
BUILDINGS,	
LAND,	

•		1		
	e	ENDING	11,704.	11,704.
ATTACHMENT 5	ACCUMULATED DEPRECIATION DETAIL	DISPOSALS		
	JUMULATED DEPR	ADDITIONS		
	ACC	BEGINNING	11,704	11,704
		ENDING	11,704	11,704
	FIXED ASSET DETAIL	ADDITIONS DISPOSALS		
	FIXED A	ADDITIONS		
		BEGINNING	11,704.	11,704.
		METHOD/ CLASS	SL	
		ASSET DESCRIPTION	START UP COSTS	TOTALS

03-03556	MENT 6	EXPENSE ACCT AND OTHER ALLOWANCES	.0	.0	.0	·	0.
	ATTACHMENT	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	.0	.0	.0	°	0.
		COMPENSATION	.0	.0	.0	0.	0
TORY, INCORPORATED	PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	PRESIDENT 15.00	SEC/TREASURER 0.00	VICE PRESIDENT 0.00	DIRECTOR 0.00	GRAND TOTALS
CLIO, VISUALIZING HISTORY,	FORM 990PF, PART VIII - L	NAME AND ADDRESS	LOLA WANGENEN, PHD PO BOX 05445 CHARLOTTE, VT 05445	KIM ROBISON PO BOX 190 SHELBURNE, VT 05482	GEORGE BURRILL PO BOX 104 CHARLOTTE, VT 05445	JUDY YARNALL RR 2 JOHNSON, VT 05656	

# Form **4562**

## **Depreciation and Amortization**

(Including Information on Listed Property)

► See separate instructions.

Attachment Sequence No 67

Department of the Treasury Internal Revenue Service (99) Name(s) shown on return

► Attach to your tax return.

Identifying number 03-0355660

OMB No. 1545-0172

C	LIO, VISUALIZING H	IISTORY, INC	ORPORA	ΓED					03-0355660
	ness or activity to which this form relates								
G	ENERAL DEPRECIATIO	N							
Pa	rt i Election To Expense C	Certain Property U	nder Secti	on 179					
	Note: If you have any li				you compl	ete Part I.			
1	Maximum amount. See the instruct	tions for a higher limit for	or certain busi	nesses				1	
2	Total cost of section 179 property p	olaced in service (see in	structions)					2	
3	Threshold cost of section 179 prop	erty before reduction i	n limitation (se	e instructio	ons)		[	3	
4	Reduction in limitation. Subtract lin	e 3 from line 2. If zero o	or less, enter -(	)			[	4	
	Dollar limitation for tax year Subtract line 4 fro separately, see instructions	om line 1 If zero or less, enter	0- If marned filing			<u> </u>	<u></u>	5	
_6	(a) Descriptio	n of property		(b) Cost (bi	usiness use only	(c) Elect	ed cost	_	
						-		_	
		<del></del>		<u> </u>	,				
7	Listed property. Enter the amount for								
8	Total elected cost of section 179 pr	roperty. Add amounts i	n column (c),	lines 6 and	7			8	
9	Tentative deduction. Enter the small	ler of line 5 or line 8					_	9	
10	Carryover of disallowed deduction is							10	
11	Business income limitation Enter to							11	
12	Section 179 expense deduction. Ac					1	<u> </u>	12	75 1 2 5 T. V. T. V. T. T. T.
13	Carryover of disallowed deduction to				. ▶ 13			J	
_	e: Do not use Part II or Part III below fort II Special Depreciation				No not includ	la listed prope	rtu \ (Ca		note letions \
		<del></del>					<del></del>	1 95	istructions.)
14	Special depreciation allowance								
15	during the tax year (see instructions	)	<i>.</i>				$\cdots$	14	<del></del>
16	Property subject to section 168(f)(1 Other depreciation (including ACRS	) election ,			• • • • • •		· · · ·  -	15 16	
_	rt III MACRS Depreciation					·····	• • • • •	10 1	<del></del>
		<u></u>		tion A			<del></del> -		
17	MACRS deductions for assets plac	ed in service in tax vea					1	17	
18	If you are electing to group any							<u></u>	<del> </del>
	asset accounts, check here		_	-			<u> </u>		\$ * · · · · · · · · · · · · · · · · ·
		s Placed in Service					reciation	n Sy	stem
	(a) Classification of property	(b) Month and year placed in	(c) Basis for ( (business/inv	depreciation	(a) vecovery	(e) Convention	(f) Meth	04	(g) Depreciation deduction
		service	only - see in	structions)	period		(1) 1/10(1)		(g) Depreciation decaderon
19a	3-year property		 					_	
	5-year property						<u> </u>	_	
	7-year property								
	10-year property		 		ļ.—. —. ·				
	15-year property								
	20-year property							_	
	25-year property			- · · · · ·	25 yrs.	<del></del>	S/L	}	
h	Residential rental				27.5 yrs.	MM	S/L		
	property				27.5 yrs.	MM	S/L		
i	Nonresidential real				39 yrs.	MM	S/L	_	<del></del>
	property		L		<u> </u>	ММ	S/L		<del></del>
	Section C - Assets	Placed in Service D	uring 2009	Tax Year	Using the	Alternative De		on S	System
	Class life	_					S/L		
_	12-year				12 yrs.		S/L		
	40-year	<u> </u>	L		40 yrs.	<u> </u>	S/L		
	rt IV Summary (See instruct								
21	Listed property. Enter amount from						2	21	
22	Total. Add amounts from line 12, lin								
	and on the appropriate lines of your				structions	<del></del>	2	2	<u> </u>
23	For assets shown above and placed portion of the basis attributable to s	_	-						
	ב אין היאון הו חוב הפסוס פונו והמופהוה (0.2	COULDINE COOK COOKS			23	1		- 1	55

For	n 4562 (2009)											03	3-0355	660	Page <b>2</b>
		operty (Include	automob	les	certain	othe	r vehic	cles	cellular	telent	ones	certa	in con	nuter	
Ρa	, property i	sed for entertain	ment. recr	eatior	n. or an	nusem	ent.)	JIC3,	Celiulai	telebi	101103,	Certa	iii con	iputers	s, and
		any vehicle for wi						ae rai	te or de	ductina	lease e	xpense	. comp	ete on	w 24a.
	24b, colum	ns (a) through (c) o	of Section A,	all of	Section	B, and	Section	Cife	applicable	9.			,,		, ,
	Section A - I	Depreciation and	Other Infor	matio	n (Cauti	ion: Se	e the in	struct	ions for	limits fo	r passe	nger au	utomobi	les.)	
24a	Do you have evidence					$\overline{}$			24b If "					Yes	No
	(a)	(b)	(c)				(e)		(f)	T	g)		(h)		(i)
	Type of property (list	Date placed in	Business/		(d)	Ba	sis for depr	eciation	Recovery	1	hod/		eciation		יי) d section
	vehicles first)	service	investment use	Cost	or other ba	asis (bu	sıness/inve use only		period		ention		uction		cost
		L <u> ,— .</u>	percentage					<u> </u>	<u> </u>	<u> </u>					<del></del>
25	Special depreciation										- {	1		[-`	-
	year and used more the				nstructio	ns)	· · · · ·	• • •	<u>· · · · · · · · · · · · · · · · · · · </u>		. 25	l		L <u>.</u>	
26	Property used more t	han 50% in a qualified	d business use	<del>)</del>					,	.,					
			9/	ó .						J					
	-		9/	6											
			9	0						1					
27	Property used 50% or	less in a qualified bu	siness use:						<u> </u>	•					
		· · · · · · · · · · · · · · · · · · ·	9,	7					Γ	S/L -		Γ	-	227 - 1	
—		<del></del>	9/							S/L -			_		. = "
			9/			-			<del></del>	S/L -		<del> </del>		₹ -	
									L	<del></del>	1	<del> </del>			-, ' -
	Add amounts in colur										. 28	<u> </u>	<del>- 1</del>		-
<u>29</u>	Add amounts in colur	nn (i), line 26. Enter	nere and on II	ne /, p	age 1 .		<u> </u>	· · ·	<u></u>		<u></u>	<u></u>	.   29	<u> </u>	
			Section	on B -	Inform	ation o	n Use o	of Veh	icles						
	nplete this section for												provided	vehicles	to you
emp	oloyees, first answer the	e questions in Section	n C to see if yo	ou mee	et an exce	eption to	comple	eting th	us section	for those	e vehicle	s.			
					a)	(	b)		(c)	- 4	——— d)	(	(e)		(f)
30	Total business/inve		Iriven		icle 1		ıcle 2	V	ehicle 3		cle 4		icle 5		icle 6
	during the year (do miles)					_									
2 4	Total commuting mile							1		1			_	<del></del>	
		sonal (noncomm	·					<del> </del>		1				_	
32	•	•	٠,												
	miles driven		1					1		<del> </del>			_	<del>  -</del>	
33	Total miles driven	•	i i												
	lines 30 through 32						τ	ļ		<u> </u>			T	<u> </u>	¥
34	Was the vehicle	available for per	sonal	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
	use during off-duty ho	urs?	<i>.</i>  _							ļ			1		<b> </b>
35	Was the vehicle	used primarily b	y a [												
	more than 5% ow	ner or related pe	rson?												
36	Is another vehicle	available for per	sonal					1					Ţ		
	use?		l										1		
		Section C - Que		mnlo	are Wh	o Prov	ride Veh	niclas	for Use I	v Their	Employ	1006	<u> </u>		
۸۵۰	wer these question												nlovoos	who	ara not
	re than 5% owners o				epuon	O COIII	pieting	Secu	וטו ם וטו	VEHICLE	s useu	by em	pioyees	WIIO	are not
														Yes	No
37	Do you maintain a										g comi	nuting,	by	162	110
	your employees?									• • • •					<del> </del>
38	Do you maintain a v									_					
	See the instructions for	or vehicles used by c	orporate office	ers, dire	ectors, or	1% or r	nore ow	ners .						L	ļ
39	Do you treat all use o	f vehicles by employe	es as persona	use?											
40	Do you provide m	ore than five vel	nicles to yo	ur em	iployees,	obtair	ı inforn	nation	from y	our emp	loyees	about	the		
	use of the vehicles, ar	nd retain the informat	tion received?												
41	Do you meet the re	quirements concern	ing qualified	autom	obile de	 monstra	ation use	? (Se	e instruct	ions )					
	Note: If your answer to											• • • •			1 -
Рa	rt VI Amortizati		-			-									
	/ will that the				<u> </u>						(е				
	(a)		(b) Date amortiz	ation		(c)			(d)		Amorti			<b>(f)</b>	
	Description o	f costs	Date attivitiz	AUU I	l Am	ortizable	amount	Ì	Code se		perio	d or	Amortiza	tion for t	nis year

Pa	Amortization					
	(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
42	Amortization of costs that begins d	uring your 2009 tax ye	ear (see instructions):	<u> </u>		
43	Amortization of costs that began before	re your 2009 tax year			43	
44	Total. Add amounts in column (f). Se	e the instructions for whe	re to report	<u> </u>	44	
JSA						- 4EC2 (0000)

9X2310 1.000

Form **4562** (2009)

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CLIO, VISUALIZING HISTORY, INCORPORATED

Edwards         Date (according)         Total display (according)         Find display (according)         Find display (according)         Find display (according)         Proper display (according)         Moral Core (according)         Line (according)         According (according)	GENERAL DEPRECIATION DEPRECIATION													
6d Assets Operty  1.2A10N  1.2	Asset description	Date placed in service	Unadjusted Cost or basis		179 exp. reduction in basis	Basis Reduction	Basis for depreciation	Beginning Accumulated depreciation	Ending Accumulated depreciation	Me- hod Conv	Life	ACRS OF		Current-yeat depreciation
64 Assets  64 Assets  65 Assets  66 Assets  12 ATION  12 ATION  12 ATION  12 ATION  13 ACCUMULated Code Life  14 Accumulated Code Life  15 ATION  16 ASSETS  16 ASSETS  17 ACCUMULated Code Life  18 ACCUMULated Code Life  18 ACCUMULated Code Life  18 ACCUMULated Code Life  18 ACCUMULated Code Life  19 ACCUMULated Code Life  10 ACCUMULated Code Life  11 ACCUMULated Code Life  11 ACCUMULated Code Life  12 ACCUMULated Code Life  13 ACCUMULated Code Life  14 ACCUMULated Code Life  15 ACCUMULated Code Life  16 ACCUMULated Code Life  17 ACCUMULated Code Life  17 ACCUMULated Code Life  17 ACCUMULated Code Life  17 ACCUMULated Code Life  18 ACC		1								-				
of Assets  Operty  LATION  LATION  Debt Cost  Costs  Costs  Divolutions  Divolution		-								-				
of Assets										-		-		
ed Assets         Find the state of th														
operty  Accumulated Accumulate														
operty  VizarioN  State of Assets  CATION  Date Cost placed in basis and placed in bas														
ob Assets         Cost         Accumulated Accumu										-		-		
ed Assets  Coperty    Coperty   Cost   Cost										-		_		
## Accumulated Acc										+				
ed Assets         Assets           Operty         IZATION           IZATION         Date in Service assists           Costs         Accumulated A										+		1		
ed Assets         ***           ***Operty         ***           ***CATION         ***Cost basis           ***Costs         ***Out 1/1999           ***Out 1/1999         ***In 704*           ***Costs         ***Out 1/1999           ***Costs         ****Out 1/1999										+		+		
ed Assets         Operty           'Operty         IZATION           Izable         Cost           costs         01/01/1999           11.704.         11.704.           11.704.         22.00		-								-		+		
## description   Plate   Cost   Cost		-								-		-		
ed Assets         Costs           int 700.         Int 704.           costs         Int 704.           int 704.         Int 704.           int 704.         Int 704.           int 704.         Int 704.														
ed Assets         Coperty           ed Assets         Accumulated Accum														
operty  ed Assets  ed Assets  ed Assets  ed Assets  IZATION  IZATION  Date  placed in or service basis  costs  01/01/1999 11/704 11/704 5.000														
operty           ed Assets           EZATION           placed in or placed in service basis           costs         amortization	Defend Accepts								- x - x - x - x - x - x - x - x - x - x			_		
ed Assets         Ending           IZATION         Date paced in placed in placed in passis         Cost passing amortization amortizatio	ototals									-3° '	,			
Cost	ted Property												,	
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Ending Date Cost placed in or service basis costs 01/01/1999 11,704. http://doi.or.or.or.costs.										+				
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Date   Cost   Ending   Ending   Cost   Service   Dasis   Date   Dasis   Date   Cost   Dasis   Date   Date   Dasis   Date   Dasis   Date   Date   Dasis   Date   Dasis   Date   Dasis   Date   Dasis   Date   Dasis	btotals								-					
Date Cost Ending Placed in Or Service basis  CosTs 01/01/1999 11,704 11,704 11,704 2248 5.000	TALS.			. d										
Date Cost Ending Accumulated A	MORTIZATION				1									
COSTS 01/01/1999 11,704. 11,704. 11,704. 11,704. A248 5.000	Asset description	Date placed in service	Cost or basis		- -			Accumulated amortization	Ending Accumulated amortization		-			Current-year amortization
	ART UP COSTS	01/01/1999	11,704.		-		-	11,704.	11,704.	$\sqcup$				
					_ ,	-	3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			-	Ť			
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	TOTALS		11,704.		- 1	-	-	11,704.	11,704.	-			1, 4, 1,	
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### $\mathsf{Form}\,8868$

(Rev April 2009)

Department of the Treasury

# Application for Extension of Time To File an Exempt Organization Return

-	File	а	senarate	application	for	each	return
	riie	а	Separate	application	101	eacii	return.

OMB No 1545-1709

ntemai Revenue Si		<u> </u>		
		Extension, complete only Part I and check		
		omatic) 3-Month Extension, complete only dy been granted an automatic 3-month exter		
Part I Auto	matic 3-Month Extension	of Time. Only submit original (no copies n	needed).	,
A corporation i	equired to file Form 990-T an	d requesting an automatic 6-month extension	n - check this b	ox and complete
•				
All other corpo time to file inco		ers), partnerships, REMICs, and trusts must	use Form 70	004 to request an extension of
one of the ret electronically i returns, or a co	urns noted below (6 months f (1) you want the additional emposite or consolidated Fror	electronically file Form 8868 if you want as for a corporation required to file Form 9 (not automatic) 3-month extension or (2) yn 990-T Instead, you must submit the fully og of this form, visit www irs gov/efile and click	90-T) Howeve ou file Forms completed and	er, you cannot file Form 8868 990-BL, 6069, or 8870, group I signed page 2 (Part II) of Form
Type or	Name of Exempt Organization			Employer identification number
print	CLIO, VISUALIZIN	G HISTORY, INCORPORATED		03-0355660
File by the	Number, street, and room or sui	e no If a P O box, see instructions	·'	
due date for	P.O. BOX 190			
filing your return See instructions		and ZIP code For a foreign address, see instructions		
	SHELBURNE, VT 05	<del></del>	<del></del>	
		rate application for each return)		1700
Form 990	<b>├</b>	Form 990-T (corporation)		m 4720
Form 990	<del></del>	Form 990-T (sec 401(a) or 408(a) trust)		m 5227
Form 990	<del> </del> i	Form 990-T (trust other than above)	<u> </u>	m 6069
X Form 990	.PF	Form 1041-A	For	m 8870
Telephone  If the organ  If this is for for the whole gnames and Ell	a Group Return, enter the org roup, check this box . ► ☐ Is of all members the extension	FAX No ► e or place of business in the United States, chanization's four digit Group Exemption Numbe  If it is for part of the group, check this box on will cover	r (GEN) . ▶ an	If this is did attach a list with the
OIIII	ganization's return for	(6 months for a corporation required to file the exempt organization return for th	to file Forr e organization	n 990-T) extension of time inamed above The extension is
	calendar year 2009 or tax year beginning	,, and ending		
2 If this tax	year is for less than 12 month	s, check reason Initial return F	ınal return	Change in accounting period
		990-PF, 990-T, 4720, or 6069, enter the	tentative tax,	
	dable credits. See instructions	- 000 T		3a \$ None
		or 990-T, enter any refundable credits and e	stimated tax p	
	clude any prior year overpayme		as if someroid	deposit 3b \$
		e 3a Include your payment with this form,	•	
instructio		y using EFTPS (Electronic Federal Tax P	ayment Syste	3c \$ None
	<del> </del>	nic fund withdrawal with this Form 8868, see	Form 8453-F0	
for payment in				
	ct and Paperwork Reduction	Act Notice, see Instructions.		Form 8868 (Rev 4-2009)
. 5	aa i aportroik iteaaction	Act Notice, see instructions.		

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