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Department of the Treasury Internal Revenue Service

SCANNED APR 1 3 2010

## **Return of Private Foundation**

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

**Treated as a Private Foundation** 

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

OMB No. 1545-0052

2009

Fo	calen	dar year 2009, or tax year beginning	, 2009	, 20					
G	Check	all that apply:  Initial return Initial return	eturn of a former p	ublic chanty	☐ Final return				
				Name change					
Us	e the	IRS Name of foundation	101		identification number	. 11			
	label.	Chamle DURCHARD Meme	oral Iru	ST 03	60481	14			
O	therwi print				O3 604 8/14 Telephone number (see page 10 of the instructions)				
	or type	。 「C.U. おわな んつメ しのめ DURCHA	RD Trustee	804	-863-3L	174			
	e Spe		2000	C If exempt	C If exemption application is pending, check here				
Instructions. Buy Ington, 17 05402-0638 D 1. Foreign organizations, check here									
H	Check	type of organization? Section 501(c)(3) exempt p	rivate foundation	abaal.	n organizations meetin here and attach compl				
Щ		on 4947(a)(1) nonexempt charitable trust 🔲 Other tax		ation E if provate	foundation status was				
ı		narket value of all assets at J Accounting method	: Cash L. Ad		07(b)(1)(A), check here				
		f year (from Part II, col. (c), Other (specify)			ndation is in a 60-mont				
	line 16		on cash basis.)	underse	ction 507(b)(1)(B), chec				
P	art I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal	(a) Revenue and expenses per	(b) Net investment	(c) Adjusted net	(d) Disbursements for charitable			
		the amounts in column (a) (see page 11 of the instructions).)	books	income ,	income	purposes (cash basis only)			
	1 4		AL 110			<del>  `                                   </del>			
	1 2	Contributions, gifts, grants, etc., received (attach schedule)  Check ► ✓ if the foundation is not required to attach Sch. B	4010						
	3	Interest on savings and temporary cash investments	316	316	316				
	4	Dividends and interest from securities	1100	1100	1100				
	5a	Gross rents	8	0	7 0				
	b	Net rental income or (loss)							
Ф	6a	Net gain or (loss) from sale of assets not on line 10	0						
Revenue	ь	Gross sales price for all assets on line 6a		<del></del>					
	7	Capital gain net-income (from Part IV, line 2)		<b>(5)</b>					
æ	8	Net short-term capital gain			18				
	9	Income modifications			0				
	10a	Gross sales less returns and allowances		· · · · · · · · · · · · · · · · · · ·					
	b	Less: Cost of goods sold							
	C	Gross profit or (loss) (attach schedule)	<b>©</b>		0				
	11	Other income (attach schedule)	0	O	.0				
	12	Total. Add lines 1 through 11	3032	1416	1434				
	13	Compensation of officers directors, trustees, etc.	Ö						
Expenses	14	Other employee salaries and wages	0	<i>O</i>					
ē	15	Pension plans, employee benefits 7. 2010 . Q	6			1			
χ	16a	Legal fees (attach schedule)							
<u>е</u>	b	Accounting fees (attach schedule)		<u> </u>					
rative	С	Other professional rees (attach Bredule)	<u> </u>		<del>                                     </del>	1/2			
	17	Interest	L-A 2		HX-	<b>\</b>			
is.	18	Taxes (attach schedule) (see page 14 of the instructions)	 		<del>                                     </del>	<del> </del>			
Ē	19	Depreciation (attach schedule) and depletion		<u> </u>	m/ '	<del></del>			
₫	20	Occupancy	<u> </u>	<del>-8-</del>		<del>  \\.</del>			
ਰੂ	21	Travel, conferences, and meetings	9,		<u> </u>	- FW   PX			
Operating and Administ	22	Printing and publications Letterhead & Stally's	77			1 11/2			
ng	23	Other expenses (attach schedule) EXCISE TOX	32	<u></u> _		<del>                                     </del>			
ati	24	Total operating and administrative expenses.  Add lines 13 through 23	66	NIS	I I/A	66			
ĕ	05	_	1	/\/_1		1 75 T			
Ö	25 26	Contributions, gifts, grants paid	66	1/4-	NA	Cala			
		Subtract line 26 from line 12:	VOC	IVA	/ / / /	W #			
	27	Excess of revenue over expenses and disbursements	2966						
	a	Net investment income (if negative, enter -0-)	0,100	1416					
		Adjusted net income (if negative, enter -0-)		<del>1114</del>	1434	1			
For		y Act and Paperwork Reduction Act Notice, see page 30 o	f the instructions.	Cat. No 11	289X F	orm <b>990-PF</b> (2009)			

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		Attached schedules and amounts in the description column	Beginning of year	End o	f year
FG	art II	Balance Sheets should be for end-of-year amounts only (See instructions.)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing	0	0	Ô
	2	Savings and temporary cash investments	19204	21070	2/040
	3	Accounts receivable ▶			
		Less: allowance for doubtful accounts ▶	,0	$\mathcal{O}_{}$	
	4	Pledges receivable ▶			
	_	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			
i		instructions)	$\cap$	0	0
	7	Other notes and loans receivable (attach schedule) ▶			
	•	Less: allowance for doubtful accounts ►	0	$\circ$	0
Assets	8	Inventories for sale or use	Ö	Õ	0
SS	9	Prepaid expenses and deferred charges	0	O	0
⋖	10a	Investments—U.S. and state government obligations (attach schedule)	0	Ø_	6
	- b	Investments—corporate stock (attach schedule)	0	0	0
	С	Investments,-corporate bonds (attach schedule)	<u> </u>	<u>O</u>	<u> </u>
	11	Investments—land, buildings, and equipment: basis ▶			<u>~</u>
		Less: accumulated depreciation (attach schedule)	0	0	9
	12	Investments-mortgage loans . Fidelity Runtan	000	1131700	43700
	13	investments—other (attach schedule)	33,778	702773	70+45
	14	Land, buildings, and equipment: basis	· 🍙	` <u>~</u>	· _
	15	Less: accumulated depreciation (attach schedule) ►  Other assets (describe ► )			
	16	Total assets (to be completed by all filers—see the			
		instructions. Also, see page 1, item I)	52982	63863	63863
	17	Accounts payable and accrued expenses	6	0	
Ø	18	Grants payable	0	0	
Liabilities	19	Deferred revenue		0	
賣	20	Loans from officers, directors, trustees, and other disqualified persons	<u> </u>	0	
E.	21	Mortgages and other notes payable (attach schedule)		<u>Q</u>	
	22	Other liabilities (describe ► )	8		
—	23	Total liabilities (add lines 17 through 22)			
ຜ		Foundations that follow SFAS 117, check here Danie and complete lines 24 through 26 and lines 30 and 31.			
Balances	24	Unrestricted	111	6	
<u>a</u>	25	Temporarily restricted	MA	NA	
Ba	26	Permanently restricted	1 2 11	616	
ᅙ		Foundations that do not follow SFAS 117, check here ▶			
Fund		and complete lines 27 through 31.	15 000	12010	
6	27	Capital stock, trust principal, or current funds	27 700	63005	
Net Assets	28	Paid-in or capital surplus, or land, bldg., and equipment fund	<u> </u>	<u> </u>	
28	29	Retained earnings, accumulated income, endowment, or other funds		0	
Ž	30	Total net assets or fund balances (see page 17 of the instructions)	65 922	63.862	
Š	31	Total liabilities and net assets/fund balances (see page 17	100	19900	
	••	of the instructions)	52 482	63.863	
Pa	rt III	Analysis of Changes in Net Assets or Fund Balances			
1		I net assets or fund balances at beginning of year-Part II, colu	mn (a), line 30 (mus	st agree with	in can
		of-year figure reported on prior year's return)		36.5	20100
2	Ente	r amount from Part I, line 27a	1835	60in 2	3700
3		er increases not included in line 2 (itemize) ► Fide lite Puritze	uta 1871	Value her 3	13 3
4		lines 1, 2, and 3		4	103003
5	Decr	reases not included in line 2 (itemize)   I net assets or fund balances at end of year (line 4 minus line 5)—	Part II. column (b) li	ne 30 6	(3 8 L 3
	ioia	The assets of fullo balances at end of year time 4 minds line s)—	. a.t ii, oolaiiii (b), ii		Form <b>990-PF</b> (2009)

	(a) List and describe	the kin					Income	(b) How acquired	(c) D	ate acquired	(d) Date sold
	2-story brick wareh							P-Purchase D-Donation		o., day, yr.)	(mo., day, yr.)
1a					1						
b											
С					L		<u> </u>			J.J.,	
d	· _ · · · · · · · · · · · · · · · · · ·										
е		1			<u> </u>						
	(e) Gross sales price	W		preciation al or allowable				other basis nse of sale			in or (loss) (f) minus (g)
а		M			1						
b		IIII									
С		$I\!I\!I$									
d		$\perp \! \! \! \! \! \! \! \! \! \! \! \! \! \! \! \! \! \! \!$	<u></u>		1						
е		$\perp \eta$	$\perp$								
	Complete only for assets s	howin	gain in	column (h)	and own	ed by ti	foundation	on 12/31/69		(f) Gains (Co	l. (h) gain minus
	(i) F.M.V. as of 12/31/69			Adjusted bas s of 12/31/6		١٩		s of col (i) (j), rfany		col. (k), but no	t less than -0-) or from col. (h))
а	•		W		_///						
b		T	1		A	7					
c		T	1								
d	<del></del>	Τ					1				
е							<del>V</del>				
_	O	(		-1 1>	∫ If ga	in, also	enter in Pa	rt I, line 7 )			APPA
2	Capital gain net income	or (ne	et capit	aiioss)	:01) المسمرة	ss)_ent	er <sup>/</sup> -0- in Pal	t I, line 7	2		
3	Net short-term capital g	an ol	(loss)	as defined	In secur	ns 122	2(5) and (6)	•			
	If gain, also enter in Par	t I. line	e 8, col	umn (c) (s	ee page	s 13 an	d 17 of the	instructions).]			100
	If (loss), enter -0- in Parl								l I		# 35
		: I, IIME	∍8.					J	3		# &D
art										me	<u> </u>
		der	Sectio	n 4940(e	) for Re	duce	l Tax on N	et Investmen	Inco		
or o sect	Qualification Unptional use by domestic ption 4940(d)(2) applies, lea	nder s private ave th	Section found is part I	<b>n 4940(e</b> ations sub blank.	e) for Re oject to the	educed ne sect	I Tax on N ion 4940(a)	et Investment tax on net invest	t Inco	ncome.)	
or o sect as t	Qualification Unptional use by domestic ption 4940(d)(2) applies, lead the foundation liable for the	orivate ave the	Section found is part lateration 49	n 4940(e ations sub blank. 42 tax on	e) for Re oject to the the distri	educed he sect	Tax on No. (a) on 4940(a) on amount of	et Investment tax on net invest any year in the	t Inco	ncome.)	
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or of sections of the section of the	Qualification Unptional use by domestic ption 4940(d)(2) applies, leather foundation liable for this," the foundation does not be a considered the appropriate are (a).  Base penod years andar year (or tax year beginning 2008 2007 2006 2005 2004  Total of line 1, column (Average distribution ration number of years the four Multiply line 4 by line 3	der service the second quantum in)	Section of found is part I tion 49-alify uncoin each of the 5-year on has I ritable—	n 4940(e ations substants substants at the section of column steed qualifyr at the sec	the distributed of the distribut	butable butable bonc year; se  divide the	e amount of t complete se page 18  Net value of the total on I man 5 years	any year in the this part.  of the instruction (c) i noncharitable use a concharitable use a conconnection use a concharitable use a concentratable use a concharitable use a concharitabl	base p	eriod?  Pre making (col. (b)	(d) tribution ratio
or of sections as the section of the	Qualification Unptional use by domestic pation 4940(d)(2) applies, lead the foundation liable for the s," the foundation does not enter the appropriate and the foundation does not enter the appropriate and the pend years and year (or tax year beginning 2008 2007 2006 2005 2004  Total of line 1, column (Average distribution ration number of years the four enter the net value of not Multiply line 4 by line 3  Enter 1% of net investment of the standard for the sta	der	Section of found is part I tition 49-alify und in each	n 4940(e ations subblank. 42 tax on der section column (b asted qualify)  ear base been in exuse asset: 1% of Parent 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	the distrint 4940(e) for each or each of the distribution of the d	divide the fless the sectors of the	ne total on I	any year in the this part.  of the instruction (c) i noncharitable use a concharitable use a conconnection use a concharitable use a concentratable use a concharitable use a concharitabl	base p	eriod?  Pre making (col. (b)	any entries. (d) tribution ratio
ectives the Calded	Qualification Unptional use by domestic pation 4940(d)(2) applies, lead the foundation liable for the s," the foundation does not enter the appropriate are (a)  Base penol years andar year (or tax year beginning 2008 2007 2006 2005 2004  Total of line 1, column (Average distribution ration number of years the four Multiply line 4 by line 3  Enter 1% of net investments in the four the set of th	der service the second quantum in)  d) of for indation on characteristics and the second quantum in	Section Section of found is part I tion 49-alify uncline according to the 5-years of the 5-years	n 4940(e ations substants) ations substants.  42 tax on the section of column to the section of	the distributed of the distribut	butable butabl	ne total on I	any year in the this part.  of the instruction (c) nonchantable-use a	base possesses	eriod?  Pre making (col. (b)  2  3  4  5  6	any entries.  (d)  Inbutton ratio divided by col. (c))

Part	VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the	ne ins	bructi	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 letter if necessary – see instructions)	_	ے					
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check	_\	8					
	here ▶ ☐ and enter 1% of Part I, line 27b							
C	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-)		Ø l					
3	Add lines 1 and 2	\$						
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	چ						
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0							
6	Credits/Payments:							
а	2009 estimated tax payments and 2008 overpayment credited to 2009 6a							
b	Exempt foreign organizations—tax withheld at source 6b	-		•				
C	Tax paid with application for extension of time to file (Form 8868) . 6c 6c							
_d	Backup withholding erroneously withheld	_	,					
7	Total credits and payments. Add lines 6a through 6d	<u>C</u>	$\leftarrow$					
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	46	<u></u>					
9 10	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	4 C						
10 11	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid > 10    Enter the amount of line 10 to be: Credited to 2010 estimated tax > Refunded > 11	<del>- Ç</del>	<del>-</del>					
	Enter the amount of line 10 to be: Credited to 2010 estimated tax ► Refunded ► 11    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	T	Yes	No				
	participate or intervene in any political campaign?	1a	-	i/				
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	. 1					
	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.			<i>'</i>				
C	Did the foundation file Form 1120-POL for this year?	1c		V				
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:							
	(1) On the foundation. ▶ \$ (2) On foundation managers. ▶ \$							
8	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		~				
3	If "Yes," attach a detailed description of the activities.  Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of	,						
ŭ	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		1/				
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		1/				
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b	N	A.				
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5						
	If "Yes," attach the statement required by General Instruction T.							
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:		,					
	By language in the governing instrument, or							
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that							
_	conflict with the state law remain in the governing instrument?	6	KA					
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.	V					
8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the instructions) ▶							
	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General		لا					
b	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	\					
۵	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(I)(3) or	OD	┸					
9	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		V				
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their							
	names and addresses	10		V				
		99	<b>₽</b> E	60000				

Form 99	90-PF (2009) 03 - 604 8110	<u> </u>		Page <b>5</b>
Par	t VII-A Statements Regarding Activities (continued)	7		
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		V
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?	12		V
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?  Website address   None		V	
14	The books are in care of Daniel Bureward Trustee Telephone no. > 802- Located at > 40 George STCRO, BOX (38) BURLINGTON VT ZIP+4 > 053	102	$-\Omega$	499 63
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.	$\top$	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?	Ī		
	disqualified person?			
	(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.)	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	N	4
C	Organizations relying on a current notice regarding disaster assistance check here			
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?			
b	If "Yes," list the years 20, 20, 20, 20  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.)		N	A
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.  20, 20, 20, 20, 20, 20, 20			
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 foundation had excess business holdings in 2009.)	•	<i>A</i> ./.	4
4a b	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	4a		
•	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2009?	4 <u>b</u>		1

	90-PF (2009)	1- 14-		4700 -	P - ~	<u> </u>	4 (- : - : -	n		Pag
	t VII-B Statements Regarding Activiti			4720 N	нау ве н	leguire	d (contin	<u>uea)</u>		
5a	During the year did the foundation pay or incu	-		/^:	4045(*)	\\ <b>0</b>	□Yes	<del>i.</del>	1	
	<ul><li>(1) Carry on propaganda, or otherwise attemp</li><li>(2) Influence the outcome of any specific put</li></ul>						∟i Tes	<b>☑</b> No		
	directly or indirectly, any voter registration		(See Secu			arry Ori,	□Yes	Пи		
	(3) Provide a grant to an individual for travel, s					-	☐ Yes			
	(4) Provide a grant to an organization other th	• •						7	1	1 1
	section 509(a)(1), (2), or (3), or section 4940			_			☐ Yes	∐/No		
	(5) Provide for any purpose other than religion	us, charitab	le, scientifi	ic, literar	y, or educ	cational		_		
	purposes, or for the prevention of cruelty t						□Yes	□/No		
b	,,									م ا
	Regulations section 53.4945 or in a current notice	• -				e 22 of th	e instruct	_	5b	NA
	Organizations relying on a current notice regar	•						▶⊔	1	1 1
C	If the answer is "Yes" to question 5a(4), does						<b></b>	<del>П.</del>		
	because it maintained expenditure responsibil					• • •	L Yes	<b>∐</b> No		
6a	If "Yes," attach the statement required by Reg. Did the foundation, during the year, receive ar				to pay pr	amiume				-
va	on a personal benefit contract?	-	-	-	to pay pit	311101115	Yes	M No		1 1
ь	Did the foundation, during the year, pay premi				nersonal	henefit			6b	Á
	If "Yes" to 6b, file Form 8870.	aris, arcon	y or mano	oay, on c	, persona	Jenom	001111110011	•		
7a	At any time during the tax year, was the foundation	n a party to	a prohibited	d tax shel	ter transac	ction?	Yes	[]No		
	If yes, did the foundation receive any proceed								1	
Dave		0 01 11010 W	.,	ILIC GIRIT	oudbio to	nie nank	saction?	<u> </u>	<u>7b</u>	
Fal	Information About Officers, Direction									ees,
rar	t VIII Information About Officers, Dire and Contractors	ectors, Tru	ıstees, F	oundati	on Man	agers, I	lighly P	aid Er	mploy	
1	t VIII Information About Officers, Dire	ectors, Tru ion manag	ers and th	oundati eir com	ion Mana pensation	agers, l 1 (see pa	dighly P	aid Er	mploy	
1	t VIII Information About Officers, Dire and Contractors	ion manage (b) Title, a	ers and the	eir comp	pensation pensation aid, enter	agers, I	lighly Page 22 of ontributions	the in	mploy struct (e) Expe	
1	Information About Officers, Directors  List all officers, directors, trustees, foundat  (a) Name and address	ion manage (b) Title, a hours devoted	ers and the	eir comp	on Mana pensation pensation	agers, I	lighly Page 22 of	the in	mploy struct (e) Expe	ions).
1 4N d	Information About Officers, Directors  List all officers, directors, trustees, foundat  (a) Name and address  JANE BURCHARD	ion manage (b) Title, a hours devoted	ers and the and average per week to position	eir comp	pensation pensation aid, enter	agers, I	lighly Page 22 of ontributions	the in	mploy struct (e) Expe	ions).
1 AN 2	Information About Officers, Directors  List all officers, directors, trustees, foundat  (a) Name and address  LANE BURCHARD  URLINGTON, VT 05408	ion manage (b) Title, a hours devoted TRUS	ers and the und average oer week to position	eir comp	pensation pensation aid, enter	agers, I	lighly Page 22 of ontributions	the in	mploy struct (e) Expe	ions).
1 4N d	Information About Officers, Directors  List all officers, directors, trustees, foundat  (a) Name and address  JANE BURCHARD	ion manage (b) Title, a hours devoted TRUS	ers and the ers and ers are ers and ers are ers and ers are ers and the ers and ers are ers and the ers and ers are ers are ers are ers are ers and ers are er	eir comp	pensation pensation aid, enter	agers, I	lighly Page 22 of ontributions	the in	mploy struct (e) Expe	ions).
1 AN B ISA	Information About Officers, Directors  List all officers, directors, trustees, foundat  (a) Name and address  LANE BURCHARD  VALINGTON, VT 05408  LASTEVE BOUDAH	ion manage (b) Title, a hours devoted TRUS	ers and the ers and ers are ers and ers are ers and ers are ers and the ers and ers are ers and the ers and ers are ers are ers are ers are ers and ers are er	eir comp	pensation pensation aid, enter	agers, I	lighly Page 22 of ontributions	the in	mploy struct (e) Expe	ions).
AN A	Information About Officers, Directors  List all officers, directors, trustees, foundat  (a) Name and address  LANE BURCHARD  VALINGTON, VT 05408  (B) STEVE BOUGAH  1001 LEBURY, VT 05753	ion manage (b) Title, a hours devoted TRUS 6 HHD	ers and the und average per week to position "TEES"  ME  TEES  ME  TEES  ME  TEES  ME	eir comp	pensation pensation aid, enter	agers, I	lighly Page 22 of ontributions	the in	mploy struct (e) Expe	ions).
AN B ISA MICH Say	Information About Officers, Directors  List all officers, directors, trustees, foundat  (a) Name and address  LISTANE BURCHARD  VALINGTON, VT 05408  (B) STEVE BOUDAH  IDDLE BURY, VT 05753  (I) LEBURY, VT 05753	ion manage (b) Title, a hours devoted  TRUS  CHIO	ers and the and average per week to position TEES / Me	eir comp	pensation pensation aid, enter	agers, I	lighly Page 22 of ontributions	the in	mploy struct (e) Expe	ions).
AN BANGLISA	Information About Officers, Directors  List all officers, directors, trustees, foundat  (a) Name and address  LIST RE BURCHARD  VALINGTON, VT 05408  (A) STEVE BOLLOAH  LIDDLE BURY, VT 05753  (A) LIDDLE BURY, VT 05753	ion manage (b) Title, a hours devoted (FUS) (HH) (TRUS)	ers and the and average of week to position of the state	eir com (c) Com (ff not p	pensation pensation persation add, enter 0)	(d) C employ and defer	dighty Page 22 of ontributions see benefit pred comper	the in	struct (e) Expenditure	ions). ense accordallowance
AN B 15A MICH Say	Information About Officers, Directors  List all officers, directors, trustees, foundat  (a) Name and address  LISTANE BURCHARD  VALINGTON, VT 05408  (B) STEVE BOUDAH  IDDLE BURY, VT 05753  (I) LEBURY, VT 05753	ion manage (b) Title, a hours devoted (FUS) (HH) (TRUS)	ers and the and average of week to position of the state	eir com (c) Com (ff not p	pensation pensation persation add, enter 0)	(d) C employ and defer	dighty Page 22 of ontributions see benefit pred comper	the in	struct (e) Expenditure	ions). ense accordallowance
AN A	Information About Officers, Directors  List all officers, directors, trustees, foundat  (a) Name and address  ANE BURCHARD  VALINGTON, VT 05408  (A) STEVE BOUDAH  (D) LE BURY, VT 05753  (C) LOCHARD  (C) LOCHARD  (C) RUNGTON, VT 05408  Compensation of five highest-paid employ if none, enter "NONE."	ion manage (b) Title, a hours devoted  TRUS  GHID  TRUS  TRU	ers and the und average per week to position in the second	eir comp (c) Com (if not p	pensation pensation add, enter 0-) led on lin	(see pa (d) C employ and defe	dighty Page 22 of ontributions see benefit pred comper	the in to start start on the in to start on the in	struct (e) Experother	ions). ense accordallowance
AN A	Information About Officers, Directors  List all officers, directors, trustees, foundat  (a) Name and address  ANE BURCHARD  VALINGTON, VT 05408  (A) STEVE BOLLOAH  (D) LE BURY, VT 05753  (A) LOTHN BURCHARD  (A) LOTHN BURCHARD  (A) LOTHN BURCHARD  (B) LOTHN BURCHARD  (C) CHARD  (C) CHARD  (C) Compensation of five highest-paid employ if none, enter "NONE."	ion manage (b) Title, a hours devoted  TRUS  GHID  TRUS  TRU	ers and the and average per week to position of the series	eir com (c) Com (ff not p	pensation pensation persation add, enter 0)	(d) C employ and defe	lighty P age 22 of portributions ee benefit p red comper  ee page 2 d) Contribut employee b ends of Contribut employee b plans and of	the in to blans sation	struct (e) Experiment (b) Experiment (c) Experiment (d) Experiment (e) Experiment	ions). ense accordallowance
AN A	Information About Officers, Directors  List all officers, directors, trustees, foundat  (a) Name and address  ANE BURCHARD  VALINGTON, VT 05408  (A) STEVE BOUDAH  (D) LE BURY, VT 05753  (C) LOCHARD  (C) LOCHARD  (C) RUNGTON, VT 05408  Compensation of five highest-paid employ if none, enter "NONE."	ion manage (b) Title, a hours devoted  TRUS  GHID  TRUS  TRU	ers and the and average over week to position in the second of the secon	eir com (c) Com (ff not p	pensation pensation add, enter 0-) led on lin	(d) C employ and defe	lighty Page 22 of ontributions see benefit pred comper	the in to blans sation	struct (e) Experiment (b) Experiment (c) Experiment (d) Experiment (e) Experiment	ions).  ense accordallowance
AN A	Information About Officers, Directors  List all officers, directors, trustees, foundat  (a) Name and address  ANE BURCHARD  VALINGTON, VT 05408  (A) STEVE BOLLOAH  (D) LE BURY, VT 05753  (A) LOTHN BURCHARD  (A) LOTHN BURCHARD  (A) LOTHN BURCHARD  (B) LOTHN BURCHARD  (C) CHARD  (C) CHARD  (C) Compensation of five highest-paid employ if none, enter "NONE."	ion manage (b) Title, a hours devoted  TRUS  GHID  TRUS  TRU	ers and the and average over week to position in the second of the secon	eir com (c) Com (ff not p	pensation pensation add, enter 0-) led on lin	(d) C employ and defe	lighty P age 22 of portributions ee benefit p red comper  ee page 2 d) Contribut employee b ends of Contribut employee b plans and of	the in to blans sation	struct (e) Experiment (b) Experiment (c) Experiment (d) Experiment (e) Experiment	ions).  ense accordallowance
ISA ISA ISA ICH ICH ICH ICH ICH ICH ICH ICH ICH ICH	Information About Officers, Directors  List all officers, directors, trustees, foundat  (a) Name and address  ANE BURCHARD  VALINGTON, VT 05408  (A) STEVE BOLLOAH  (D) LE BURY, VT 05753  (A) LOTHN BURCHARD  (A) LOTHN BURCHARD  (A) LOTHN BURCHARD  (B) LOTHN BURCHARD  (C) CHARD  (C) CHARD  (C) Compensation of five highest-paid employ if none, enter "NONE."	ion manage (b) Title, a hours devoted  TRUS  GHID  TRUS  TRU	ers and the and average over week to position in the second of the secon	eir com (c) Com (ff not p	pensation pensation add, enter 0-) led on lin	(d) C employ and defe	lighty P age 22 of portributions ee benefit p red comper  ee page 2 d) Contribut employee b ends of Contribut employee b plans and of	the in to blans sation	struct (e) Experiment (b) Experiment (c) Experiment (d) Experiment (e) Experiment	ions).  ense accordallowance

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

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. ▶

3 Five highest-paid independent contractors for professional services (see page 23 of the Ins	ructions). If none, enter "NONE.
(a) Name and address of each person paid more than \$50,000 (b) Type of	ervice (c) Compensation
A / A /	
otal number of others receiving over \$50,000 for professional services	<b>&gt;</b>   // //
Part IX-A Summary of Direct Charitable Activities	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such organizations and other beneficiaries served, conferences convened, rysearch papers produced, etc.	as the number of Expenses
1	
3	
*	NA
art IX-B Summary of Program-Related Investments (see page 24 of the instruction	s)
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1	
2	
All other program-related investments. See page 24 of the instructions.	
3	
	A
otal. Add lines 1 through 3	A/A

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art	XIII Undistributed Income (see page 26	of the instruction	ıs)		•
1	Distributable amount for 2009 from Part XI, line 7	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
2	Undistributed income, if any, as of the end of 2009:			·	1 03 T 7 CO
a	Enter amount for 2008 only		1	0	
b	Total for prior years: 20,20,20		F)		<del> </del>
3	Excess distributions carryover, if any, to 2009:	<u></u>			
а	From 2004				1
b	From 2005				
C	From 2006				
d	From 2007				Ì
e	From 2008	Coai			1
f	Total of lines 3a through e	1231			
4	Qualifying distributions for 2009 from Part XII, line 4: ▶ \$			_	
а	Applied to 2008, but not more than line 2a .				
b	Applied to undistributed income of prior years (Election required - see page 26 of the instructions)			•	
C	Treated as distributions out of corpus (Election	n et ele	T		
	required—see page 26 of the instructions) .	MA		<del></del> ,	
d	Applied to 2009 distributable amount .				66
e	Remaining amount distributed out of corpus				1 -0 -0 1
5	Excess distributions carryover applied to 2009	1031			12031
	(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 indicated below:	<i>a</i> .			
a	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	<b>O</b>	ļ <u></u> ļ.		
Ь	Prior years' undistributed income. Subtract line 4b from line 2b		0		
C	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has		.		
	been issued, or on which the section 4942(a)				į
	tax has been previously assessed		0	<del> </del>	
đ	Subtract line 6c from line 6b. Taxable amount—see page 27 of the instructions .		Ô		
e	Undistributed income for 2008. Subtract line				
	4a from line 2a. Taxable amount—see page 27 of the instructions,	<del>-</del>		<u> </u>	
f	Undistributed income for 2009. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2010				1441
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 instructions)				ļ
	Excess distributions carryover from 2004 not		<del>                                     </del>		
8	applied on line 5 or line 7 (see page 27 of the instructions)				
9	Excess distributions carryover to 2010.		<del> </del>		
	Subtract lines 7 and 8 from line 6a	0			
0	Analysis of line 9:		1		
a	Excess from 2005			:	
b	Excess from 2006				
C	Excess from 2007				
d	Excess from 2008				l
_=	LACCOSTICUITZUOS	<u> </u>	ıt	····································	Form <b>990-PF</b> (2009
			,		

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Part						)
1a	If the foundation has received a ruling					
_	foundation, and the ruling is effective for					10) [] 40,405/F)
	Check box to indicate whether the four	<del></del>	operating toundat	Prior 3 years		(3) or 4942(j)(5)
2a	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year (a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total
	investment return from Part X for	(A) 2009	(B) 2006	(4) 2007	(4) 2000	
	each year listed					<del>                                     </del>
	85% of line 2a			-		
Ŭ	fine 4 for each year listed					
d	Amounts included in line 2c not used directly			_		
	for active conduct of exempt activities			<del>                                     </del>		<del>                                     </del>
е	Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c		<i>Y</i> /			
3	Complete 3a, b, or c for the alternative test relied upon:					
а	"Assets" alternative test-enter:	1/	/	//		
	(1) Value of all assets	I//	l /	<del>                                     </del>		
	(2) Value of assets qualifying under		<b> </b> /	<b>X</b>	_	
ь	section 4942(j)(3)(B)(j)	<b></b> /	<b>y</b>			<del>                                     </del>
Đ	of minimum investment return shown in Part X, line 6 for each year listed	/				
C	"Support" alternative test-enter:	1	//		1	
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(VE)) experities)					
	512(a)(5)), or royalties)	<del></del>		<del></del>		
	and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					·
	(3) Largest amount of support from					
	an exempt organization					
D 4	(4) Gross Investment income	_			- bed \$5 000 es -	norm in apports at
Part	XV Supplementary Information any time during the year-				n nau \$5,000 or n	iiota iii assers ar
1	Information Regarding Foundation		I die insaucuon	13.1		
' 8	List any managers of the foundation	wanayers. who have contribu	ited more than 29	6 of the total c	ontributions receive	d by the foundation
_	before the close of any tax year (but o	only if they have co	ontributed more th	nan \$5,000). (Se	ee section 507(d)(2).)	
	NONE		- man of the star	at of a samon	rtion (or on omistly	large portion of the
D	List any managers of the foundation ownership of a partnership or other e	WNO OWN 1076 O	r more of the stot foundation has a :	ax or a corpora 10% or greater	alion (or an equaliy i rinterest.	ange portion or the
	1/01/E	naty) or windi alo	Touridason nas a	. 0 / 0 O. g. 0 a. 0.		
2	Information Regarding Contribution	Grant Gift Los	n. Scholarship, e	tc. Programs		
-	Check here ▶ ☐ if the foundation					d does not accept
	unsolicited requests for funds. If the					
	organizations under other conditions,	complete items 2	a, b, c, and d.			
a	The name, address, and telephone no	imber of the perso	on to whom applic	ations should t	be addressed: $\delta \overline{\nu} z$	1-863-3444
Cho	erlie Burcharto Men	uovial Tr	ust 40 I	Burel	and P.O.	30x 638
b	The form in which applications should	i be submitted and	d information and	materials they	should include: $\beta i$	(RLINGTON, VI
<u> Sil</u>	Any submission deadlines:	est status	ing purp	ose au	Damou 1	06
d	Any restrictions or limitations on av	vards, such as b	y geographical a	reas, charitable	e fields, kinds of in	stitutions, or other
non	e: environmental,	education	not pres	revvatr	on comme	illity
. •	prefe	erred	179		(	Forti 990-PF (2009)

3b

Form 990-PF (2009)

Total

Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual Recipient Foundation show any relationship to any foundation manager or substantial contributor status of Purpose of grant or Amount contribution Name and address (home or business) recipient a Paid during the year 3a **b** Approved for future payment

_	r gros	s amounts unless otherwise indicated.		usiness income	Excluded by sect	on 512, 513, or 514	(e) Related or exempt
	_		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See page 28 of the instructions.)
1	Prog	ram service revenue:					UN HOUGOOD LLY
	ъ –		-				<del>                                     </del>
	c -						<del>                                     </del>
	d						
	e ¯						
	f _			Y]			
	g F	ees and contracts from government agencies				· · · · · · · · · · · · · · · · · ·	
2		bership dues and assessments					
3		est on savings and temporary cash investments	<u> </u>	/_/_		<u> </u>	<b> </b>
4		ends and interest from securities	<i>  </i>	<del> /</del>		//	ļ
5		ental income or (loss) from real estate:	<del></del>	<del>                                     </del>	//	<b>/</b>	
		ebt-financed property	<del>                                     </del>	<del>                                     </del>	<del>                                     </del>	· · · · · · · · · · · · · · · · · · ·	
R		ot debt-financed property	<b></b>	<del>                                     </del>			<del> </del>
7		r investment income		/			
8		or (loss) from sales of assets other than inventory		/			<del> </del>
9		ncome or (loss) from special events		//			1
10		s profit or (loss) from sales of inventory		0			
11		revenue: a	T.		/		
	b _	`					
	c _						
	d _						<u> </u>
	e _			ĺ	<b></b>		ļ
		otal. Add columns (b), (d), and (e)			<u></u>		
		L Add line 12, columns (b), (d), and (e) sheet in line 13 instructions on page 28 to verify				13	·
		B Relationship of Activities to the A			t Purnoses		<del></del>
	e No.	Explain below how each activity for which accomplishment of the foundation's exempt	income is repo	orted in column	(e) of Part XVI	-A contributed i	mportantly to the
	₩	accomplishment of the foundation's exempt   instructions.)	purposes (other	than by providin	g funds for suc	th purposes). (Se	e page 29 of the
				· ·			
				/			<del></del>
		/			<del>// </del> -		
		//		/	/		
		<del></del>		<del>//</del>	<del>'</del>		
		<del></del>	/				
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		i	-				

Form 9	990-PF	(2009)						03	7-604-	-81/9	f Pa	ge <b>13</b>
Par	t XVI		n Regarding Trai ganizations	nsfers To and Trar	nsactio	ns and	Relati					
1	ın s	the organization of	directly or indirectly	engage in any of the section 501(c)(3) orga							Yes	No
а	Tra:		oorting foundation t	o a noncharitable exe	empt org	anızatior	n of: 			1a(1) 1a(2)		
b	(1)		a noncharitable ex	empt organization able exempt organiza						1b(1)		<del></del>
	(3)	Rental of facilities	, equipment, or other	er assets				 		1b(3) 1b(4)		1
c	(6)		ervices or members		citations					1b(5) 1b(6) 1c		1
d	lf th valu	ne answer to any oue of the goods, o	of the above is "Ye ther assets, or serv	es," complete the following given by the repart, show in column	owing so	chedule. undation	Colum	n <b>(b)</b> should foundation r	always shov eceived less	v the fa	aır m	arket
(a) Li	ne no	(b) Amount involved		charitable exempt organizati	<del></del>			transfers, trans				
								···-				
					-							<del></del>
		<del></del>		$\overline{}$	-A							
					//							
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				<i></i>	-							
			/									
					4							
2a b	des	cribed in section 5	ectly or indirectly af 601(c) of the Code (c following schedule	filiated with, or relate other than section 50	l ed to, or 1(c)(3)) o	ne or mo	ore tax- on 527	exempt orga	nizations	] Yes	<b>□</b> ⁄	 No
		(a) Name of organi	zation	(b) Type of org	anization			(c) Desc	ption of relation	nship		
		- · · · · · · · · · · · · · · · · · · ·										
	Under	r penalties of penury. I	declare that I have exar	nined this return, including	accompa	nvina sche	dules and	d statements, ar	nd to the best o	f my kno	wledo	ne and
				preparer (other than taxpay								
		X ALR I	1 Busel	ala.	13	30	18	TA	USTE	٤_		
<b>2</b> c	Sig	nature of officer or trus	itee TR	USTEF	Date	1		Title				
Sign Here	Paid Preparer's	Preparer's	·		Date		Check self-en	ıf nployed ► □	Preparer's id number (see page 30 of th	Signati	ure o	
	g 52	signature Firm's name (or you	re if \	<del></del>		-	L	EIN S				
		Firm's name (or you self-employed), add and ZIP code	ress,			•		EIN ► Phone no.				
		1 20 20 4000	<u> </u>					1				