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Department of the Treasury Internal Revenue Service

# 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

For calendar year 2009, or tax year beginning , and ending									
G Check all that apply: Initial return Amended return				Initial return of a f	former public o	charity	Final return		
				Address change			Name change		
Use the IRS Name of foundation				······································			A Employer identification number		
	label herwi	se, THE HAZEI			FOUNDATION INC			18	
	print		PO box number if mail is not d	elivered to street address)		Room/suite	B Telephone number		
	or typ e Spe	<u>FO DOM 7.</u>					410-430-	1455	
	tructi:	one   City UI TOWII, State					C if exemption application		
		SALISBURY					D 1. Foreign organiza	tions, check here	
H	_	type of organization:	<b>X</b> Section 501(c)(3) ex				check here and atta	ns meeting the 85% test, ich computation	
		ection 4947(a)(1) nonexi		Other taxable private found			E If private foundation	n status was terminated	
		arket value of all assets a	·   —		Accr	ual	under section 507(	b)(1)(A), check here $ ightharpoonup$	
		Part II, col. (c), line 16		ther (specify)				ın a 60-month termination	
-	<u>\$</u>		L8 , 530 . (Part I, colu	mn (d) must be on cash	basis.)		under section 507(	b)(1)(B), check here	
	art-l	Analysis of Revenue (The total of amounts in connecessarily equal the amo	plumns (b), (c), and (d) may not	(a) Revenue and expenses per books	(b) Net in inco		(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)	
	1	Contributions, gifts, gra	ants, etc., received	2,005,000.	一 方針	1 三年 大学を	発出等の事に	3 pm 13 m 2 m 1 m 1	
	2	<i>-</i>	ation is not required to attach Sch. B		, ,	; +;	聖 ありむとしましまし	· ;	
	3	Interest on savings and ten cash investments	nporary -						
	4	Dividends and interest	from securities	106,529.	10	6,529.	106,52	9.	
	5a	Gross rents		8,950.		8,950.	8,95	0.STATEMENT 1	
	b	Net rental income or (loss)	8,950.		, '	<u> </u>	47. Car 1 2 3	.,,	
۾ چ	6a	Net gain or (loss) from sale		-1,645.		- 华越 > 生	<b>经验证,</b>	w	
ો <b>ા</b> તે∂ Revenue	b	Gross sales price for all assets on line 6a	<u>455,000.</u>	, 7 g		الله المورث المن	在邻域。经历		
<u>ĕ</u> ∻	7	Capital gain net income (fro	m Part IV, line 2)	\$ - 150 Ct			Carried The	, , , , , ,	
≥, _	8	Net short-term capital g	jain		-,-	·		0.	
_	9	Income modifications Gross sales less returns	[]						
	10a	and allowances	L1	<i>\$</i>		100	and the state of t	· ,	
	1	Less Cost of goods sold				· r ,	Stra Flore		
IJ.	C	Gross profit or (loss)	ק מיייני ז						
SCENE	11	Other income							
<u>ئۆت</u> ے	12	Total. Add lines 1 throu	<u>1911 (                                 </u>	2,118,834.	115	5,479.	115,47		
$\tilde{x}$	13	Compensation of officers, d		0.		0.		0. 0.	
•	j i	Other employee salaries	• • • •	41,860.		0.	41,86	0. 41,860.	
ģ	1	Pension plans, employe	_	5 464				<u></u>	
- Sus		Legal fees	. STMT 2	5,464.		0.	5,46	4. 0.	
ğ	D	Accounting fees					<del></del>		
Ú) O	, c	Other professional fees	•						
ţ	17	Interest .		10 704			10 70	10.704	
stra	18 19	Taxes  Depreciation and deplet	STMT 3	10,704.		0.	10,70	4. 10,704.	
Ë	20	Occupancy		14,900.		0.	14,90	14 000	
μþ	20 21	Travel, conferences, and	· · · · · · · · · · · · · · · · · · ·	14,900.		0.	14,900	0. 14,900.	
Þ	22	Printing and publication							
ä	23	Other expenses	STMT 4	29,103.	11	,492.	29,10	17 (11	
Operating and Administrative Expe	24	Total operating and add		23,103.	<u>_</u>	.,494.	49,10.	3. 17,611.	
era	27	expenses Add lines 13		102,031.	1 1	,492.	102,033	05 075	
Q	25	Contributions, gifts, grai	· · · · · · ·	102,031.		., <del>4</del> 54.	102,03	85,075.	
Ì		Total expenses and dis		<del></del>			, 20		
		Add lines 24 and 25	versements.	102,031.	11	,492.	102 021	85,075.	
		Subtract line 26 from lin	e 12·	102,031.		., = 24.	102,031	05,075.	
		Excess of revenue over expe	i	2,016,803.	-	.			
		Excess of revenue over expe Net investment income	T	4,010,003	1 / 2	,987.	<del></del>	<del></del>	
		Adjusted net income (#)	F		103	,,,,,,,,,	13,448	<del></del>	
92350		rejactou net moonie (iii		<u></u>			101440	<u>/ •  </u>	



Part II Balance Sheets Attached schedules and amounts in the description Beginning of year (b) Book Value (a) Book Value (c) Fair Market Value 5,163. 5,163. 1 Cash - non-interest-bearing 1,748. 69,869. 69,869. 66,043. 2 Savings and temporary cash investments 3 Accounts receivable ▶ Less: allowance for doubtful accounts 4 Pledges receivable ► Less: allowance for doubtful accounts 5 Grants receivable ..... 6 Receivables due from officers, directors, trustees, and other disqualified persons ... 7 Other notes and loans receivable Less: allowance for doubtful accounts 405,500 10a Investments - U.S. and state government obligations 107,276. 108,228. b Investments - corporate stock 0. STMT 6 666,035. 2,948,409. 2,654,752. c Investments - corporate bonds 11 Investments - land, buildings, and equipment basis 1,285,740. 1,285,740. 1,276,470. 12 Investments - mortgage loans 14 Land, buildings, and equipment basis ▶ Less accumulated depreciation 0. 5,000. 5,000. 15 Other assets (describe ▶ PREPAID FRES 4,422,409. 2,415,796. 4,127,800. 16 Total assets (to be completed by all filers) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue . . . . . 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable 1,777. 11,967. 22 Other liabilities (describe 11,967. 1.777 23 Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. Balances 24 Unrestricted 25 Temporardy restricted 26 Permanently restricted Fund Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. þ 2,403,829 4,420,632 27 Capital stock, trust principal, or current funds 28 Paid-in or capital surplus, or land, bldg., and equipment fund 0. n 29 Retained earnings, accumulated income, endowment, or other funds 2,403,829. 4,420,632. 30 Total net assets or fund balances 2,415,796. 4,422,409 31 Total liabilities and net assets/fund balances Part III Analysis of Changes in Net Assets or Fund Balances Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) **2,403,829.** 2 Enter amount from Part I, line 27a 2,016,803. . . . 3 Other increases not included in line 2 (itemize) 3 420,632. 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 4,420,632.

THE HAZEL FARM PROPERTY FOUNDATION INC

20-1330518

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Form **990-PF** (2009)

Form 990-PF (2009)

Form 990-PF (2009) THE	HAZEL FARM PROP	ERTY F	OUNDATIC	N	INC '		20-133	0518	Page
(a) List and descri	ribe the kind(s) of property sold (e.g rehouse; or common stock, 200 sh	j., real estate,		(b) I	How acquired - Purchase - Donation		e acquired day, yr.)	(d) Dat (mo., d	e sold
D Donaton						19/05	04/0		
b NUVEEN MD DIV					P		01/04	04/2	
C									
<u>d</u>				_		<u> </u>			
<u>e</u>	/// Decreasion allowed	(-) ()-		l			0. "		
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale				Gain or (loss us (f) minus (		
a 405,000.			406,64	5.					,645
b 50,000.			50,00						0
<u>C</u>		ļ		_					
<u>d</u>		ļ		$\dashv$		-			
Complete only for assets showin	g gain in column (h) and owned by	the foundation	n on 12/31/69	$\dashv$		III Gains I	Col. (h) gain	minue	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) E:	xcess of col. (i)		С	òľ. (k), bui	not less than s (from col. (	than -0-) or	
a								-1	,645
<u>b</u>				$\Box$					0 .
<u>c</u>		<u> </u>			<del> </del>	<u>-</u>			
d e				$\dashv$			<del></del>		
	∫ If gain, also enter	r in Dort I. lino	7	7					
2 Capital gain net income or (net ca				<u> </u>	2			-1	,645.
3 Net short-term capital gain or (los	s) as defined in sections 1222(5) an	nd (6):							
If gain, also enter in Part I, line 8,	column (c).			}					•
If (loss), enter -0- in Part I, line 8 Part V Qualification U	nder Section 4940(e) for	Reduced	Tax on Net	Inve	3   estment in	come			0.
(For optional use by domestic private	<del></del>					Oome			
		10 10(4) 121 01		001110	•,				
If section 4940(d)(2) applies, leave th	is part blank.								
Was the foundation liable for the sect			•	od?			-	Yes [	X No
If "Yes," the foundation does not quali	fy under section 4940(e). Do not co ach column for each year; see instri								
	(b)	uctions before	making any entrie			"		(d)	
(a) Base period years Calendar year (or tax year beginnin	والمرافي وا	tributions	Net value of nor	(c) nchari	table-use asset	s	Distribi (col. (b) divi	(d) ution ratio ded by col. (	(c))
2008		9,330.	<del>~-</del>		994,51	5.	(000) (0) 000		9878
2007									
2006								<del></del>	<del></del>
2004_							1		
2 Total of line 1, column (d)						2		. 09	9878
3 Average distribution ratio for the 5						"	<u> </u>		3070
the foundation has been in existen	ce if less than 5 years	-	•			. 3		.09	9878
		_					] _		
4 Enter the net value of noncharitable	e-use assets for 2009 from Part X, I	ıne 5 <sub></sub>		··· ·		. 4	]	L,720,	<u>374.</u>
5 Multiply line 4 by line 3						5		171,	828.
6 Enter 1% of net investment income	e (1% of Part I, line 27b)	-				6		1,	040.
7 Add lines 5 and 6						. 7		172,	868.
8 Enter qualifying distributions from	Part XII, line 4	-	. <b></b>			8_		85,	075.
If line 8 is equal to or greater than I	line 7, check the box in Part VI, line	1b, and comp	lete that part using	a 1%	tax rate.				
See the Part VI instructions.								000 101	
923521 02-02-10							F0i	m <b>990-P</b> l	r (2009).

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_	n 990-PF (2009) THE HAZEL FARM PROPERTY FOUNDATION INC	20-	1330518	Page 4
Pi	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4	948	<ul> <li>see instr</li> </ul>	uctions)
1:	Exempt operating foundations described in section 4940(d)(2), check here X and enter "N/A" on line 1.	-		
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)			•
I	Domestic foundations that meet the section 4940(e) requirements in Part V, check here  and enter 1%	1	N/	/A
	of Part I, line 27b			
(	: All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)	ļ.	İ	, ,
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	1	0.
3	Add lines 1 and 2	3		0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	1	0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5		0.
6	Credits/Payments:		, ,	:
•	2009 estimated tax payments and 2008 overpayment credited to 2009		-	•
	Exempt foreign organizations - tax withheld at source 6b	,		,
	er Tax paid with application for extension of time to file (Form 8868)	٠		•
	I Backup withholding erroneously withheld 6d		- 11	
7	Total credits and payments. Add lines 6a through 6d	7	•-	0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8		
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	<del> </del>	0.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
		10		
11 D:	Enter the amount of line 10 to be: Credited to 2010 estimated tax ► Refunded Ref	11	<u> </u>	
			1	Yes No
16	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene	B	1,42	<del></del>
	any political campaign?		1a	X
Ľ	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?		1b	X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published	ı or	1, 1, 2, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,	
	distributed by the foundation in connection with the activities.		F 1 75-	
	Did the foundation file Form 1120-POL for this year?	••	1c	X
C	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:		41	
	(1) On the foundation. $\blacktriangleright$ \$ 0. (2) On foundation managers. $\blacktriangleright$ \$ 0.			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation		1,453	1
_	managers. > \$ 0.		موري - ها مد کا	1 12
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	-	. 2	X
	If "Yes," attach a detailed description of the activities.		5	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or		3 -	Takit
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3	X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	-	4a	X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	N,	/A 4b	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5	X
	If "Yes," attach the statement required by General Instruction T.		- (3,48	3 3 1 1 7 3 2 2
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:		_	
_	By language in the governing instrument, or		1	
	<ul> <li>By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state I</li> </ul>	aw	- 3 <sup>3</sup> - 1	
	remain in the governing instrument?		6_	X
7	Did the foundation have at least \$5,000 in assets at any time during the year?		7	X
	If "Yes," complete Part II, col. (c), and Part XV.		27	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			
	MD			1
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)			The state of
	of each state as required by General Instruction G? If "No," attach explanation		8b	X
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendarian	dar -	12.4	11.5
	year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," complete Part XIV		9	X
10		'TM'	8 10	X
				-PF (2009)
				(====)

**b**,

orn	1990-PF (2009) THE HAZEL FARM PROPERTY FOUNDATION INC 20-133	0518		Page 5
Pa	art VII-A: Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before			
	August 17, 2008?	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► WWW.HAZELOUTDOORDISCOVERYCENTER.ORG	ت ت		
14	The books are in care of ► JOSEPH J PEARCE III Telephone no. ► 410-4.	30-1	455	
•	Located at ≥3905 ATLANTIC AVE, OCEAN CITY, MD ZIP+4 ≥2:			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	1012		. [ ]
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A_	
Pa	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required		<u> </u>	
	The state of the s	T-1	Yes	No
4	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		, res	140
18	During the year did the foundation (either directly or indirectly):	12"	-	
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?  Yes X No		٠	37
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?		, , "	12.73
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	100		5 2
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?  Yes X No	٠٠٠	-15.4 -15.4	( to 1
	(5) Transfer any income or assets to a disqualified person (or make any of either available			2 3 3
	for the benefit or use of a disqualified person)? Yes X No	18.5		
	(6) Agree to pay money or property to a government official? (Exception. Check "No"	73.7		
	if the foundation agreed to make a grant to or to employ the official for a period after	n ,-	ريا - ساعر	. A
	termination of government service, if terminating within 90 days.)	12.	* \$ ,	9 71
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	1.4.4		ر استند
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)? N/A	1b		
	Organizations relying on a current notice regarding disaster assistance check here	14.4	, - · · ,	£
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected	1000		F 146
	before the first day of the tax year beginning in 2009?	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			· 1
	defined in section 4942(j)(3) or 4942(j)(5)):			
a	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		_	- 1
	before 2009?	1 - 2 -	۲,	: ' !
	If "Yes," list the years	.	•	į
ь	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 instructions.)  N/A	2b	,	·
c	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.	, -		
ŭ	The providing of coolin to retained applied to any of the years noted in 20, not the years note.	1.	٠.	
32	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
va	during the year?		1, 1,3.4	n
<b>L</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	:		~ ; ~
U	• • • • • • • • • • • • • • • • • • • •			į
	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	'-	-	22. 10. julija -
	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.)  N/A	3b		
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		<u>X</u>
D	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	-:-	·	اد
	had not been removed from jeopardy before the first day of the tax year beginning in 2009?	4b	- 1	X

Form 990-PF (2009) THE HAZEL FARM PROPERTY Part VII-B   Statements Regarding Activities for Which	FOUNDATION IN Form 4720 May Be	NC Required (contil	20-13305	518	Page 6
<ul> <li>5a During the year did the foundation pay or incur any amount to: <ol> <li>Carry on propaganda, or otherwise attempt to influence legislation (sect</li> <li>Influence the outcome of any specific public election (see section 4955) any voter registration drive?</li> <li>Provide a grant to an individual for travel, study, or other similar purpos</li> <li>Provide a grant to an organization other than a charitable, etc., organization 509(a)(1), (2), or (3), or section 4940(d)(2)?</li> <li>Provide for any purpose other than religious, charitable, scientific, literation the prevention of cruefty to children or animals?</li> <li>If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify usection 53.4945 or in a current notice regarding disaster assistance (see instorganizations relying on a current notice regarding disaster assistance checked.</li> <li>If the answer is "Yes" to question 5a(4), does the foundation claim exemption expenditure responsibility for the grant?</li> <li>"Yes," attach the statement required by Regulations section 53 49</li> </ol> </li> <li>6a Did the foundation, during the year, receive any funds, directly or indirectly, to a personal benefit contract?</li> </ul>	ion 4945(e))? ; or to carry on, directly or indirectly  or educational purposes, or inder the exceptions described tructions)?  Is here  I from the tax because it maintains.	rectly,  Y  Y  for  In Regulations  ined  I/A  Y	es X No	5b	
<ul> <li>b Did the foundation, during the year, pay premiums, directly or indirectly, on a lf "Yes" to 6b, file Form 8870.</li> <li>7a At any time during the tax year, was the foundation a party to a prohibited tax b If yes, did the foundation receive any proceeds or have any net income attrib</li> </ul>	shelter transaction?		es X No	1 `	X
Part VIII Information About Officers, Directors, Trus Paid Employees, and Contractors	tees, Foundation Ma	nagers, Highl			
1 List all officers, directors, trustees, foundation managers and the	r compensation.		•		
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) acco allo	Expense unt, other wances
COLLEEN HAZEL	_DIRECTOR				
31594 FRED ADKINS RD				1	
PARSONSBURG, MD 21849	5.00	0.	0.		0.
JOSEPH J PEARCE	_TREASURER			1	
3905 ATLANTIC AVE					
OCEAN CITY, MD 21842	1.00	0.	0.	]	0.
MORGAN HAZEL	DIRECTOR			]	
27135 E LILLIAN ST					
HEBRON, MD 21830	5.00	0.	0.		0.
2 Compensation of five highest-paid employees (other than those in	<del></del>	enter "NONE."	7.6		
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week_ devoted to position	(c) Compensation -	(d) Contributions to employee benefit plans and deferred compensation	– accou	Expense unt; other— wances
NONE	_				
			:		
Total number of other amplayees paid over \$50,000			. 1		

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Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)		
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."		
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c)	Compensation
NONE		
Total number of others receiving over \$50,000 for professional services Pant X A. Summary of Direct Charitable Activities	<u> </u>	0
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expe	nses
1		
SEE STATEMENT 9	8	35,075.
THE LARGEST ACTIVITY WAS JAKES DAY WITH 350 CHILDRN PLUS PARENTS FEATURING FISHING, WILD TURKEYS, AND A ZOO EXHIBIT		0
BOY SCOUT TROOPS HELD CAMP OUTS AND GIRL SCOUT TROOPS HELD CAMP OUTINGS		0.
OTHER ACTIVITIES INCLUDED USE BY CHILDREN WITH THE FAMILY		0.
YOUTH CENTER AND KIDS OF HONOR.		0.
RactilX-B Summary of Program-Related Investments		<u> </u>
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amoı	unt
N/A		
All other program-related investments. See instructions.		
Catal Add lines 1 through 2		

Page 8

P	Art X Minimum Investment Return (All domestic foundations must complete this part. Foreign fou	ndations,	see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		<del></del>
а	Average monthly fair market value of securities	1a	1,743,118.
b	Average of monthly cash balances	1b	3,455.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	1,746,573.
е	Reduction claimed for blockage or other factors reported on lines 1a and	:.	
	1c (attach detailed explanation)   1e   0.	,	
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	1,746,573.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	26,199.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,720,374.
6	Minimum investment return. Enter 5% of line 5	6	86,019.
P	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here   X and do not complete this part.)	d certain	
1	Minimum investment return from Part X, line 6	1	
2a	Tax on investment income for 2009 from Part VI, line 5	ر لاوراني	
b	Income tax for 2009. (This does not include the tax from Part VI.)	·K .	
C	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	_1a	<u>85,075.</u>
þ	Program-related investments - total from Part IX-B	1b	<u> </u>
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	_2	
3	Amounts set aside for specific charitable projects that satisfy the:	April 1	
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	<u>85,075.</u>
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	85,075.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation q	ualifies for	
	4940(e) reduction of tax in those years.		

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI, line 7				0.
2 Undistributed income, if any, as of the end of 2009		,		-
a Enter amount for 2008 only			0.	
<b>b</b> Total for prior years:			_	
3 Excess distributions carryover, if any, to 2009:	<u> </u>	0.	\	,
a From 2004				,
b From 2005				
c From 2006	†		-	
d From 2007	1	, .,		
e From 2008	1			·
f Total of lines 3a through e	0.	, j.		
4 Qualifying distributions for 2009 from		,		, -
Part XII, line 4: ► \$ N/A				
a Applied to 2008, but not more than line 2a			0.	
<b>b</b> Applied to undistributed income of prior	= , ' '		6(3. 4 2.1	
years (Election required - see instructions)	5.	0.		
c Treated as distributions out of corpus				- (65, 6 ) - 1 - 1
(Election required - see instructions)	0.			
d Applied to 2009 distributable amount	, ,	<u> </u>		0.
e Remaining amount distributed out of corpus	0.	· k-,		- 13 - 1
5 Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount	0.	*	, , , , , , , , , , , , , , , , , , , ,	0.
must be shown in column (a) )				
6 Enter the net total of each column as indicated below:	, ,			
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.	, ,	-	<u> </u>
<b>b</b> Prior years' undistributed income. Subtract	, , , , , , , , , , , , , , , , , , ,			1 4 <sup>7</sup>
line 4b from line 2b	'	0.	r-	
c Enter the amount of prior years' undistributed income for which a notice of	J ' '		. '	
deficiency has been issued, or on which				
the section 4942(a) tax has been previously	.,,			•
assessed		0.		
d Subtract line 6c from line 6b. Taxable amount - see instructions	, <sub>4</sub>	^		•
e Undistributed income for 2008. Subtract line		0.		
4a from line 2a. Taxable amount - see instr.	شهجاد د ما سو		<del>-</del> <del>-</del>	وب شد قید جست ایک شب
f Undistributed income for 2009. Subtract			· , ·	
lines 4d and 5 from line 1. This amount must	•			
be distributed in 2010		^_	ή,	0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by		•		,
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2004			4.7%	in the second second second
not applied on line 5 or line 7	0.	1 = 1		;
9 Excess distributions carryover to 2010.		,	,	-
Subtract lines 7 and 8 from line 6a	0.			
O Analysis of line 9:				· · · · · · · · · · · · · · · · · · ·
a Excess from 2005	,			
b Excess from 2006			,	-
c Excess from 2007			-	
d Excess from 2008		. ' ''		
e Excess from 2009			,=	<u>-</u>

20-1330518

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Form 990-PF (2009)

Part XV Supplementary Informatio	n (continued)			
Grants and Contributions Paid During the	Year or Approved for Future P	ayment		
Recipient  Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
a Paid during the year				
NONE				
Total			<b>▶</b> 3a	0.
b Approved for future payment				
NONE				

**▶** 3b

Part XVI-A **Analysis of Income-Producing Activities** 

Enter gross amounts unless otherwise indicated.			ided by section 512, 513, or 514	(e)		
_	(a) Business	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income	
1 Program service revenue:	code		code		-	
a			<u> </u>			
b			<u> </u>			
c			ļ			
d						
e		<u> </u>				
f						
g Fees and contracts from government agencies						
9 Memberchin dues and assessments						
3 Interest on savings and temporary cash						
investments						
4 Dividends and interest from securities			14	106,529.		
• • • • •		1		100,529.	<b>E</b>	
5 Net rental income or (loss) from real estate:	• • • • • • • • • • • • • • • • • • • •	19.4 E	21.0	TO THE WORLD	発養がたり。 いいこうち	
a Debt-financed property			1	0.050		
<b>b</b> Not debt-financed property			16	8,950.	<del></del>	
6 Net rental income or (loss) from personal						
property					·	
7 Other investment income						
8 Gain or (loss) from sales of assets other						
than inventory					-1,645.	
9 Net income or (loss) from special events					-	
10 Gross profit or (loss) from sales of inventory						
11 Other revenue:						
· ·						
					<del></del>	
<u>c</u>						
d						
40.0 hard Add a barre (b) (d) and (c)	-2 ;	0.		115 470	1 (15	
12 Subtotal. Add columns (b), (d), and (e)		U • )		115,479.	·-··	
13 Total. Add line 12, columns (b), (d), and (e)				13	113,834.	
(See worksheet in line 13 instructions to verify calculations.)		<del></del>				
Part XVI B Relationship of Activities to	the Acco	omplishment of Ex	emp	t Purposes		
Line No. Explain below how each activity for which incom			contru	outed importantly to the accon	iplishment of	
the foundation's exempt purposes (other than by	/ providing ru	ilas ioi sacii parposes).				
				<del> </del>	<del></del>	
				<del></del>	<del></del>	
					·····	
	•					
					·	
				-		
				<del></del>		
				· ·	•	
				· · · · · · · · · · · · · · · · · · ·	<del></del>	
<del>-</del>						
					· <del>············</del>	

<b>2</b> a	ls the	foundation directly or indirect	y affiliated with,	or related to, one	or more tax-exe	mpt organizat	tions describe	ed	
	ın sec	tion 501(c) of the Code (other	than section 50	1(c)(3)) or in sect	on 527?				. Yes X No
b	If Yes	," complete the following sche							
		(a) Name of orga	nization		(b) Type of or	janization		(c) Description of	relationship
		N/A							
_									· <del></del>
		enalties of perjury, I declare that I ha							belief, it is true, correct,
- {	and com	plete Declaration of preparer (other	unan taxbayar or iii	duciary) is based on a			s any knowledg	je	
	<b>L</b> _	Jane 1	of ear	THE	10-	6-10	L	REATLINE	۸
Here	Sig	nature of officer or trustee	11.		Date		Title		_
		Preparer's				Date	3	Check if	Preparer's identifying number
Sign	- 2등	signature Maurin		entau	10 C X	2 SE	P 2 2 2010	employed >	]
	Paid Preparer's Use Only	Firm's name (or yours FAW	CASSON	& CO/,	LLP			EIN ▶	
ľ	r 5.2	d self-employed). UCERT	FIED PU	JBLIÉ AC	COUNTAN	rs			
-	-	address, and ZIP code OCEAN	CITY	MARYLAN	21842	-9358		Phone no.	(410)213-8700
					<del></del>			<u> </u>	Form <b>990-PF</b> (2009)

### Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service **Schedule of Contributors** 

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

OMB No 1545-0047

2009

Name of the organization

Employer identification number

Schedule B (Form 990, 990-EZ, or 990-PF) (2009)

T	HE HAZEL FARM PROPERTY FOUNDATION INC	20-1330518							
Organization type (check of	one).								
Filers of:	Section:								
Form 990 or 990-EZ	501(c)( ) (enter number) organization	501(c)( ) (enter number) organization							
	4947(a)(1) nonexempt charitable trust not treated as a private foundation								
	527 political organization								
Form 990-PF	X 501(c)(3) exempt private foundation								
	4947(a)(1) nonexempt charitable trust treated as a private foundation								
	501(c)(3) taxable private foundation								
•	is covered by the <b>General Rule</b> or a <b>Special Rule.</b> )(7), (8), or (10) organization can check boxes for both the General Rule and a Special Ru	le. See instructions.							
	n filing Form 990, 990·EZ, or 990·PF that received, during the year, \$5,000 or more (in molete Parts I and II.	oney or property) from any one							
Special Rules									
509(a)(1) and 170(	c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the reg (b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, ine 1. Complete Parts I and II.								
aggregate contribu	For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.								
For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, chantable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year.									
out it must answer "No" on	hat is not covered by the General Rule and/or the Special Rules does not file Schedule B Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 ng requirements of Schedule B (Form 990, 990-EZ, or 990-PF).	•							

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions

for Form 990, 990-EZ, or 990-PF.

	Form 990, 990-EZ, or 990-PF) (2009)	•		Page 1 of 1 of Part I
Name of o	ganization		Employ	yer identification number
THE H	AZEL FARM PROPERTY FOUNDATION INC		20	0-1330518
Part I	Contributors (see instructions)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contribut	ions	(d) Type of contribution
1	ESTATE OF RICHARD F HAZEL	_		Person X Payroll
	PO BOX 990	<u> </u>	00.	Noncash
	SALISBURY , MD 21803	_		(Complete Part II if there is a noncash contribution)
(a)	(b)	(c)		(d)
No. 2	Name, address, and ZIP + 4  COMMUNITY FOUNDATION OF THE EASTERN SHORE	Aggregate contribut	ions	Type of contribution  Person X
	1324 BELMONT AVE	- - \$ <u>5,0</u>	\$5,000.	
	SALISBURY, MD 21804	-		(Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c)	(c) Aggregate contributions	
		- - - -		Person Payroll Noncash (Complete Part II of there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributi	ons	(d) Type of contribution
		\$		Person Payroll Noncash Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributi	ons	(d) Type of contribution
		- - - -		Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c)	ons	(d) Type of contribution

Person Payroll Noncash

(Complete Part II if there is a noncash contribution.)

FORM 990-PF RENTAL INCOME		STATEMENT 1
KIND AND LOCATION OF PROPERTY	ACTIVITY NUMBER	GROSS RENTAL INCOME
	1	8,950.
TOTAL TO FORM 990-PF, PART I, LINE 5A		8,950.

FORM 990-PF	LEGAL FEES		STATEMENT 2		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
LEGAL & ACCOUNTING	5,464.	0.	5,464.	0.	
TO FM 990-PF, PG 1, LN 16A	5,464.	0.	5,464.	0.	

FORM 990-PF	TAX	ES	S.	STATEMENT 3		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES		
PAYROLL TAXES PROPERTY TAXES	2,928. 7,776.	0.	2,928. 7,776.	2,928. 7,776.		
TO FORM 990-PF, PG 1, LN 18	10,704.	0.	10,704.	10,704.		

FORM 990-PF	OTHER E	XPENSES	STATEMENT 4		
DESCRIPTION	(A)	(B)	(C)	(D)	
	EXPENSES	NET INVEST-	ADJUSTED	CHARITABLE	
	PER BOOKS	MENT INCOME	NET INCOME	PURPOSES	
INVESTMENT FEES SUPPLIES INSURANCE WEB SITE BANK FEES	10,955.	10,955.	10,955.	0.	
	4,250.	0.	4,250.	4,250.	
	10,232.	0.	10,232.	10,232.	
	3,129.	0.	3,129.	3,129.	
	537.	537.	537.	0.	
TO FORM 990-PF, PG 1, LN 23	29,103.	11,492.	29,103.	17,611.	

FORM 990-PF CORPORATE STOC	CK	STATEMENT 5		
DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE		
EQUITY FUNDS	117,498.	107,276		
TOTAL TO FORM 990-PF, PART II, LINE 10B	117,498.	107,276		

FORM 990-PF CORPORATE BOND	s	STATEMENT 6
DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
BOND FUNDS FIXED INCOME	1,445,525. 1,502,884.	1,301,553. 1,353,199.
TOTAL TO FORM 990-PF, PART II, LINE 10C	2,948,409.	2,654,752.

FORM 990-PF OTHER LIABILITY	IES	STATEMENT 7	
DESCRIPTION	BOY AMOUNT	EOY AMOUNT	
PAYROLL LIABILITIES	11,967.	1,77	77.
TOTAL TO FORM 990-PF, PART II, LINE 22	11,967.	1,77	77.

FORM 990-PF

LIST OF SUBSTANTIAL CONTRIBUTORS PART VII-A, LINE 10

STATEMENT

NAME OF CONTRIBUTOR

ADDRESS

ESTATE OF RICHARD F HAZEL

PO BOX 990

SALISBURY, MD 21803

FORM 990-PF

SUMMARY OF DIRECT CHARITABLE ACTIVITIES

STATEMENT

9

#### ACTIVITY ONE

THE PROPERTY IS CARED FOR SO THAT IT IS AVAILABLE FOR USE BY COMMUNITY GROUPS TO PROMOTE EDUCATION AND CONSERVATION WITH OUTDOOR ACTIVITIES - SPORTS, SWIMMING, NATURE TRAILS, HIKING.

**EXPENSES** 

TO FORM 990-PF, PART IX-A, LINE 1

85,075.

n

national get outdoors day

at the



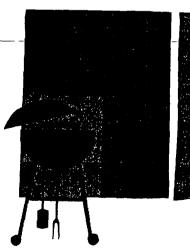


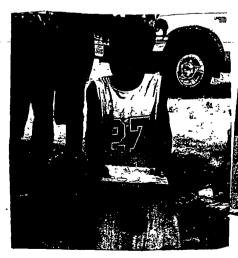
Sat., June 12, 2010 10 a.m. until 2 p.m.

Hazel Outdoor Discovery Center 4095 Cooper Road Eden, Maryland 21822

For more information, contact:

www.hazeloutdoors.org dlitedirector@comcast.net 443-614-0261









Join us for a FREE event encouraging healthy, active outdoor fun! Thanks to our exhibitors and hands-on activities, kids can learn about archery, firearm safety, wildlife watching, kayaking, camping, cycling, nutrition, and more. Parents can learn about organizations that help kids develop safe & healthy habits while exploring our great Delmarva outdoors. We hope to see you on June 12!

## Form **8868** (Rev. April 2009)

Department of the Treasury Internal Revenue Service

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

File a separate application for each return.

OMB No 1545-1709

<ul><li>If you are</li></ul>	filing for an Automatic 3-Month Extension, complete only Part I and check this box filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (oblete Part II unless you have already been granted an automatic 3-month extension on a	on page 2 of this form).
	Automatic 3-Month Extension of Time. Only submit original (no copies nee	
A corporation Part I only .	n required to file Form 990-T and requesting an automatic 6-month extension—check	this box and complete
	porations (including 1120-C filers), partnerships, REMICs, and trusts must use Form Tocome tax returns.	7004 to request an extension of
one of the relectronically returns, or a	iling (e-file). Generally, you can electronically file Form 8868 if you want a 3-month au eturns noted below (6 months for a corporation required to file Form 990-T). Hower if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms composite or consolidated Form 990-T. Instead, you must submit the fully completed and ore details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file to	ver, you cannot file Form 8868 s 990-BL, 6069, or 8870, group d signed page 2 (Part II) of Form
Type or print	Name of Exempt Organization THE HAZEL FARM PROPERTY FOUNDATION, INC.	Employer identification number 20-1330518
File by the due date for filing your	Number, street, and room or suite no. If a P.O box, see instructions. 4419 COOPER ROAD	
return. See instructions	City, town or post office, state, and ZIP code. For a foreign address, see instructions.  EDEN, MD 21822  INTERNAL REVENUE \$	SERVICE
Check type ☐ Form 990 ☐ Form 990 ☐ Form 990 ☒ Form 990	D-BL	☐ Form 5227 ☐ Form 6069
	are in the care of $\blacktriangleright$ JOSEPH J. PEARCE, III  No. $\blacktriangleright$ 410-430-1455 FAX No. $\blacktriangleright$	
<ul><li>If the orga</li><li>If this is for the whole</li></ul>	nization does not have an office or place of business in the United States, check this in a Group Return, enter the organization's four digit Group Exemption Number (GEN) group, check this box	box ▶ □
until for the	est an automatic 3-month (6 months for a corporation required to file For $08/16$ , $2010$ , to file the exempt organization return for the organization organization's return for: calendar year $2009$ or	
<b>-</b> → -	tax year beginning, 20, and ending	, 20
2 If this t	ax year is for less than 12 months, check reason:   Initial return   Final return	Change in accounting period
	application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax y nonrefundable credits. See instructions.	3a \$ 0.00
	application is for Form 990-PF or 990-T, enter any refundable credits and estimated tains made. Include any prior year overpayment allowed as a credit.	x 3b \$ 0.00
c Balanc deposit	e Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Paymen). See instructions.	
	ou are going to make an electronic fund withdrawal with this Form 8868, see Form 84	

Form 1	8868 (Rev	4-2009)		•	•		Page <b>2</b>
Note	. Only co	riling for an Additional (Not Automatic) 3-Mont omplete Part II if you have already been granted an filing for an Automatic 3-Month Extension, con	automatic 3-month	exter (on pa	nsion on a pre age 1).	viously filed Forr	n 8868
Par	t II	Additional (Not Automatic) 3-Month Exten	nsion of Time. Or	nly file	the origina		
Type print		Name of Exempt Organization THE HAZEL FARM PROPERTY FOU		NC.		20-133051	
	led ate for	Number, street, and room or suite no If a PO box, $4419$ COOPER ROAD				For IRS use only	/ 
filing ti retum instruc	See tions.	City, town or post office, state, and ZIP code. For a foreign EDEN , $\ \ MD \ \ 21822$	· · · · · · · · · · · · · · · · · · ·	ions			
Chec	k type	of return to be filed (File a separate application	for each return):				
□ F	orm 990			☐ Fo	orm 1041-A	☐ For	m 6069
□ F	orm 990	-BL	08(a) trust)	□ Fo	orm 4720	☐ For	n 8870
□ F	orm 990	-EZ Form 990-T (trust other than	above)	□ Fc	orm 5227		
STOP	P! Do no	t complete Part II if you were not already grante	ed an automatic 3-	monti	extension o	n a previously f	iled Form 8868.
Tele If the lifth the list was a second to the	ephone ne orgar nis is for ne whole rith the r	a group Return, enter the organization's four die group, check this box ▶ ☐ . If it is for ames and EINs of all members the extension is	FAX No. ►  ness in the United igit Group Exemptior part of the group for.	States ion Nu p, che	umber (GEN) eck this box.	box	. If this is
4	I reques	t an additional 3-month extension of time until	NOVEMB	ER	15	2010.	
5	For cale	ndar year 2009 , or other tax year beginning		. 20	. and endin		. 20 .
6	If this ta	x year is for less than 12 months, check reason	: Initial return		Final return	Change in ac	counting period
7	State in	detail why you need the extension ADDITIO SSARY INFORMATION TO PROPERI	NAL TIME I	S NE	EEDED TO		
8a		pplication is for Form 990-BL, 990-PF, 990-T, 4	4720, or 6069, ento	er the	tentative tax	8a \$	
	estimate	oplication is for Form 990-PF, 990-T, 4720, or 6 ed tax payments made. Include any prior year ove paid previously with Form 8868.					
		<b>Due.</b> Subtract line 8b from line 8a. Include your payn coupon or, if required, by using EFTPS (Electronic Federal)					0.00
			and Verification				
		of perjury, I declare that I have examined this form, including a and complete, and that I am authorized to prepare this form		s and s	tatements, and t	o the best of my kno	owledge and belief,
Signati	ure ►	leyma Montagna II	itle ► CPA			Date ▶ 07 /	27/10
		<del></del>				Form 8	868 (Rev 4-2009)