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Form 990

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No 1545-0047

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

Open to Public Inspection

	A Fo	or the	2009 cal	endar year, or tax year beginning	and	ending				
Ī	B Ch	eck if	Please	C Name of organization			D Em	ployer iden	tifica	tion number
		plicable.	use IRS	DAVID B BOOTHE TR U/W						
	\sqcup	Address change	label or print or	866011974 R50184001	2]			
	لـــا	Name change	type	Doing Business As		, <u> </u>		06-	<u>-602</u>	22009
		Initial return	See	Number and street (or P 0 box if mail is n		Room/suite	E Tele	phone nun	ıber	
<u></u>		Termin- ated	Specific Instruc-	JPMORGAN CHASE BANK, N	A; PO BOX 3038			(4)	14)	977-1210
3	;	Amende	1	City or town, state or country, and ZIP			G Gross	s receipts \$		752,245.
25		Applica tion pending		MILWAUKEE, WI 53201-	3038		H(a) Is	this a grou	p retu	
DUNKTONES	∄ 2	perioning	FNan	ne and address of principal officer:				r affiliates?		Yes X No
A A C				E AS C ABOVE			1			ded? Yes No
a .				us: X 501(c) (3) ◀ (insert no.)	4947(a)(1) or 527	, 	1			t. (see instructions)
-			<u>:: ► N /</u>					roup exemp		
4			organizatio	<u> </u>	ciation Other	L Year	of formati	ion 1945	<u>/ M S</u>	State of legal domicile CT
_	Pa		Summ		ONCO	TAIC CII	TDOOD	m EOD	BO	OMITE
-	8			scribe the organization's mission or most si		TING SU	PPOR	T FOR	ВОС	OTHE
7	PE	_		IAL PARK IN TOWN OF S			41 05	04 64		
	Activities & Governance			s box Lifthe organization disconti		osea ot more	than 25	om aπ το ονα 	- 1	ers. 1
	Ĝ			f voting members of the governing body (P				- }	3	0
	රේ			f independent voting members of the gove	ming body (Part VI, line 1b)				5	0
	ij			ber of employees (Part V, line 2a) ber of volunteers (estimate if necessary)				ŀ	6	0
	;}			is unrelated business revenue from Part VII	L column (C) line 12			ŀ	7a	0.
	Ă۱		_	ated business taxable income from Form 99			-		7b	0.
			ici dinoi		CEIVED		Prio	r Year		Current Year
		8 (Contribute	ions and grants (Part VIII, line 16)				\top		
	Ž	9 F	Program s	service revenue (Part VIII, line 20)	SC				\top	
	Revenue	10 li	nvestmer	nt income (Part VIII, column (A), lines 3, 4, a	Nd 200 2010 9			52,492	2.	133,804.
		11 (Other reve	enue (Part VIII, column (A), lines 5, 6d, 8c, 9	c, 10c, and 11e)	. 🗀		3,645		•
				nue - add lines 8 through 11 (must equal?				56,137	7.	133,804.
-				d similar amounts paid (Part IX, column (A)	42,055	5.	22,282.			
				oald to or for members (Part IX, column (A),						
	တ္က	15 S	Salanes, d	other compensation, employee benefits (Pa	rt IX, column (A), lines 5-10)			13,040).	10,696.
	Expenses	16a F	Profession	nal fundraising fees (Part IX, column (A), line	: 11e)					
	ğ	ьΤ	otal fund	fraising expenses (Part IX, column (D), line :	25) 🕨			11111		
<u></u>	Ψ	17 (Other exp	enses (Part IX, column (A), lines 11a-11d, 1	1f-24f)			47,978		7,771.
∌		18 T	otal expe	enses. Add lines 13-17 (must equal Part IX,	column (A), line 25)			03,073		40,749.
ට		19 F	Revenue	less expenses. Subtract line 18 from line 12			_	46,936	5.	93,055.
≈ 4	Net Assets or Fund Balances					Be		of Current Ye		End of Year
. ر	agai	20 T	otal asse	ets (Part X, line 16)			1,2	73,527	<u>/- </u> _	1,364,249.
] :	<u> </u>	21 7	otal liabi	lities (Part X, line 26)			1 0	<u> </u>		1 064 040
	킾			s or fund balances. Subtract line 21 from lin	ne 20		1,2	73,527	<u>/ • </u>	1,364,249.
コルととなる	Pai	rt II		ture Block						
Ž				Ities of perjury, I declare that I have examined this return, te. Declaration of property other than officer) is based on			ina to the t	Destormy know	vieage a	and belief, it is true, correct,
3				Rei Dan	L			ı AP	D 3	0 2010
-) .	Sign		Sign	ature of officer AUTHORIZED OF	PRICER			Date	16 2	A 5010
' W	Here	'		lature of officer AUTHORIZED OF VIN L REINDL, TRUSTEE	FICER			2010		
		ŀ		e or print name and title	 				—–	
-		-+	· · · ·		Date	Che	eck if	Pro	aparer's	identifying number
	Paid		Preparer's signature	` •	-3.0	self		▶ ☐ (se	e instru	ctions)
1	Prepa	ror'e L	Firm's name	e (or		[611]	ployed F	IN N		_ -
	Use O	ntv	yours if self-employ				냳	.114		
			address, an ZIP + 4				۵	hone no	,	
	May :			s this return with the preparer shown above	o? (see instructions)			110110 110		X Yes No

Form **990** (2009)

Pa	rt III State	ement of l	Progra	m Se	ervice	Acco	mpli	shme	nts				_					<u></u>	Ť
1	Briefly descri					THE	MEM	iori	AL :	PARK	IN	TOWN	OF	STRA	TFORE), (:T		_
								_											-
2	Did the organ	nization und	ertake a	ny sigr	nificant p	rogran	n serv	ıces du	ring th	ne year w	/hich v	vere not l	isted o	n		_	_		
	the prior Form																Yes	X No	
	If "Yes," desc						_									_	٦		
3	Did the organ			_			icant o	change	s in ho	ow it con	ducts,	any prog	ram se	ervices?			Yes	X No	
	If "Yes," desc		-																
4	Describe the																		
	Section 501(ount of g	rants and				
	allocations to	o otners, the	total ex	pense	s, and re	venue	, ir any	, for ea	icn pro	ogram se	ervice	еропеа.							
4a	(Code: ONGOING	G SUPPO) (Expe			22, HE	282 MEM	oncl	uding AL	grants o PARK	f\$ IN	22 TOWN	,282 OF	2 •)(Re STRA	venue \$ ATFORD), (<u>CT</u>)
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4b	(Code:) (Expe	enses \$	 }	•		ıncl	uding	grants o	f \$	· · · · · ·	-) (Re	venue \$				_ _)
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4c	(Code:) (Expe	enses \$	·			ıncl	uding	grants o	f \$ 	<u>. –</u>	•••) (Re	venue \$)
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4d	Other progra		(Describ								\								_
4 -	(Expenses \$			·	cluding g	grants		282) (Hev	enue \$	_						_
4e	Total progra	sm service e	xpense	s -> \$			22,	202	•								QQ	10 (2009)	_

	990 (2009) 866011974 06-6022	009	Р	age 3
Pa	t IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		_X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		X
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and			
	reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5_		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8	L	X
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide			
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments?			
	If "Yes," complete Schedule D, Part V	10		Х
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VIII, IX, or X			
	as applicable	11	X	
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI.			
•	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.			
•	Did the organization report an amount for investments · program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.			
•	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX.			
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.			
•	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	ĺ		
	Schedule D, Parts XI, XII, and XIII.	12		X
12A	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional	<u> </u>		
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
ь	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		<u>X</u>
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			
	or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, Part III	16	<u> </u>	X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			_
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	<u> </u>	X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X

19

19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

Did the organization operate one or more hospitals? If "Yes," complete Schedule H

complete Schedule G, Part III . .

ra	rt tv Checklist of Required Schedules (continued)			,
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the		.,	
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	_X	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			.,
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		<u> </u>
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			,,
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			,,
	Schedule K. If "No", go to line 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		Х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			٠,,
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		Χ
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete			٠,,
	Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties, (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			,,
а		28a		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	-	Х
C	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was			٠,,
	an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Χ_
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			١,,
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			,,
	Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			.,
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X_
34	Was the organization related to any tax-exempt or taxable entity?			.,
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?			.,
	If "Yes," complete Schedule R, Part V, line 2	35		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			v
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	_		1,7
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		<u> </u>
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?		,,	
	Note. All Form 990 filers are required to complete Schedule O.	38	X	l

rait v	Statements negating Other Ind Finings and Tax Outipliance		Yes	No
Form 990 (2	Statements Regarding Other IRS Filings and Tax Compliance	00-0022009		age
F 000 //	009) 866011974	06-6022009	_	
•	DAVID B BOOTHE TR U/W			

			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of		.03	1.40
	U.S. Information Returns. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			1
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 0			İ
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2ь		L
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		X
ь	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3ь		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country: ▶			}
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and			İ
	Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
ь	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		_X
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited			l
	Tax Shelter Transaction?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			1
	any contributions that were not tax deductible?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6ь		ļ
7	Organizations that may receive deductible contributions under section 170(c).			ł
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services			
	provided to the payor?	7a		Х
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			1,
	to file Form 8282?	7c		X
	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal	_		v
_	benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	71		^
9	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		<u> </u>
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the			İ
	supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings	ا ، ا		х
0	at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 4966?	0.		Х
a	Did the organization make a distribution to a donor, donor advisor, or related person?	9a 9b		X
ь 10	Section 501(c)(7) organizations. Enter:	30		
	Initiation fees and capital contributions included on Part VIII, line 12			
a b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			ĺ
'' a	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			ĺ
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		ĺ
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			· · ·

to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

866011974 Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response

Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body 1a 1			
b	Enter the number of voting members that are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		<u>_x</u>
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors or trustees, or key employees to a management company or other person?	3		<u>X</u>
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		X
6	Does the organization have members or stockholders?	6		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the			
	governing body?	7a		<u>X</u>
, p	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year			
	by the following:			
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			v
0	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		<u>X</u>
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)	1	V	Na.
10-	Describe executation have level shorters bronches or offlicted?	10a	Yes	No X
	Does the organization have local chapters, branches, or affiliates? If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates,	104		
	and branches to ensure their operations are consistent with those of the organization?	10ь		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11	X	
11A				
	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a		Х
	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise			_=
-	to conflicts?	12b		
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this is done	12c		
13	Does the organization have a written whistleblower policy?	13		X
14	Does the organization have a written document retention and destruction policy?	14		X
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		_X_
b	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		<u>X</u>
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed NONE	, —		
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available	ior		
	public inspection. Indicate how you make these available. Check all that apply. Own website X Another's website X Upon request			
10	·	nd fine	ncial	
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, as statements available to the public.	io ilia	icidi	
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization.	ion.		
	JPMORGAN CHASE BANK, NA - (203) 972-2205			
	122 MAIN STREET, NEW CANAAN, CT 06840-4709			
		Form	990 (2009)

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation.
 Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

(A) Name and Title	(B) Average	, .		Pos		 (D) Reportable	(E) Reportable	(F) Estimated
	hours per week	Individual trustee or director	lustitutional trustee	Call	Highest compensated a	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
JPMORGAN CHASE BANK, NA TRUSTEE	2.00		х			0.	0.	0
							-	

Pa	rt VII Section A. Officers, Directors, Tra	ıstees, Key Eı	mplo	yee	s, a	nd ł	High	est	Compensated Employ	ees (continued)			
	(A)	(B)				C)			(D)	(E)		(F)	
	Name and title	Average hours	(6)		Pos		n app	ЬA	Reportable compensation	Reportable compensation		Estima amoun	
		per week	Individual trustee or director	Institutional trustee	Officer		Highest compensated E		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC		othe compens from t organize and rela	er sation he ation ated
											Ì		
			<u> </u>	-		_	<u> </u>	ļ			_	**	
		<u> </u>	<u> </u>		-		-				_	<u> </u>	
			L	<u> </u>			<u> </u>						
		-											
		-	<u> </u>	ļ	_		<u> </u>	<u> </u>			_	· · · · · · · · · · · · · · · · · · ·	
												-	•
_		-		<u> </u>			\vdash						
1 h	Total .		<u> </u>	<u> </u>		<u>l</u>	▶	<u> </u>	0.		0.		0.
2	Total number of individuals (including but r	not limited to th	nose	liste	ed al	bove	e) wi	no re	eceived more than \$100	,000 in reportable			•
	compensation from the organization											Yes	0 No
3	Did the organization list any former officer	, director or tru	stee	e, ke	y en	nplo	yee,	or t	nighest compensated er	mployee on	[110
	line 1a? If "Yes," complete Schedule J for s	such individual									ļ	3	X
4	For any individual listed on line 1a, is the sign and related organizations greater than \$15									the organization		4	x
5	Did any person listed on line 1a receive or			-						ices rendered to	ŀ		
	the organization? If "Yes," complete Sched	lule J for such	pers	son								5	X
<u>Sec</u>	ction B. Independent Contractors Complete this table for your five highest co	ompensated in	dep	ende	ent c	onti	racto	ors t	that received more than	\$100,000 of comp	ensa	ation from	
_	the organization. NONE												
	(A) Name and business	address							(B) Description of s	services	C	(C) ompensati	on
													•
								\dashv					
								\exists					
												. <u></u>	
	Total number of independent contractors (includina but r	not li	mite	d to	tho	se li	sted	d above) who received m	nore than			
	\$100,000 in compensation from the organi		- "				0		,				
												Form 990	(2009)

Form	1 99	0 (2	2009) 86601						06-6022	009 P	age 9
Pa				nue							
							(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenu excluded t tax und sections 5 513, or 5	from er 512.
Contributions, gifts, grants and other similar amounts	1	а	Federated campaigns	<u>1a</u>	ļ						
E S		b	Membership dues	. <u>1b</u>	ļ						
an an		C	Fundraising events	<u>1c</u>	 						
je je		d	Related organizations	1d	ļ						
S.E.		е	Government grants (contribu		-	<u>-</u>					
e gi		f	All other contributions, gifts, gran								
E S			similar amounts not included abo	ove . 1f	<u> </u>						
<u> </u>		9	Noncash contributions included in lines	s 1a-1f \$							
0 8	_	h	Total. Add lines 1a-1f								
_	_					Business Code					
Program Service Revenue	2	а									
Se a		b									
E Š		C				·					
200		d			$- \vdash$	· · · · -					
Pro		e •	All other program service reve	anua	— ├						
		g	Total. Add lines 2a-2f	on do	_						
\neg	3		Investment income (including	dividends, ir	nteres	t, and					
	-		other similar amounts)			>	32,319.			32,3	19.
	4		Income from investment of ta	x-exempt bo	nd pro	oceeds >	645.			32,3	45.
	5		Royalties		•	>		·			
			•	(i) Real		(ii) Personal					
	6	а	Gross Rents								
l		b	Less: rental expenses								
-		С	Rental income or (loss)								
1		d	Net rental income or (loss)			<u> </u>					
l	7	а	Gross amount from sales of	(i) Securiti	ies	(ii) Other					
			assets other than inventory	71928	31.						
		b	Less: cost or other basis	61044							
İ			and sales expenses .	61844							
		С	Gain or (loss)	10084	0.		100 040			100 0	40
i	_		Net gain or (loss) .	. ,	. · Ė	. •	100,840.			100,8	40.
9	8	а	Gross income from fundraisir	-	^{γτ}						
Ver			including \$ contributions reported on line								
Other Revenue			D - 4 04 5 40		ا						
ള		h	Less: direct expenses		a b						
δ			Net income or (loss) from fun	draisino even		•					
	9		Gross income from gaming a			<u>-</u>					
	•	-	Part IV, line 19		а						
		ь	Less: direct expenses	_	ь						
ļ			Net income or (loss) from gar	ning activities	s .					1	
ŀ	10		Gross sales of inventory, less								
			and allowances		a						
		b	Less: cost of goods sold		ь						
ļ		С	Net income or (loss) from sale	es of inventor	ry						
ļ			Miscellaneous Reveni	Je	[E	Business Code					
	11	а			_					ļ	
		b		_	_					ļ	
ļ		C			-				<u>—</u>		
		đ	All other revenue	-	L					-	
			Total. Add lines 11a-11d		•		133,804.	0.		133,8	04
93200	12 9	_	Total revenue See instructions	<u> </u>			133,004.	U	<u></u>	Form 990 (
02.04	-10									しゅいい ジラびし	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns

	All other organizations must complete		not required to comple		(D).
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	22,282.	22,282.		
2	Grants and other assistance to individuals in		,		
	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the U.S.				
	See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,		,		
	trustees, and key employees .	10,696.		10,696.	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				··
7	Other salaries and wages				
8	Pension plan contributions (include section 401(k)			T	
	and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees):				
а	Management				
b	Legal	1,668.		1,668.	
c	Accounting	825.		825.	
d	, ,				
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees .				
9	Other .				
12	Advertising and promotion				· · · · · · · · · · · · · · · · · · ·
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials		<u> </u>		· · · · · · · · · · · · · · · · · · ·
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	1,049.		1,049.	
23	Insurance Other eveness ltemine eveness not severed	1,047.		1,045.	
24	Other expenses. Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
а	PERSONAL PROPERTY APPRA	4,023.		4,023.	***
ь	FOREIGN TAXES WITHHELD	206.		206.	
c					
d					
e					
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	40,749.	22,282.	18,467.	0.
26	Joint costs. Check here ▶ ☐ if following				
	SOP 98-2. Complete this line only if the organization		.		
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation				

932010 02-04-10

orm 990 (Part X			00 0	022009 Page 11
<u> </u>		(A) Beginning of year		(B) End of year
1	Cash - non-interest-bearing		1	1,108.
2	Savings and temporary cash investments	185,653.	2	85,418.
3	Pledges and grants receivable, net		3	
4	Accounts receivable, net		4	
5	Receivables from current and former officers, directors, trustees, key			
	employees, and highest compensated employees. Complete Part II			
	of Schedule L		5	
6	Receivables from other disqualified persons (as defined under section			
	4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete			
	Part II of Schedule L		6	
<u>ဖ</u> 7	Notes and loans receivable, net		7	
Assets 8 8	Inventories for sale or use		8	
ž 9	Prepaid expenses and deferred charges		9	
10a	Land, buildings, and equipment: cost or other			
	basis. Complete Part VI of Schedule D 10a			
ь	Less: accumulated depreciation 10b		10c	
11	Investments · publicly traded securities	1,059,589.	11	1,249,438.
12	Investments - other securities. See Part IV, line 11		12	
13	Investments - program-related. See Part IV, line 11		13	
14	Intangible assets		14	
15	Other assets. See Part IV, line 11	28,285.	15	28,285.
16	Total assets. Add lines 1 through 15 (must equal line 34)	1,273,527.	16	1,364,249.
17	Accounts payable and accrued expenses		17	
18	Grants payable .		18	
19	Deferred revenue .		19	
20	Tax-exempt bond liabilities		20	
တ္က 21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
≝ 22	Payables to current and former officers, directors, trustees, key employees,	·		
Liabilities 22	highest compensated employees, and disqualified persons. Complete Part II			
3	of Schedule L		22	
23	Secured mortgages and notes payable to unrelated third parties		23	
24	Unsecured notes and loans payable to unrelated third parties		24	
25	Other liabilities. Complete Part X of Schedule D		25	
26	Total liabilities. Add lines 17 through 25	0.	26	0.
	Organizations that follow SFAS 117, check here and complete			
S	lines 27 through 29, and lines 33 and 34.			
Ë 27	Unrestricted net assets		27	
ଞ୍ଛି 28	Temporarily restricted net assets		28	
29	Permanently restricted net assets		29	
출	Organizations that do not follow SFAS 117, check here 🕨 🗓 and			
5	complete lines 30 through 34.			
ह्य 30	Capital stock or trust principal, or current funds	1,273,527.	30	1,364,249.
ဖ္တို 31	Paid-in or capital surplus, or land, building, or equipment fund	0.	31	0.
Net Assets or Fund Balances 22	Retained earnings, endowment, accumulated income, or other funds	0.	32	0.
ž 33	Total net assets or fund balances	1,273,527.	33	1,364,249.
34	Total liabilities and net assets/fund balances	1,273,527.	34	1,364,249.

Pa	rt XI Financial Statements and Reporting			
			Yes	No
1	Accounting method used to prepare the Form 990: X Cash Accrual Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.			İ
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		_X
b	Were the organization's financial statements audited by an independent accountant?	2b		Х
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit,			
	review, or compilation of its financial statements and selection of an independent accountant?	2c		<u> </u>
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			i
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a			į
	consolidated basis, separate basis, or both:			ĺ
	Separate basis Consolidated basis Both consolidated and separate basis			1
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit			1
	Act and OMB Circular A-133?	3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit			1
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	3ь		
		Form	990 (2009)

SCHEDULE A

(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

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

OMB No 1545-0047

2009

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

DAVID B BOOTHE TR U/W 866011974

Employer identification number

06-6022009

Part I	Reason	for Public Chari	ity Status (All organiz	zations mu	st complet	e this par	t.) See ins	tructions.		J-0022005
			because it is: (For lines							
1 [•	s, or association of chur					١.		
2 🗀			(0(b)(1)(A)(ii). (Attach Sc				(-)(-)(-)	,-		
3 🗔			tal service organization			170(b)(1)	/A\/iii\			
			operated in conjunction					/h)/1\/ / \/ii	i) Enter ti	ne hospital's name
•	city, and sta			***************************************	pital acco	1000 111 00		(3)(1)(4)(1)	.,. Littor ti	no noophal o namo,
5 🗀	-		benefit of a college or u	niversity o	wned or or	nerated by	a governi	mental uni	t describe	ed in
у	=	(b)(1)(A)(iv). (Comple		involuty of		,	a governi	morna, am	. 000000	
• 🗆			ent or governmental uni	t describe	dın sectio	n 170/h)/:	11/41/61			
7	•		eives a substantial part					or from the	general n	while described in
,	J	(b)(1)(A)(vi). (Comple	•	or its supp	ort nom a	governin	and dine	»	gonorarp	dono described in
в 🗀			ection 170(b)(1)(A)(vi).	(Complete	Part II)					
9 🗆	•		eives: (1) more than 33			rom contri	butions n	nembershi	n fees an	d aross receipts from
•	•	•	nctions - subject to certa						-	
			axable income (less sec							
		509(a)(2). (Complete	•		54	000000		,, inconge		
10 🗀			perated exclusively to te	st for publ	ic safety. S	See sectio	n 509(a)(4	4).		
11 X	•		perated exclusively for the	•	-			-	v out the i	ourooses of one or
	Ū	•	ations described in secti		•					•
	•		organization and compl		-		-,		-,,-,-	
	а Пуре		7		e III - Fund		tegrated		ďΧ	Type III - Other
e X			it the organization is not			-	-	r more dis		
	, .	-	han one or more publicl		-					
f		•	ten determination from		-					
•		organization, check th			· · · · · · · · · · · · · · · · · ·	P, . , P -	,,			
9		•	organization accepted a	nv aift or c	ontribution	I from anv	of the foll	owina per	sons?	
9	_		irectly controls, either a							Yes No
			upported organization?		, , , , , , , , , , , , , , , , , , , ,	•		``		11g(i) X
	-	• •	described in (i) above?	,		•				11g(ii) X
	• •	•	person described in (i)		e?					11g(iii) X
h	• •	•	about the supported or				-			<u> </u>
		3	• •		•					
	e of supported	(ii) EIN	(iii) Type of organization	P '	organization sted in your		u notify the	Torganizati	on in col 📙	(vii) Amount of support
υιί	janization		(described on lines 1-9 above or IRC section	governing	document?	(i) of you	r support?	(i) organiz U S	2 111 1116	Support
			(see instructions))	Yes	No	Yes	No	Yes	No	
TOWN		06 6002102				v		·		ງາ ງວາ
STRAT	FORD	06-6002103	8	X	 	Х		X		22,282.
				<u> </u>	 					
		<u> </u>		 				 		
				 	-	 	ļ		 	
				1						
				ļ	ļ	ļ	ļ	ļ		
_										22 202
Total		<u> </u>	1	1	<u> </u>	<u> </u>	<u> </u>	1	<u> </u>	22,282.
LHA For	Privacy Act as	nd Paperwork Redu	ction Act Notice, see t	ne instruc	tions for			Schedul	e A (Form	990 or 990-EZ) 2009

932021 02-08-10

Form 990 or 990-EZ.

	edule A (Form 990 or 990-EZ) 2009	0	Described to	Castiera 470	VI-V/4V/AV/:	J 470/L\/4\/4\/	Page 2
PE	Support Schedule for	-			ν(ο)(τ)(Α)(IV) an	a 1/U(D)(1)(A)(\	/I)
	(Complete only if you checke	a the box on line 5	o, r, or o or Part I.	<u> </u>	 		
_	ction A. Public Support	4 3 0005	1 "	11000	1 (2.000	1 () 2000	
	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
_	include any "unusual grants.")			·	<u> </u>		
2	Tax revenues levied for the organ-	,					
	ization's benefit and either paid to						
_	or expended on its behalf				-		
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge				+		
4	Total. Add lines 1 through 3			 	1		
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
•	• •			 	-		
	Public support. Subtract line 5 from line 4 ction B. Total Support	<u> </u>	<u> </u>	L		.1	
	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	Amounts from line 4	(a) 2003	(0) 2000	(6) 2007	(u) 2008	(e) 2009	(i) rotai
8	Gross income from interest,			 	 		
•	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources						
9	Net income from unrelated business						
3	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV.)						
11	Total support. Add lines 7 through 10						
	Gross receipts from related activities,	etc (see instructi	one)	}	<u> </u>	12	
	First five years. If the Form 990 is for	•	•	rd fourth or fifth t	tay vear as a sectio		
	organization, check this box and stop		o mot, 0000ma, tm	, , , , , , , , , , , , , , , , , , , ,	iai yoar ao a ooone	71, 00 1 (0)(0)	▶□
Se	ction C. Computation of Publ		rcentage				
	Public support percentage for 2009 (column (f))		14	%
15	Public support percentage from 2008		-	· · · · · · · · · · · · · · · · · · ·		15	%
16a	33 1/3% support test - 2009.If the o			n line 13, and line	14 is 33 1/3% or n	nore, check this bo	x and
	stop here. The organization qualifies	_					▶□
Ł	33 1/3% support test - 2008.If the o		_			or more, check th	ıs box
	and stop here. The organization qual	_					▶□
178	10% -facts-and-circumstances tes	· -			e 13, 16a, or 16b. a	and line 14 is 10%	or more,
	and if the organization meets the "fac	_					
	meets the "facts-and-circumstances"					3	. ▶□
ł	10% -facts-and-circumstances tes	_	•			17a, and line 15 is	10% or
	more, and if the organization meets the	-					
	organization meets the "facts-and-circ				•		▶□

Schedule A (Form 990 or 990-EZ) 2009

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Section A. Public Support						
Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
Gifts, grants, contributions, and	15/ 2000	\3/2000	,5, 2007	(3) 2000	\5,2000	11/10/01
membership fees received. (Do not				ľ		
include any "unusual grants.")						
2 Gross receipts from admissions,						
merchandise sold or services per-						
formed, or facilities furnished in						
any activity that is related to the						
organization's tax-exempt purpose						
3 Gross receipts from activities that		}				
are not an unrelated trade or bus-				·		
iness under section 513					 	
4 Tax revenues levied for the organ-						
ization's benefit and either paid to						
or expended on its behalf						
5 The value of services or facilities						
furnished by a governmental unit to						
the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and						
3 received from disqualified persons						
b Amounts included on lines 2 and 3 received						
from other than disqualified persons that						
exceed the greater of \$5,000 or 1% of the						
amount on line 13 for the year						-
c Add lines 7a and 7b		 			1.	
8 Public support (Subtractline 7c from line 6)	<u>!</u>	1	<u> </u>	1	<u> </u>	L
Section B. Total Support	4 1 0005	1 (1) 0000	4 1 0007	1 1 2 2 2 2 2	1 ,,,,,,,,,,	(0.T.)
Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6					+	
10a Gross income from interest, dividends, payments received on						
securities loans, rents, royalties						
and income from similar sources						
b Unrelated business taxable income						
(less section 511 taxes) from businesses						
acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business						
activities not included in line 10b,						
whether or not the business is						
regularly carried on 12 Other income. Do not include gain		<u> </u>		 	 	
or loss from the sale of capital					1	
assets (Explain in Part IV.)						
13 Total support (Add lines 9, 10c, 11, and 12)		1. <i>E</i>			504/-)/0)	
14 First five years. If the Form 990 is fo	or the organization	's tirst, second, thii	a, tourth, or titth t	ax year as a secti	on 501 (c)(3) organiz	ation,
check this box and stop here						P L_
Section C. Computation of Pub						
15 Public support percentage for 2009		<u>-</u>	column (f))		15	
16 Public support percentage from 200			· · ·		16	
Section D. Computation of Inve	stment Incom	<u>ne Percentage</u>				
17 Investment income percentage for 2	009 (line 10c, colu	ımn (f) dıvıded by lı	ne 13, column (f))	••	17	
18 Investment income percentage from	2008 Schedule A	, Part III, line 17			18	
19a 33 1/3% support tests - 2009. If the			on line 14, and line	e 15 is more than	33 1/3%, and line 1	7 is not
more than 33 1/3%, check this box						
						and
b 33 1/3% Support tests - 2008. If the				, 10 10 11		
b 33 1/3% support tests - 2008. If the	-		nization qualifies :	as a publicly supp	orted organization	▶ .
line 18 is not more than 33 1/3%, ch 20 Private foundation. If the organization	eck this box and s	top here. The orga				▶□

Schedule D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047 Open to Public Inspection

Name of the organization

DAVID B BOOTHE TR U/W

Employer identification number

	866011974		06-6022009
Par	t I Organizations Maintaining Donor Advise	ed Funds or Other Similar Funds	or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, lin	e 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year .	·-	
_			
2	Aggregate contributions to (during year)		· · · · · · · · · · · · · · · · · · ·
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		·
5	Did the organization inform all donors and donor advisors in	-	
	are the organization's property, subject to the organization's	_	Yes No
6	Did the organization inform all grantees, donors, and donor a		
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpose	
	impermissible private benefit?		Yes No
Pa			art IV, line 7.
1	Purpose(s) of conservation easements held by the organizat	ion (check all that apply).	
	Preservation of land for public use (e.g., recreation or p	pleasure) Preservation of an his	torically important land area
	Protection of natural habitat	Preservation of a certi	fied historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form	of a conservation easement on the last
	day of the tax year.		
	•		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
c	Number of conservation easements on a certified historic sti	ructure included in (a)	2c
d	Number of conservation easements included in (c) acquired		2d
3	Number of conservation easements modified, transferred, re		• • • • • • • • • • • • • • • • • • • •
3	vear	neased, extinguished, or terminated by the	organization during the tax
4	Number of states where property subject to conservation ea	seament is located	
5	Does the organization have a written policy regarding the pe		
3	violations, and enforcement of the conservation easements		Yes No
e	Staff and volunteer hours devoted to monitoring, inspecting,		
6	Amount of expenses incurred in monitoring, inspecting, and	_	
7	Does each conservation easement reported on line 2(d) about		· · · · · · · · · · · · · · · · · · ·
8		ve satisfy the requirements of section 170	Yes No
	and section 170(h)(4)(B)(ii)?		· _ · · ·
9	In Part XIV, describe how the organization reports conservat		
	include, if applicable, the text of the footnote to the organiza	mion's financial statements that describes	the organization's accounting for
Do	conservation easements † III Organizations Maintaining Collections of	of Art Historical Transuras or O	ther Similar Assets
741	Complete if the organization answered "Yes" to Form		tilei Olilillai Assets.
	Complete if the organization answered Tes to Form	1 930, r at 1 v, line 0.	
			di di di di di di di di di di di di di d
1a	If the organization elected, as permitted under SFAS 116, no		
	treasures, or other similar assets held for public exhibition, e	· ·	olic service, provide, in Part XIV, the text of
	the footnote to its financial statements that describes these		
ь	If the organization elected, as permitted under SFAS 116, to		
	or other similar assets held for public exhibition, education, of	or research in furtherance of public service	, provide the following amounts relating to
	these items:		
	(i) Revenues included in Form 990, Part VIII, line 1	• ••	> \$
	(ii) Assets included in Form 990, Part X		> \$
2	If the organization received or held works of art, historical tre	easures, or other similar assets for financial	gain, provide
	the following amounts required to be reported under SFAS 1	116 relating to these items:	
а	Revenues included in Form 990, Part VIII, line 1		> \$
ь	Assets included in Form 990, Part X		. > \$

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	dule D (Form 990) 2009 8660119		_							9 Page 2
Par	t III Organizations Maintaining C	Collections of A	rt, His	storical Tr	easures,	or Oth	<u>er Sim</u>	<u>ilar Asse</u>	ts (conti	nued)
3	Using the organization's acquisition, access	ion, and other record	ls, che	ck any of the	following that	at are a s	ignifican	t use of its	collection	n items
	(check all that apply):		_	•						
а	Public exhibition	d	╵╠	1	hange progr	ams				
b	Scholarly research	е		Other						
c	Preservation for future generations									
4	Provide a description of the organization's c	ollections and explai	n how	they further t	he organızat	ion's exe	mpt pur	pose in Pai	t XIV.	
5	During the year, did the organization solicit of	or receive donations	of art, I	nistorical trea	sures, or oth	er sımıla	r assets		_	
	to be sold to raise funds rather than to be m								Yes	No
Par	reported an amount on Form 990, Pa		ete if oi	rganization ai	nswered "Ye	s" to For	m 990, F	Part IV, line	9, or	
1a	Is the organization an agent, trustee, custod	lian or other intermed	dary fo	r contribution	ns or other as	ssets not	ınclude	d	_	
	on Form 990, Part X?								Yes	☐ No
ь	If "Yes," explain the arrangement in Part XIV	and complete the fo	llowing	table:						
									Amount	
С	Beginning balance						1c			
d	Additions during the year						1d			
е	Distributions during the year						1e			,
f	Ending balance						1f	<u> </u>		
2a	Did the organization include an amount on F	form 990, Part X, line	21?					. L	_ Yes	L No
	If "Yes," explain the arrangement in Part XIV									
Par	t V Endowment Funds. Complete	if the organization an	swered	d "Yes" to Fo	rm 990, Part	IV, line	10.		,	
		(a) Current year	(b)	Prior year	(c) Two year	rs back	(d) Three	years back	(e) Four	years back
1a	Beginning of year balance				·					
b	Contributions			···						
C	Net investment earnings, gains, and losses						, 	·		
đ	Grants or scholarships									
e	Other expenditures for facilities									
	and programs									
f	Administrative expenses .									
g	End of year balance									
2	Provide the estimated percentage of the year	ar end balance held a	as:							
а	Board designated or quasi-endowment		_%							
b	Permanent endowment	%								
С	Term endowment ▶	. %								
За	Are there endowment funds not in the posse	ession of the organiz	ation th	nat are held a	nd administe	ered for t	he orgar	nization		
	by:									Yes No
	(i) unrelated organizations								3a(i)	
	(ii) related organizations			•					3a(ii)	
ь	If "Yes" to 3a(ii), are the related organization	•							3ь	
4	Describe in Part XIV the intended uses of the									
Par	t VI Investments - Land, Building	gs, and Equipm	ent. S	ee Form 990	, Part X, line	10.				
	Description of investment	(a) Cost or o basis (investr		1 ''	or other (other)	1 ' '	ccumula preciatio	I	(d) Bool	value
1a	Land									
b	Buildings		_				_			
С	Leasehold improvements		_							
d	Equipment						<u> </u>			
e_	Other .					<u> </u>			_	
Total	. Add lines 1a through 1e. (Column (d) must e	equal Form 990, Part	X, colu	ımn (B), line 1	0(c).) .			>		0.

Part VII	Investments - Other Securities. S	ee Form 990, Part X, lir	ne 12.		
	a) Description of security or category (including name of security)	(b) Book value		(c) Method of values or end-of-year ma	
Financial de	erivatives	<u> </u>			
Closely-held	d equity interests			- · · · · · · · · · · · · · · · · · · ·	
Other					
					
 		-			
		 			
					
		<u> </u>			
_		+			
Total (Col/I	b) must equal Form 990, Part X, col (B) line 12)	 			
Part VIII	I Investments - Program Related.	See Form 990, Part X.			
				(c) Method of valu	ation:
	(a) Description of investment type	(b) Book value	G	ost or end-of-year ma	
					_
					
				- 	
		-	-		
				·	
					······
	b) must equal Form 990, Part X, col (B) line 13)	<u> </u>			
Part IX					(h) De alcuelus
	(a) Description			(b) Book value
		<u></u>	······································	· · · · · · · · · · · · · · · · · · ·	-
	· · · · · · · · · · · · · · · · · · ·				
					-

				· · · · ·	
				-	
Total (Coli	umn (b) must equal Form 990, Part X, col (B) lir			<u> </u>	
Part X					
1.	(a) Description of liability	T	(b) Amount		7 11 P
Federal Inc	ome taxes				
				1	
				1	
				7	
				1	
Total. (Colu	umn (b) must equal Form 990, Part X, col (B) lir	ne 25.) . >		Ī	
	Footnote. In Part XIV, provide the text of the fo		ion's financial statemen	ts that reports the or	ganization's liability for

uncertain tax positions under FIN 48.

932053 02-01-10

SCHEDULE 1 (Form 990) Department of the Treasury Internat Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

OMB No 1545-004/	2009
ٔ ر	

Open to Public

Inspection

ş | **Employer identification number** 06-6022009 BOOTHE MEMORIAL PARK IN TOWN OF STRATFORD, CT (h) Purpose of grant ONGOING SUPPORT FOR or assistance X Yes recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed

(c) IRC section if applicable cash grant assistance or government assistance or government cash and address of organization of cash assistance or government cash assistance or government cash assistance or government cash assistance or government cash assistance cash ass Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection Ö Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. 22,282 501(C)(3) Enter total number of section 501(c)(3) and government organizations DAVID B BOOTHE TR U/W 06-6002103 General Information on Grants and Assistance criteria used to award the grants or assistance? Enter total number of other organizations 866011974 1 (a) Name and address of organization Name of the organization STRATFORD, CT 06497 TOWN OF STRATFORD 2725 MAIN STREET Parti Part

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

06-6022009

866011974

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Use Part IV and Schedule I-1 (Form 990) if additional space is needed. Schedule I (Form 990) 2009
Part III Grants and Oth

Schedule I (Form 990) 2009 (f) Description of non-cash assistance (e) Method of valuation (book, FMV, appraisal, other) SERVICES GROUP DESIGNATED AS THE NATIONAL CHARITABLE ACCOUNT ADMINISTRATION Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. NCAA DUTIES INCLUDE ANNUAL REPORTS ARE REGULARLY OBTAINED FROM REGULATIONS GOVERNING CONTINUITY AND MAINTENANCE OF EXEMPT STATUS WHILE LINE 2: TRUST ACCOUNTING RECORDS ARE MAINTAINED IN A DEDICATED ADMINISTRATIVE RESEARCHING TAX STATUS OF POTENTIAL CHARITABLE RECIPIENTS, PROVIDING TRUST REVIEW, ISSUING REPORTS, IDENTIFYING CHARITABLE RECIPIENTS, ADMINISTRATORS IN THIS GROUP FOLLOW THE RULES AND (d) Amount of non-cash assistance (c) Amount of cash grant ALSO CARRYING OUT INDIVIDUAL TRUSTOR INTENT. N.A. HAS (b) Number of recipients DEDICATED TRUST ACCOUNTING SYSTEM. JPMORGAN CHASE BANK, (a) Type of grant or assistance PART GROUP (NCAA). SYSTEM SCHEDULE I, 932102 02-02-10 Part IV THIS

Schedule I (Form 990) 2009 8660 119 74 06-60 22009 Page 2
EXPENDITURE RESPONSIBILITY REPORTS AS NEEDED AND MAKING NECESSARY INCOME
DISTRIBUTIONS FROM EACH TRUST. THIS TRUST IS SUPPORTED BY NCAA AS WELL AS
AN INDIVIDUAL TRUST ADMINISTRATOR.
KEVIN L REINDL, TRUSTEE

SCHEDULE O

Department of the Treasury

(Form 990)

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

2009 Open to Public Inspection

Name of the organization

DAVID B BOOTHE TR U/W 866011974

Employer identification number 06-6022009

FORM 990, PART VI, SECTION B, LINE 11: TRUSTEE REVIEWS ALL UNDERLYING FINANCIAL AND FACTUAL INFORMATION PRIOR TO FILING IRS FORM 990. FORM 990, PART VI, SECTION C, LINE 18: COPIES OF THE TAX RETURNS ARE AVAILABLE TO THE PUBLIC THROUGH SEVERAL INTERNET WEBSITES. FORM 990, PART VI, SECTION C, LINE 19: AS TRUSTEE, JPMORGAN CHASE BANK, N.A., MAINTAINS A CLOSE AND CONTINUOUS WORKING RELATIONSHIP WITH THE OFFICERS OF THE SUPPORTED ORGANIZATIONS. THE GOVERNING DOCUMENTS ARE NOT AVAILABLE TO THE GENERAL PUBLIC, BUT HAVE BEEN GIVEN AND ARE AVAILABLE TO ALL INTERESTED PARTIES SUCH AS BENEFICIARIES, TRUSTEES, EXECUTORS, ETC. JPMORGAN CHASE BANK, N.A., DOES NOT HAVE A PUBLIC CONFLICT OF INTEREST POLICY, HOWEVER, THE GOVERNING DOCUMENTS AND STATE LAW IMPOSE LIMITATIONS OF TRUSTEE POWERS THAT JPMORGAN CHASE BANK, N.A., STRICTLY FOLLOWS. FINANCIAL STATEMENTS ARE SENT TO EACH CHARITABLE BENEFICIARY FOR REVIEW AND COMMENT. FORM 990, PART VII CONTACT ADDRESSES FOR OFFICERS, DIRECTORS, ETC: JPMORGAN CHASE BANK, NA - P.O. BOX 3038, MILWAUKEE, WI 53201-3038

Account Summary

PRINCIPAL

Asset Allocation	Ending Market Value	Estimated Current Annual Income Allocation	Current Allocation
Equity	818,343 99	11,728 63	%09
Cash & Short Term	85,418 09	102 50	%9
Fixed Income	465,912 12	17,929 92	34%
Market Value	\$1,369,674.20		100%

Asset Allocation Cash & Short Term Fixed fixed Income

DAVID B. BOOTHE ACCT. R50184002 For the Period 8/1/09 to 12/31/09

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-	ž

Cash Position	Ending Market Value
Cash Balance	1,108 24
Accruals	2,053 34
Market Value	\$3.161.58

Account Summary continued

Tax Summary	Current Period Value	Year-to-Date Value	
Domestic Dividends/Distributions	12,969 08	12,969 08	LT Capital Gain Distributions
Foreign Dividends	18 29	18 29	ST Realized Gain/Loss
Interest Income	2,349 97	2,349 97	LT Realized Gain/Loss
Taxable Income	\$15,337.34	\$15,337.34	Realized Gain/Loss
Tax-Exempt Income	645 01	645 01	
Tax-Exempt Income	\$645.01	\$645.01	

\$100,721.06	\$100,721.06	Realized Gain/Loss
96'026'86	98,970 96	LT Realized Gain/Loss
630 55	630 55	ST Realized Gain/Loss
1,11955	1,119 55	LT Capital Gain Distributions
Year-to-Date Value	Current Period Value	

DAVID B. BOOTHE ACCT. R50184002 For the Period 8/1/09 to 12/31/09 To-Date Value \$34,818.56

Unrealized Gain/Loss

Equity Summary

DAVID B. BOOTHE ACCT R50184002 For the Period 8/1/09 to 12/31/09

Asset Categories	Ending Market Value	Current Allocation	Ä
US Large Cap	355,830 76	26%	
US Mid Cap/Small Cap	200,889 81	15%	
Non US Equity	250,368 18	18%	
Emerging Markets	11,255 24	1%	
Total Value	\$818,343.99	%09	

	ta oznaci
Market Value/Cost	Period Value
Market Value	818,343 99
Tax Cost	782,357 28
Unrealized Gain/Loss	35,986 71
Estimated Annual Income	11,728 63
Accrued Dividends	624 92
Yield	1 43%

US Large Cap	_Non US Equity
ees Fquity Markets	all Cap
Asset Categories	US Mid CapiSmail Cap_

DAVID B. BOOTHE ACCT. R50184002 For the Period 8/1/09 to 12/31/09

Equity Detail

	Quantity	Price	Market Value	Tax Cost	An Unrealized Gan/Loss	Estimated Annual Income Accrued Dividends	Yıeld
US Large Cap							
ABBOTT LABORATORIES 002824-10-0 ABT	70 000	53 99	3,779.30	3,260 60	518 70	112 00	2 96%
ADVANCED AUTO PARTS INC 00751Y-10-6 AAP	20 000	40 48	09 608	00 608	09 0	4 80 1 20	0 59%
AETNA INC 00817Y-10-8 AET	55 000	31 70	1,743 50	1,711 60	31 90	2 20	0 13%
AFLAC INC 001055-10-2 AFL	30 000	46 25	1,387 50	1,330 17	57 33	33 60	2 42%
AMAZON COM INC 023135-10-6 AMZN	5 000	134 52	672 60	457 85	214 75		
ANADARKO PETROLEUM CORP 032511-10-7 APC	15 000	62 42	936 30	952 50	(16 20)	5 40	0 58%
APACHE CORP 037411-10-5 APA	25 000	103 17	2,579 25	2,333 30	245 95	15 00	0 58%
APPLE INC. 037833-10-0 AAPL	20 000	210 73	4,214 64	3,720 60	494 04		
APPLIED MATERIALS INC 038222-10-5 AMAT	140 000	13 94	1,951 60	1,858 40	93 20	33 60	1 72%
AT&T INC 00206R-10-2 T	85 000	28 03	2,382 55	2,294 81	87 74	142 80	2 99 %
BANK OF AMERICA CORP 060505-10-4 BAC	240 000	15 06	3,614 40	4,203 06	(588 66)	09 6	0 27 %

Page 5 of 74

DAVID B. BOOTHE ACCT. R50184002 For the Period 8/1/09 to 12/31/09

	Quantity	Price	Market Value	Tax Cost	Unrealized Gain/Loss	Estimated Annual Income Accrued Dividends	Yield
US Large Cap							
BANK OF NEW YORK MELLON CORP 064058-10-0 BK	80 000	27 97	2,237 60	2,388 80	(151 20)	28 80	1 29%
BAXTER INTERNATIONAL INC 071813-10-9 BAX	25 000	58 68	1,467 00	1,471 75	(4 75)	29 00 7 25	1 98%
BB & T CORP 054937-10-7 BBT	35 000	25 37	887 95	1,015 00	(127 05)	21 00	2 36%
BOEING CO 097023-10-5 BA	15 000	54 13	81195	796 35	15 60	25 20	3 10%
BRISTOL MYERS SQUIBB CO 110122-10-8 BMY	65 000	25 25	1,641 25	1,463 79	177 46	83 20 20 80	5 07 %
CARDINAL HEALTH INC 14149Y-10-8 CAH	25 000	32 24	806 00	703 25	102 75	17 50 4 38	2 17%
CATERPILLAR INC 149123-10-1 CAT	15 000	56 99	854 85	795 15	59 70	25 20	2 95 %
CELGENE CORPORATION 151020-10-4 CELG	45 000	55 68	2,505 60	2,493 97	11 63		
CHEVRON CORP 166764-10-0 CVX	35 000	76 99	2,694 65	2,547 65	147 00	95 20	3 53%
CISCO SYSTEMS INC 17275R-10-2 CSCO	205 000	23 94	4,907 70	3,432 60	1,475 10		
CITIGROUP INC 172967-10-1 C	360 000	331	1,191 60	1,646 56	(454 96)		
COACH INC 189754-10-4 COH	20 000	36 53	730 60	674 08	56 52	00 9	0 82%

DAVID B. BOOTHE ACCT. R50184002 For the Period 8/1/09 to 12/31/09

	Quantity	Price	Market Value	Tax Cost	Unrealized Gain/Loss	Estimated Annual Income Accrued Dividends	Yield
US Large Cap							
COCA COLA CO 191216-10-0 KO	20 000	57 00	1,140 00	1,147 40	(7 40)	32 80	2 88 %
COMCAST CORP CL A 20030N-10-1 CMCS A	92 000	16 86	927 30	930 67	(3 37)	20 79	2 24%
CONOCOPHILLIPS 20825C-10-4 COP	40 000	51 07	2,042 80	1,867 60	175 20	80 00	3 92%
CORNING INC 219350-10-5 GLW	125 000	1931	2,41375	1,969 89	443 86	25 00	1 04 %
CVS/CAREMARK CORPORATION 126650-10-0 CVS	000 06	32 21	2,898.90	3,189 96	(291 06)	27 45	% 56 0
DEERE & CO 244199-10-5 DE	20 000	54 09	2,704 50	2,237 50	467 00	56 00 14 00	2 07 %
DEVON ENERGY CORP 25179M-10-3 DVN	35 000	73 50	2,572 50	2,491 21	81 29	22 40	0 87 %
DOW CHEMICAL CO 260543-10-3 DOW	80 000	27 63	2,210 40	2,114 97	95 43	48 00 12 00	2 17 %
EATON VANCE SPL INVT TR VALUE FD CL I 277905-64-2 EILV X	2,541 296	16 78	42,642 95	40,000 00	2,642 95	655 65	1 54%
EDISON INTERNATIONAL 281020-10-7 EIX	65 000	34 78	2,260 70	2,249 65	11 05	81 90 20 48	3 62%
EMERSON ELECTRIC CO 291011-10-4 EMR	30 000	42 60	1,278 00	1,213 85	64 15	40 20	3 15%

DAVID B. BOOTHE ACCT. R50184002 For the Period 8/1/09 to 12/31/09

	Quantity	Price	Market Value	Tax Cost	Unrealized Gain/Loss	Estimated Annual Income Accrued Dividends	Yield
IIG I and Can							
EOG RESOURCES INC 26875P-10-1 EOG	15 000	97 30	1,459 50	1,240 50	219 00	8 70	%090
EXXON MOBIL CORP 30231G-10-2 XOM	000 09	68 19	4,091 40	197 25	3,894 15	100 80	2 46%
FREEPORT-MCMORAN COPPER & GOLD INC CL B 35671D-85-7 FCX	40 000	80 29	3,211 60	2,870 40	341 20	24 00	0 75%
GENERAL MILLS INC 370334-10-4 GIS	15 000	70.81	1,062 15	913 50	148 65	29 40	277%
GILEAD SCIENCES INC 375558-10-3 GILD	40 000	43.27	1,730 80	1,858 80	(128 00)		
GOLDMAN SACHS GROUP INC 38141G-10-4 GS	22 000	168 84	3,714 48	1,670 13	2,044 35	30 80	0 83%
GOOGLE INC CL A 38259P-50-8 GOOG	000 6	619 98	5,579 82	4,508 46	1,071 36		
HARTFORD CAPITAL APPRECIATION FUND 416649-30-9 ITHI X	664 231	30 61	20,332 11	20,000 00	332 11	284 95	1 40%
HEWLETT-PACKARD CO 428236-10-3 HPQ	125 000	5151	6,438 75	5,877 04	56171	40 00	0 62%
HONEYWELL INTERNATIONAL INC 438516-10-6 HON	20 000	39 20	784 00	822 08	(38 08)	24 20	3 09%
INTERNATIONAL GAME TECHNOLOGY 459902-10-2 IGT	25 000	18 77	469 25	548 75	(05 62)	6 00	1 28%

DAVID B. BOOTHE ACCT. R50184002 For the Period 8/1/09 to 12/31/09

	Quantity	Price	Market Value	Tax Cost	Unrealized Gain/Loss	Estimated Annual Income Accrued Dividends	Yield
US Large Cap							
INTERNATIONAL BUSINESS MACHINES CORP 459200-10-1 IBM	20 000	130 90	2,618 00	1,642 80	975 20	44 00	1 68%
IVY LARGE CAP GROWTH FUND - I 466001-20-3 IYGI X	3,662.842	11 65	42,672 11	41,500 00	1,172 11	256 39	%090
JOHNSON CONTROLS INC 478366-10-7 JCI	85 000	27 24	2,315 40	1,210 83	1,104 57	44 20 11 05	191%
JUNIPER NETWORKS INC 48203R-10-4 JNPR	000 09	26 67	1,600 20	1,679 40	(79 20)		
MASTERCARD INC - CLASS A 57636Q-10-4 MA	5 000	255 98	1,279 90	1,125 10	154 80	3 00	0 23%
MERCK & CO INC 58933Y-10-5 MRK	120.000	36 54	4,384 80	3,801 60	583 20	182 40 45 60	4 16%
METLIFE INC 59156R-10-8 MET	25 000	35 35	883 75	973 75	(00 06)	18 50	2 09%
MICROSOFT CORP 594918-10-4 MSFT	270 000	30 48	8,229 60	6,338 37	1,891 23	140 40	171%
MONSANTO CO 61166W-10-1 MON	15 000	81 75	1,226 25	1,192 65	33 60	15 90	1 30%
MORGAN STANLEY 617446-44-8 MS	70 000	29 60	2,072 00	2,242 10	(170 10)	14 00	% 89 0
NATIONAL SEMICONDUCTOR CORP 637640-10-3 NSM	65 000	15 36	998 40	957 45	40 95	20 80 5 20	2 08 %
NETAPP INC 64110D-10-4 NTAP	20 000	34 36	687 20	517 40	169 80		

DAVID B. BOOTHE ACCT. R50184002 For the Period 8/1/09 to 12/31/09

	Quantity	Price	Market Value	Tax Cost	Anr Unrealized Gain/Loss	Estimated Annual Income Accrued Dividends	Yield
US Large Cap							
NIKE INC B 654106-10-3 NKE	20 000	66 07	1,321 40	1,183 00	138 40	21 60 5 40	1 63%
NORFOLK SOUTHERN CORP 655844-10-8 NSC	95 000	52 42	4,979 90	4,429 43	550 47	129 20	2 59%
OCCIDENTAL PETROLEUM CORP 674599-10-5 OXY	40 000	81 35	3,254 00	3,174 46	79 54	52 80 13 20	1 62%
ORACLE CORP 68389X-10-5 ORCL	80 000	24 53	1,962 40	1,673 71	288 69	16 00	0 82%
PACCAR INC 693718-10-8 PCAR	45 000	36 27	1,632 15	1,765 35	(133 20)	16 20	% 66 0
PARKER-HANNIFIN CORP 701094-10-4 PH	20 000	53 88	1,077 60	1,098 20	(20 60)	20 00	186%
PAYCHEX INC 704326-10-7 PAYX	25 000	30 64	766 00	753 00	13 00	31 00	4 05 %
PEPSICO INC 713448-10-8 PEP	50 000	90 80	3,040 00	2,955 00	85 00	90 00 22 50	2 96%
PFIZER INC 717081-10-3 PFE	230 000	18 19	4,18370	262 93	3,920 77	165 60	3 96%
PHILIP MORRIS INTERNATIONAL 718172-10-9 PM	55 000	48 19	2,650 45	2,663 65	(13 20)	127 60 31 90	4 81%
PRAXAIR INC 74005P-10-4 PX	20 000	80 31	1,606 20	1,643 20	(37 00)	32 00	1 99%
PROCTER & GAMBLE CO 742718-10-9 PG	000 06	60 63	5,456 70	4,272 77	1,183 93	158 40	2 90 %

DAVID B. BOOTHE ACCT. R50184002 For the Period 8/1/09 to 12/31/09

	Quantity	Price	Market Value	Tax Cost	Unrealized Gain/Loss	Estimated Annual Income Accrued Dividends	Yield
US Large Cap							
PRUDENTIAL FINANCIAL INC 744320-10-2 PRU	30 000	49 76	1,492 80	1,550 26	(57 46)	21 00	141%
QUALCOMM INC 747525-10-3 QCOM	70 000	46 26	3,238 20	3,150 00	88 20	47 60	1 47 %
SCHLUMBERGER LTD 806857-10-8 SLB	30 000	62 09	1,952 70	1,850 40	102 30	25 20 6 30	1 29%
SOUTHERN CO 842587-10-7 SO	35 000	33 32	1,166 20	1,124 55	41 65	61 25	5 25%
SOUTHWESTERN ENERGY CO 845467-10-9 SWN	15 000	48 20	723 00	660 45	62 55		
SPDR TRUST SERIES 1 78462F-10-3 SPY	200 000	111 44	55,720 00	55,302 74	417 26	1,180 50 295 10	2 12%
SPRINT NEXTEL CORP 852061-10-0 S	190 000	3 66	695 40	820 40	(125 00)		
STAPLES INC 855030-10-2 SPLS	000 06	24 59	2,213 10	2,109 11	103 99	29 70 7 43	1 34%
STARWOOD HOTELS & RESORTS 85590A-40-1 HOT	40 000	36 57	1,462 80	1,334 13	128 67	8 00 8	0 55%
SYSCO CORP 871829-10-7 SYY	45 000	27 94	1,257 30	1,157 31	66 66	45 00 11 25	3 58%
TD AMERITRADE HOLDING CORPORATION 87236Y-10-8 AMTD	30 000	19 38	581 40	589 20	(7 80)		
TIME WARNER INC NEW 887317-30-3 TWX	95 000	29 14	2,768 30	2,661 36	106 94	71 25	2 57 %

Page 12 of 74

DAVID B. BOOTHE ACCT R50184002 For the Period 8/1/09 to 12/31/09

					1	Estimated Annual Income	
	Quantity	Price	Market Value	Tax Cost	Unrealized Gain/Loss	Accrued Dividends	Yield
US Large Cap							
UNITED TECHNOLOGIES CORP 913017-10-9 UTX	50 000	69 41	3,470 50	1,793 25	1,677 25	77 00	2 22 %
URBAN OUTFITTERS INC 917047-10-2 URBN	20 000	34 99	08 669	625 00	74 80		
US BANCORP DEL 902973-30-4 USB	100 000	22 51	2,251 00	2,262 99	(11 99)	20 00 5 00	%680
V F CORP 918204-10-8 VFC	15 000	73 24	1,098 60	1,094 67	3 93	36 00	3 28%
VERIZON COMMUNICATIONS INC 92343V-10-4 VZ	105 000	33 13	3,478 65	3,731 19	(252 54)	199 50	5 73%
WAL MART STORES INC 931142-10-3 WMT	50 000	53 45	2,672 50	2,371 50	301 00	54 50 13 63	2 04 %
WALT DISNEY CO 254687-10-6 DIS	130 000	32 25	4,192 50	3,658 47	534 03	45 50 45 50	1 09%
WELLPOINT INC 94973V-10-7 WLP	10 000	58 29	582 90	533 53	49.37		
WELLS FARGO & CO 949746-10-1 WFC	120 000	26 99	3,238 80	3,374 75	(135 95)	24 00	0 74%
XILINX CORP 983919-10-1 XLNX	65 000	25 06	1,628 90	1,495 33	133 57	41 60	2 55 %
YUM BRANDS INC 988498-10-1 YUM	45 000	34 97	1,573 65	1,524 38	49 27	37 80	2 40%
Total US Large Cap			\$355,830.76	\$326,111.57	\$29,719.19	\$5,954.53 \$618.67	1.67%

DAVID B. BOOTHE ACCT. R50184002 For the Period 8/1/09 to 12/31/09

	Quantity	Price	Market Value	Tax Cost	Unrealized Gain/Loss	Estimated Annual Income Accrued Dividends	Yield
US Mid Cap/Small Cap							
ISHARES RUSSELL 2000 INDEX FUND 464287-65-5 IWM	465 000	62 44	29,034 60	25,612 06	3,422 54	471 04	1 62%
ISHARES S&P MIDCAP 400 INDEX FUND 464287-50-7 IJH	570 000	72 41	41,273 70	40,073 58	1,200 12	767 22	186%
JPMORGAN MARKET EXPANSION INDEX FUND SELECT SHARE CLASS FUND 3708 4812C1-63-7 PGMI X	3,435 582	89 8	29,820 85	28,000 00	1,820 85	40196	1 35%
JPMORGAN SMALL CAP EQUITY FUND SELECT CLASS FUND 367 4812A1-37-3 VSEI X	491 320	30 02	14,749 43	15,000 00	(250 57)	49 62	0 34%
JPMORGAN TR I HIGHBRIDGE STATISTICAL MARKET NEUTRAL FUND SELECT SHARES FUND # 1011	4,642 309	15.74	73,069 94	74,000 00	(930 06)	153 19	0 21%
JPMORGAN US REAL ESTATE FUND SELECT SHARE CLASS FUND 3037 4812C0-61-3 SUIE X	1,031 883	12.21	12,599 29	19,000 00	(6,400 71)	289 95	2 30%
KB HOME 48666K-10-9 KBH	25 000	13 68	342 00	388 00	(46 00)	6 25	1 83%
Total US Mid Cap/Small Cap			\$200,889.81	\$202,073.64	(\$1,183.83)	\$2,139.23	1.06%

DAVID B. BOOTHE ACCT. R50184002 For the Period 8/1/09 to 12/31/09

	Quantity	Price	Market Value	Tax Cost	Unrealized Gain/Loss	Estimated Annual Income Accrued Dividends	Yield
Non US Equity							
ACE LTD NEW H0023R-10-5 ACE	20 000	50 40	1,008 00	1,012 49	(4 49)	24 80	2 46%
ARTISAN INTL VALUE FUND - INV 04314H-88-1 ARTK X	1,481 481	23 10	34,222 21	34,000 00	222 21	628 14	1 84%
COOPER INDUSTRIES PLC CL - A G24140-10-8 CBE	25 000	42 64	1,066 00	940 50	125 50	25 00 6 25	2 35%
COVIDIEN PLC G2554F-10-5 COV	45 000	47 89	2,155 05	1,855 35	299 70	32 40	1 50%
DODGE & COX INTERNATIONAL STOCK 256206-10-3 DODF X	1,740 357	31 85	55,430 37	55,500 00	(69 63)	758 79	1 37 %
ISHARES MSCI EAFE INDEX FUND 464287-46-5 EFA	1,300 000	55 28	71,864 00	72,484 85	(620 85)	1,873 30	261%
JPMORGAN ASIA EQUITY FUND SELECT SHARE CLASS FUND 1134 4812A0-70-6 JPAS X	2,255 795	31 20	70,380 80	67,400 00	2,980 80	259 41	0 37 %
SPDR GOLD TRUST 78463V-10-7 GLD	125 000	107 31	13,413 75	12,136 25	1,277 50		
TRANSOCEAN INC H8817H-10-0 RIG	10 000	82 80	828.00	842 63	(14 63)		
Total Non US Equity			\$250,368.18	\$246,172.07	\$4,196.11	\$3,601.84 \$6.25	1.44%

	Quantity	Price	Market Value	Tax Cost	Unrealized Galn/Loss	Estimated Annual Income Accrued Dividends	Yield
Emerging Markets JPMORGAN EMERGING MARKETS EQUITY SELECT SHARE CLASS FUND 1235 4812A0-62-3 JEMS X	541 638	20.78	11,255 24	8,000 00	3,255 24	33 03	0 29%

DAVID B. BOOTHE ACCT. R50184002 For the Period 8/1/09 to 12/31/09

Cash & Short Term Summary

	ò	
Asset Categories	Ending Market Value	Current Allocation
Cash	85,418 09	%9

Market Value/Cost	Current Period Value
Market Value	85,418 09
Tax Cost	85,418 09
Estimated Annual Income	102 50
Yıəld	0 12%

	Cash & Short Term
Asset Categories	

DAVID B. BOOTHE ACCT. R50184002 For the Period 8/1/09 to 12/31/09

DAVID B. BOOTHE ACCT. R50184002 For the Period 8/1/09 to 12/31/09 Note 1 This is the Annual Percentage Yield (APY) which is the rate earned if balances remain on deposit for a full year with compounding, there is no change in the interest rate and all interest is left in the account

Cash & Short Term Detail

	Quantity	Price	Market Value	Tax Cost Adjusted Original	Unrealized Gain/Loss	Estimated Annual Income Accrued Interest	Yield
Cash							
US DOLLAR PRINCIPAL	85,418 09	1 00	85,418 09	85,418 09		102 50	0 12% 1

Fixed Income Summary

DAVID B. BOOTHE ACCT. R50184002 For the Period 8/1/09 to 12/31/09

Asset Categories

Asset Categories	Ending Market Value	Current Allocation
US Fixed Income - Taxable	403,476 72	59%
US Fixed Income - Non Taxable	62,435 40	2%
Total Value	\$465,912.12	34%

	US Fixed Income . Taxable
Fixed income	US Fixed Income Non Taxable
_ . e	

Market Value/Cost	Current Period Value
Market Value	465,912 12
Tax Cost	467,080 27
Unrealized Gain/Loss	(1,168 15)
Estimated Annual Income	17,929 92
Accrued Interest	1,428 42
Yield	3 85%

Fixed Income Summary CONTINUED

SUMMARY BY MATURITY

1	Market	% of Bond
Fixed Income	Value	Portfolio
Less than 5 years¹	465,912 12	100%

SUMMARY BY TYPE

į	Market	% of Bond
Fixed Income	Value	Portfolio
Mutual Funds	403,476 72	87%
Other	62,435 40	13%
Total Value	\$465,912.12	100%

DAVID B. BOOTHE ACCT. R50184002 For the Period 8/1/09 to 12/31/09

^{&#}x27;The years indicate the number of years until the bond is scheduled to mature based on the statement end date. Some bonds may be called, or paid in full, before their stated maturity

DAVID B. BOOTHE ACCT R50184002 For the Period 8/1/09 to 12/31/09

Fixed Income Detail

	Quantity	Price	Market Value	Tax Cost Adjusted Original	Unrealized Gain/Loss	Estimated Annual Income Accrued Interest	Yıeld
US Fixed Income - Taxable							
FIDELITY ADVISOR HIGH INCOME ADVANTAGE FUND 315807-87-5	3,365 079	8 60	28,939 68	31,800 00	(2,860 32)	1,578 22	5 45%
JPMORGAN TOTAL RETURN FUND SELECT FUND 3218 30-Day Annualized Yield 4 59% 4812A4-43-5	6,715 531	10 28	69,035 66	67,759 71	1,275 95	3,465 21 329 06	5 02%
JPMORGAN HIGH YIELD BOND FUND SELECT CLASS FUND 3580 30-Day Annualized Yield 7 59% 4812C0-80-3	6,848 190	7 74	53,004 99	54,020 56	(1,015 57)	3,821 29 445 13	7 21%
JPMORGAN SHORT DURATION BOND FUND SELECT CLASS FUND 3133 30-Day Annualized Yield 2 04% 4812C1-33-0	23,271 557	10 85	252,496 39	250,000 00	2,496 39	7,330 54 535 25	2 90 %
Total US Fixed Income - Taxable			\$403,476.72	\$403,580.27	(\$103.55)	\$16,195.26 \$1,309.44	4.01%

	Quantity	Price	Market Value	Tax Cost Adjusted Original	Unrealized Gaın/Loss	Estimated Annual Income Accrued Interest	Yield
US Fixed Income - Non Taxable							
JPMORGAN TR I TAX AWARE REAL RETURN FUND SELECT SHARE CLASS FUND 992 30-Day Annualized Yield 160% 4812A2-54-6	6,262 327	6 97	62,435 40	63,500 00	(1,064 60)	1,734 66 118 98	2 78%

DAVID B. BOOTHE ACCT. R50184002 For the Period 8/1/09 to 12/31/09

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