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### 990-PF

Return of Private Foundation

or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation OMB No 1545-0052
2009

Department of the Treasury Internal Revenue Service

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

- 01	Calcilu	ar year 2005, or tax year be	9y	, aı	na enamy			
G	Check a	·· · · · =	al return ended return	Initial return of a for Address change	·	-	Final rei	turn
U	se the IR!	_ <del>_</del>	·				mployer identification nur 26-18343	
C	therwise	Number and street (or P O box		elivered to street address)	Room/suite	ВТ	elephone number (see page	
	print	PO Box 2626			1100111001110		603-763-3	
	or type. e Specifi	Oder and the send 71D and a				Сн	exemption application is per	
	struction:	··		NH	03257		Foreign organizations, che	
		ype of organization X Sec	tion 501(c)(3) exe			f	Foreign organizations mee	_
		4947(a)(1) nonexempt chan					check here and attach com	putation ►
ī	Fair mar	rket value of all assets at end	J Accounting	method X Cash	n		private foundation status wa ider section 507(b)(1)(A), ch	
		from Part II, col. (c),	Other (st	pecify)			the foundation is in a 60-mo	
	line 16)	<b>▶</b> \$ 17,894,37	0 (Part I, column (	d) must be on cash bas	is)	un	ider section 507(b)(1)(B), ch	neck here
Pa	rti An	nalysis of Revenue and Exp	enses (The total of	(a) Revenue and				(d) Disbursements
		ounts in columns (b), (c), and (d) may		expenses per	(b) Net investm income	ent	(c) Adjusted net income	for chantable purposes
	the	amounts in column (a) (see page 11 o	of the instructions))	books			mome	(cash basis only)
	1 Cor	ntributions, gifts, grants, etc., received	(attach schedule)					
	2 Che	eck 🛌 if the foundation is <b>not</b> requ	ured to attach Sch B					
	3 Inte	erest on savings and temporary	cash investments	0		0		
	4 Div	vidends and interest from securiti	es .	340,853	340	),853		
l	<b>5 a</b> Gro	oss rents .				0		<u> </u>
Ð	b Net	t rental income or (loss)	0					
	6 a Net	t gain or (loss) from sale of asse	ts not on line 10	-53,751				
Revenue		oss sales price for all assets on line 6a						<del> </del>
R		pital gain net income (from Part	IV, line 2)			0		
	_	t short-term capital gain					0	
		come modifications	1					
		oss sales less returns and allowances	0		-			
		ss Cost of goods sold	0					
		oss profit or (loss) (attach schedu	ile) .	0				
		her income (attach schedule)		<del></del>		0	0	
		tal. Add lines 1 through 11	<u> </u>	287,102	340	),853	0	
Expenses		mpensation of officers, directors		0				
S		her employee salanes and wage:	5					
8		nsion plans, employee benefits					0	
ũ	. •	gal fees (attach schedule)		4 010		0	0	4.010
Ş		counting fees (attach schedule) ner professional fees (attach sch	adula)	4,019		0	0	4,019 0
ati		ner professionariees (attach schi erest .	caule/	<del> </del>		$\dashv$		
str		erest les (attach schedule) (see page 14 of ti	e instructions\	10,475		0	0	0
Ξ		preciation (attach schedule) and	•	10,475			0	
튀		cupancy .						·
ĕ		ivel, conferences, and meetings						
밀		nting and publications EIVED						
a		ner expenses (attach-schedule)		53,635	53	,635	0	0
<b>Operating and Administrative</b>	24 Tot	tal operating and administrativ	e expenses.				·	•
ם	Add	d lines 33 through 23 % 8 2010	1 1 7 1	68,129	53	,635	o	4,019
9		ntributions, gifts, grants paid	N SS	919,000				919,000
0		al expenses and dispursements A	ly lines 24 and 25	987,129	53	,635	0	923,019
$\neg$		btract line 26 from line 12				,		
ĺ		ess of revenue over expenses and	disbursements	-700,027				
		t investment income (if negative			287	,218		
		justed net income (if negative,	•				_	

For Privacy Act and Paperwork Reduction Act Notice, see page 30 of the instructions.

Da	rt II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End o	of year
P a	I E II	should be for end-of-year amounts only (See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing	174,888	52,394	52,394
	2	Savings and temporary cash investments			
	3	Accounts receivable   0			
	ļ	Less: allowance for doubtful accounts	0	0	0
	4	Pledges receivable   0			
		Less allowance for doubtful accounts	o	0	0
	5	Grants receivable	·		
	6	Receivables due from officers, directors, trustees, and other		<del></del>	
		disqualified persons (attach schedule) (see page 15 of the			_
		instructions) .	0	0	0
	7	Other notes and loans receivable (attach schedule)			
ţ	1	Less allowance for doubtful accounts	0	0	0
Assets	8	Inventones for sale or use			
A	9	Prepaid expenses and deferred charges			
	10 a	Investments—U S and state government obligations (attach schedule)	0	0	C
	1	Investments—corporate stock (attach schedule)	0	0	
	(	Investments—corporate bonds (attach schedule)	0	0	C
	11	Investments—land, buildings, and equipment basis			
		Less accumulated depreciation (attach schedule)	0	0	<u></u>
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)	0	0	0
	14	Land, buildings, and equipment basis			
		Less accumulated depreciation (attach schedule)	0	0	0
	15	Other assets (describe  See Attached Statement )	12,864,145	17,841,976	17,841,976
	16	Total assets (to be completed by all filers—see the			
		instructions Also, see page 1, item i)	13,039,033	17,894,370	17,894,370
	17	Accounts payable and accrued expenses			
m	18	Grants payable .			
Ë	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons	0	0	
iak	21	Mortgages and other notes payable (attach schedule) .	0	0	
_	22	Other liabilities (describe  )	0	0	
	23	Total liabilities (add lines 17 through 22)	0	0	
		Foundations that follow SFAS 117, check here			
9		and complete lines 24 through 26 and lines 30 and 31.			
nces	24	Unrestricted			
<u>ē</u>	25	Temporarily restricted			
B	26	Permanently restricted			
Net Assets or Fund Bala		Foundations that do not follow SFAS 117, check here			
Ē		and complete lines 27 through 31.			
Ž	27	Capital stock, trust principal, or current funds	13,039,033	17,894,370	
Š	28	Paid-in or capital surplus, or land, bldg., and equipment fund		. ,	
set	29	Retained earnings, accumulated income, endowment, or other funds			
Š	30	Total net assets or fund balances (see page 17 of the			
it/		instructions)	13,039,033	17,894,370	
ž	31	Total liabilities and net assets/fund balances (see page 17		•	
		of the instructions) .	13,039,033	17,894,370	
Pai	t III	Analysis of Changes in Net Assets or Fund Balances			
		net assets or fund balances at beginning of year-Part II, column (a), line	30 (must agree with		
		f-year figure reported on prior year's return)	· •	. 1	13,039,033
2		amount from Part I, line 27a		2	-700,027
		increases not included in line 2 (itemize) See Attached Stateme	nt	3	5,555,364
		nes 1, 2, and 3		4	17,894,370
		eases not included in line 2 (itemize)		5	0
		net assets or fund balances at end of year (line 4 minus line 5)—Part II, c	olumn (b), line 30	6	17.894.370

If "Yes," the foundation does not o	ualify under section 4940(e). [	Do not complete this part.		
1 Enter the appropriate amoun	t in each column for each year	; see page 18 of the instructions	before r	making any entries
(a)  Base penod years  Calendar year (or tax year beginning in)	Base period years  Adjusted qualifying distributions  Net value of noncharitable-use assets		(d) Distribution ratio (col (b) divided by col (c))	
2008		535,144		0.000000
2007				0 000000
2006				0.000000
2005				0.000000
2004	<u> </u>	<u> </u>		0 000000
<ul><li>2 Total of line 1, column (d)</li><li>3 Average distribution ratio for the number of years the found</li></ul>	3	0.000000		
4 Enter the net value of nonchar	itable-use assets for 2009 from	n Part X, line 5	4	14,669,463
5 Multiply line 4 by line 3			5	0
6 Enter 1% of net investment inc	come (1% of Part I, line 27b)		6	2,872
7 Add lines 5 and 6			7	2,872
8 Enter qualifying distributions fr			8	923,019
the Part VI instructions on pag		rt VI, line 1b, and complete that	paπ usir 	ng a 1% tax rate See

Eom	1990-PF (2009) Hank and Lynn Hopeman Foundation, Inc. 26-183	4262	Dr	A
	1990-PF (2009) Hank and Lynn Hopeman Foundation, Inc. 26-183 Tt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of th			ons)
	Exempt operating foundations described in section 4940(d)(2), check here			J.1.0,
	Date of ruling or determination letter (attach copy of letter if necessary—see instructions)			
	Domestic foundations that meet the section 4940(e) requirements in Part V, check	- 5	2,872	-
	here X and enter 1% of Part I, line 27b		.,0.2	
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4%			
	of Part I, line 12, col (b)		- 1	
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		0	
3	Add lines 1 and 2	- 2	2,872	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-		2,872	
6	Credits/Payments:			
а	2009 estimated tax payments and 2008 overpayment credited to 2009 6a 9,411			
	Exempt foreign organizations—tax withheld at source 6b			
	Tax paid with application for extension of time to file (Form 8868)  6c  0			
	Backup withholding erroneously withheld 6d			
7	Total credits and payments. Add lines 6a through 6d	ۯ	,411	
8	Enter any penalty for underpayment of estimated tax. Check here		0	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		0	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	E	3,539	
11	Enter the amount of line 10 to be Credited to 2010 estimated tax ► 6,539 Refunded ► 11		0	
Pa	t VII-A. Statements Regarding Activities			
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
	participate or intervene in any political campaign?	1a		X
h	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 of the	<u> </u>		
~	instructions for definition)?	1b		х
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			-,
	published or distributed by the foundation in connection with the activities.			
c	Did the foundation file Form 1120-POL for this year? .	1c		Х
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
_	(1) On the foundation ► \$ (2) On foundation managers ► \$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
	on foundation managers > \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
	If "Yes," attach a detailed description of the activities			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles			
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3_		Х
4 a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		Х
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b	N/A	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
	If "Yes," attach the statement required by General Instruction T.			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions	_	_	. ه
	that conflict with the state law remain in the governing instrument?	6_	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	X	
8 a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the			
	instructions) ► NH			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney			
	General (or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	Χ	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3)			
	or 4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV on page 27)?			
	If "Yes," complete Part XIV	9_		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing			

their names and addresses

Form	1990-PF (2009) Hank and Lynn Hopeman Foundation, Inc	4362	Р	age 5
-Par	t VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see page 20 of the instructions)	11		×
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 ► N/A			<b></b>
14	The books are in care of ► Henry Hopernan Telephone no ► (603) 763-3	234		<b></b> .
	Located at PO Box 2626 New London NH ZIP+4 ▶ 03257			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here		Þ	▶ ∐
_	and enter the amount of tax-exempt interest received or accrued during the year			
Pa	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	<u> </u>	Yes	No
1a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?  Yes X No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"  If the foundation agreed to make a grant to or to employ the official for a period  after termination of government service, if terminating within 90 days.)  Yes X No			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)?	1b	N/A	
_	Organizations relying on a current notice regarding disaster assistance check here			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2009?	1c		Х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
а	At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2009?			
	If "Yes," list the years 20, 20, 20	1		
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)			
	to all years listed, answer "No" and attach statement—see page 20 of the instructions)	2b	N/A	
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
3a	20			
Ja	enterprise at any time during the year?  Yes X No			
b	If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation			
~	or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved			
	by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3)			
	the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine			
	if the foundation had excess business holdings in 2009.)	3b	N/A	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable			
	purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2009?	1 4h		x

For	m 990-PF (2009) Hank and Lynn Hopeman Fo	undation, Inc			26-18343	62 Page <b>6</b>
-Pa	rt VII-B Statements Regarding Activiti		4720 May Be R	equired (continued)		
5a	During the year did the foundation pay or incur any	amount to				
	(1) Carry on propaganda, or otherwise attempt t	o influence legislation (	section 4945(e))?	Yes	X No	
	(2) Influence the outcome of any specific public election (see section 4955), or to carry					
	on, directly or indirectly, any voter registration	n drive?		Yes	X No	
	(3) Provide a grant to an individual for travel, stu	idy or other similar nur	noses?	Yes	X No	
	(4) Provide a grant to an organization other than	•			<u></u> )•	
	in section 509(a)(1), (2), or (3), or section 49			Yes	X No	
	(5) Provide for any purpose other than religious,	chantable, scientific, Ir	terary, or			
	educational purposes, or for the prevention of		• .	Yes	X No	
b	If any answer is "Yes" to 5a(1)-(5), did any of the	transactions fail to qual	fv under the exception			
	Regulations section 53 4945 or in a current notice	•	•		5	b N/A
	Organizations relying on a current notice regarding			<b>▶</b> [		
С	If the answer is "Yes" to question 5a(4), does the f					
_	tax because it maintained expenditure responsibilit	•		Yes	No No	
	If "Yes," attach the statement required by Regulati	•	(d)			
6a	Did the foundation, during the year, receive any fur	nds, directly or indirectl	y, to pay			
	premiums on a personal benefit contract?			Yes	X No	
b	Did the foundation, during the year, pay premiums	, directly or indirectly, o	n a personal benefit			ь х
	If "Yes" to 6b, file Form 8870		•			
7a	At any time during the tax year, was the foundation	a party to a prohibited	tax shelter transaction	on? Yes [	X No	
b	If yes, did the foundation receive any proceeds or	have any net income at	tributable to the trans	saction?	7	b X
P	art VIII Information About Officers,	Directors, Truste	es. Foundation	Managers, Highly P	aid Empl	ovees,
	and Contractors	•			•	
1	List all officers, directors, trustees, found	ation managers and	their compansat	tion (see page 22 of th	e instructi	ione)
	,,,,,,,,,,	auvii illallayels alle	dien compensa	uon (see page 22 or u	ic iliou dou	01137.
_		(b) Title, and average	(c) Compensation	(d) Contributions to		pense account,
	(a) Name and address	<del></del>			(e) Exp	
He		(b) Title, and average hours per week	(c) Compensation (If not paid, enter	(d) Contributions to employee benefit plans	(e) Exp	ense account,
	(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter	(d) Contributions to employee benefit plans and deferred compensation	(e) Exp	ense account,
PO	(a) Name and address	(b) Title, and average hours per week devoted to position  President/Treas.	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Exp othe	pense account, r allowances
PO Lyr	(a) Name and address  nry W Hopeman  Box 2626 New London NH 03257	(b) Title, and average hours per week devoted to position  President/Treas. 2.00	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Exp othe	pense account, r allowances
PO Lyr	(a) Name and address  nry W Hopeman  Box 2626 New London NH 03257  nn G Hopeman	(b) Title, and average hours per week devoted to position  President/Treas.  2.00  Vice President/Seci 2.00	(c) Compensation (if not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Exp othe	pense account, r allowances  0
PO Lyr	(a) Name and address  nry W Hopeman  Box 2626 New London NH 03257  nn G Hopeman	(b) Title, and average hours per week devoted to position President/Treas. 2.00 Vice President/Sec	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Exp othe	pense account, r allowances
PO Lyr	(a) Name and address  nry W Hopeman  Box 2626 New London NH 03257  nn G Hopeman	(b) Title, and average hours per week devoted to position  President/Treas. 2.00  Vice President/Sect 2.00	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Exp othe	pense account, r allowances  0
PO Lyr PO	(a) Name and address  Try W Hopeman  Box 2626 New London NH 03257  In G Hopeman  Box 2626 New London NH 03257	(b) Title, and average hours per week devoted to position President/Treas. 2.00 Vice President/Seci 2.00 .00	(c) Compensation (If not paid, enter -0-)  0	(d) Contributions to employee benefit plans and deferred compensation	(e) Exporte	oense account, r allowances  0  0  0
PO Lyr PO	(a) Name and address  Try W Hopeman  Box 2626 New London NH 03257  The G Hopeman  Box 2626 New London NH 03257  Compensation of five highest-paid employ	(b) Title, and average hours per week devoted to position President/Treas. 2.00 Vice President/Seci 2.00 .00	(c) Compensation (If not paid, enter -0-)  0	(d) Contributions to employee benefit plans and deferred compensation	(e) Exporte	oense account, r allowances  0  0  0
PO Lyr PO	(a) Name and address  Try W Hopeman  Box 2626 New London NH 03257  In G Hopeman  Box 2626 New London NH 03257	(b) Title, and average hours per week devoted to position  President/Treas. 2.00  Vice President/Sect 2.00  .00  .00  yees (other than the	(c) Compensation (If not paid, enter -0-)  0  0  0  ose included on li	(d) Contributions to employee benefit plans and deferred compensation	(e) Exporte	oense account, r allowances  0  0  0
PO Lyr PO	(a) Name and address  Try W Hopeman  Box 2626 New London NH 03257  In G Hopeman  Box 2626 New London NH 03257  Compensation of five highest-paid employ If none, enter "NONE."	(b) Title, and average hours per week devoted to position  President/Treas. 2.00  Vice President/Sect 2.00  .00  .00  yees (other than the	(c) Compensation (If not paid, enter -0-)  0  0  0  ose included on li	(d) Contributions to employee benefit plans and deferred compensation ne 1—see page 23 of (d) Contributions to employee benefit	0 (e) Exported of the other ot	oense account, r allowances  0  0  0
PO Lyr PO	(a) Name and address  Try W Hopeman  Box 2626 New London NH 03257  The G Hopeman  Box 2626 New London NH 03257  Compensation of five highest-paid employ	(b) Title, and average hours per week devoted to position President/Treas. 2.00 Vice President/Seci 2.00 .00 .00 yees (other than the	(c) Compensation (If not paid, enter -0-)  0  0  0  ose included on li	(d) Contributions to employee benefit plans and deferred compensation ne 1—see page 23 of the contributions to employee benefit plans and deferred	(e) Exported of the instruction (e) Exported of the instructio	oense account, r allowances  0  0  0  ctions).
PO Lyr PO 	(a) Name and address  Try W Hopeman  Box 2626 New London NH 03257  In G Hopeman  Box 2626 New London NH 03257  Compensation of five highest-paid employ  If none, enter "NONE."	(b) Title, and average hours per week devoted to position  President/Treas. 2.00  Vice President/Sect 2.00  .00  .00  yees (other than the	(c) Compensation (If not paid, enter -0-)  0  0  0  ose included on li	(d) Contributions to employee benefit plans and deferred compensation to the following of the following contributions to employee benefit to the following contributions to employee the	(e) Exported of the instruction (e) Exported of the instructio	oense account, r allowances  0  0  0  ctions).
PO Lyr PO	(a) Name and address  Try W Hopeman  Box 2626 New London NH 03257  In G Hopeman  Box 2626 New London NH 03257  Compensation of five highest-paid employ  If none, enter "NONE."	(b) Title, and average hours per week devoted to position President/Treas. 2.00 Vice President/Seci 2.00 .00 .00 yees (other than the	(c) Compensation (If not paid, enter -0-)  0  0  0  ose included on li	(d) Contributions to employee benefit plans and deferred compensation ne 1—see page 23 of the contributions to employee benefit plans and deferred	(e) Exported of the instruction (e) Exported of the instructio	oense account, r allowances  0  0  0  ctions).
PO Lyr PO 	(a) Name and address  Try W Hopeman  Box 2626 New London NH 03257  In G Hopeman  Box 2626 New London NH 03257  Compensation of five highest-paid employ  If none, enter "NONE."	(b) Title, and average hours per week devoted to position President/Treas. 2.00 Vice President/Seci 2.00 .00 .00 yees (other than the	(c) Compensation (If not paid, enter -0-)  0  0  0  ose included on li	(d) Contributions to employee benefit plans and deferred compensation ne 1—see page 23 of the contributions to employee benefit plans and deferred	(e) Exported of the instruction (e) Exported of the instructio	oense account, r allowances  0  0  0  ctions).
PO Lyr PO 	(a) Name and address  Try W Hopeman  Box 2626 New London NH 03257  In G Hopeman  Box 2626 New London NH 03257  Compensation of five highest-paid employ  If none, enter "NONE."	(b) Title, and average hours per week devoted to position President/Treas. 2.00 Vice President/Seci 2.00 .00 .00 yees (other than the	(c) Compensation (If not paid, enter -0-)  0  0  0  ose included on li	(d) Contributions to employee benefit plans and deferred compensation ne 1—see page 23 of the contributions to employee benefit plans and deferred	(e) Exported of the instruction (e) Exported of the instructio	oense account, r allowances  0  0  0  ctions).
PO Lyr PO 	(a) Name and address  Try W Hopeman  Box 2626 New London NH 03257  In G Hopeman  Box 2626 New London NH 03257  Compensation of five highest-paid employ  If none, enter "NONE."	(b) Title, and average hours per week devoted to position President/Treas. 2.00 Vice President/Seci 2.00 .00 .00 yees (other than the	(c) Compensation (If not paid, enter -0-)  0  0  0  ose included on li	(d) Contributions to employee benefit plans and deferred compensation ne 1—see page 23 of the contributions to employee benefit plans and deferred	(e) Exported of the instruction (e) Exported of the instructio	oense account, r allowances  0  0  0  ctions).
PO Lyr PO 	(a) Name and address  Try W Hopeman  Box 2626 New London NH 03257  In G Hopeman  Box 2626 New London NH 03257  Compensation of five highest-paid employ  If none, enter "NONE."	(b) Title, and average hours per week devoted to position President/Treas. 2.00 Vice President/Seci 2.00 .00 .00 yees (other than the	(c) Compensation (If not paid, enter -0-)  0  0  0  ose included on li	(d) Contributions to employee benefit plans and deferred compensation ne 1—see page 23 of the contributions to employee benefit plans and deferred	(e) Exported of the instruction (e) Exported of the instructio	oense account, r allowances  0  0  0  ctions).
PO Lyr PO 	(a) Name and address  Try W Hopeman  Box 2626 New London NH 03257  In G Hopeman  Box 2626 New London NH 03257  Compensation of five highest-paid employ  If none, enter "NONE."	(b) Title, and average hours per week devoted to position President/Treas. 2.00 Vice President/Seci 2.00 .00 .00 yees (other than the	(c) Compensation (If not paid, enter -0-)  0  0  0  ose included on li	(d) Contributions to employee benefit plans and deferred compensation ne 1—see page 23 of the contributions to employee benefit plans and deferred	(e) Exported of the instruction (e) Exported of the instructio	oense account, r allowances  0  0  0  ctions).
PO Lyr PO 	(a) Name and address  Try W Hopeman  Box 2626 New London NH 03257  In G Hopeman  Box 2626 New London NH 03257  Compensation of five highest-paid employ  If none, enter "NONE."	(b) Title, and average hours per week devoted to position President/Treas. 2.00 Vice President/Seci 2.00 .00 .00 yees (other than the	(c) Compensation (If not paid, enter -0-)  0  0  0  ose included on li	(d) Contributions to employee benefit plans and deferred compensation ne 1—see page 23 of the contributions to employee benefit plans and deferred	(e) Exported of the instruction (e) Exported of the instructio	oense account, r allowances  0  0  0  ctions).
PO Lyr PO 	(a) Name and address  Try W Hopeman  Box 2626 New London NH 03257  In G Hopeman  Box 2626 New London NH 03257  Compensation of five highest-paid employ  If none, enter "NONE."	(b) Title, and average hours per week devoted to position President/Treas. 2.00 Vice President/Seci 2.00 .00 .00 yees (other than the	(c) Compensation (If not paid, enter -0-)  0  0  0  ose included on li	(d) Contributions to employee benefit plans and deferred compensation ne 1—see page 23 of the contributions to employee benefit plans and deferred	(e) Exported of the instruction (e) Exported of the instructio	oense account, r allowances  0  0  0  ctions).
PO Lyr PO 	(a) Name and address  Try W Hopeman  Box 2626 New London NH 03257  In G Hopeman  Box 2626 New London NH 03257  Compensation of five highest-paid employ  If none, enter "NONE."	(b) Title, and average hours per week devoted to position President/Treas. 2.00 Vice President/Seci 2.00 .00 .00 yees (other than the	(c) Compensation (If not paid, enter -0-)  0  0  0  ose included on li	(d) Contributions to employee benefit plans and deferred compensation ne 1—see page 23 of the contributions to employee benefit plans and deferred	(e) Exported of the instruction (e) Exported of the instructio	oense account, r allowances  0  0  0  ctions).

Form 990-PF (2009) Hank and Lynn Hopeman Foundation, Inc.	26-1834362	Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Pai	d Employee	s,
and Contractors (continued)		
3 Five highest-paid independent contractors for professional services (see page 23 of the instructions). If none, enti-		
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Comper	nsation
Five Tower Bridge, Suite 500, W. Conshohocken, PA 19428-2998 Investment advisory services		53,635
		0
		0
		0
		0
Total number of others receiving over \$50,000 for professional services	▶	
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficianes served, conferences convened, research papers produced, etc.	Expens	ses
1 N/A		
2		
3		
4		
Part IX-B Summary of Program-Related Investments (see page 24 of the instructions)		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amou	nt
1 None.		
2		
All other program-related investments See page 24 of the instructions		
3		
		0
Total. Add lines 1 through 3		0

Form **990-PF** (2009)

Par	t X Minimum Investment Return (All domestic foundations must complete this part. Foreign	founda	itions,
•	see page 24 of the instructions.)		<u></u>
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes	J <u>-</u>	
а	Average monthly fair market value of securities	1a	14,870,925
þ	Average of monthly cash balances	1b	21,931
С	Fair market value of all other assets (see page 24 of the instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	14,892,856
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	<u> </u>
3	Subtract line 2 from line 1d	3	14,892,856
4	Cash deemed held for charitable activities Enter 1½ % of line 3 (for greater amount, see page 25		
	of the instructions)	4	223,393
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	14,669,463
6	Minimum investment return. Enter 5% of line 5	6	733,473
Par	Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) private of	peratin	g
	foundations and certain foreign organizations check here   and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	733,473
2a	Tax on investment income for 2009 from Part VI, line 5		
b	Income tax for 2009 (This does not include the tax from Part VI )	1	
С	Add lines 2a and 2b	2c	2,872
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	730,601
4	Recovenes of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4 .	5	730,601
6	Deduction from distributable amount (see page 25 of the instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1	7	730,601
D4	VIII Our life in a Distallantian of consequence OF of the metallications)		
Part	Qualifying Distributions (see page 25 of the instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	923,019
ь	Program-related investments—total from Part IX-B	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	_
3	Amounts set aside for specific charitable projects that satisfy the		
а	Surtability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	0
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	923,019
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 (see page 26 of the instructions)	5	2,872
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	920,147

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation

qualifies for the section 4940(e) reduction of tax in those years

Pa	ert	XIII Undistributed Income (see page	26 of 1	the instructions)			
1		Distributable amount for 2009 from Part XI,		(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
_		line 7					730,601
2		Undistributed income, if any, as of the end of 20	J09			25 760	
	a	Enter amount for 2008 only			0	25,768	
2	b	Total for prior years 20, 20, 20	_		0		
3		Excess distributions carryover, if any, to 2009	^				
		From 2004 .					
	b	From 2005	0				
	C	From 2006	0				
	d	From 2007	0				
	e	From 2008					
	f	Total of lines 3a through e		0			
4		Qualifying distributions for 2009 from Part					
	_	XII, line 4			*	25,768	
		Applied to 2008, but not more than line 2a				23,700	<del></del>
	U	Applied to undistributed income of prior years			o		
	_	(Election required—see page 26 of the instruction Treated as distributions out of corpus (Election	ons)				
	C			0			
	4	required—see page 26 of the instructions) Applied to 2009 distributable amount			,,,, .,, .,, .,, .,, ., ., ., ., ., ., .		730,601
		Remaining amount distributed out of corpus		166,650			730,001
5		·		0	<del></del>		0
3		Excess distributions carryover applied to 2009 (If an amount appears in column (d), the					
		same amount must be shown in column (a).)		^			
6		Enter the net total of each column as indicated below:		3			
	_		E	166,650			
		Corpus Add lines 3f, 4c, and 4e Subtract line 5	<b>.</b>	100,030			
	D	Prior years' undistributed income Subtract			O	,	
	_	line 4b from line 2b					
	C	Enter the amount of prior years' undistributed		4			
		income for which a notice of deficiency has				1	
		been issued, or on which the section 4942(a)					
	4	tax has been previously assessed Subtract line 6c from line 6b Taxable					
	u				o		
	_	amount—see page 27 of the instructions . Undistributed income for 2008 Subtract line	•				<del></del>
	e		-646-				
		4a from line 2a Taxable amount—see page 27	or the			o	
	£	Undistributed income for 2009 Subtract				<u> </u>	<del></del>
	'					:	
		lines 4d and 5 from line 1. This amount must					0
7		be distributed in 2010		<u> </u>			
′		Amounts treated as distributions out of					
		corpus to satisfy requirements imposed by					
		section 170(b)(1)(F) or 4942(g)(3) (see page 27	OI				
8		the instructions) Excess distributions carryover from 2004					
0		•					
		not applied on line 5 or line 7 (see page 27 of the	ie	_			
9		Instructions)		0			
3		Excess distributions carryover to 2010.  Subtract lines 7 and 8 from line 6a		166,650		1	
10				100,000			
		Analysis of line 9	0				
	đ	Excess from 2005 .					
	ט	Excess from 2006					
	<u>ل</u> ال	Excess from 2007	0				
	a	Excess from 2008	166 650				
	е	Excess from 2009	166,650	1	ı .	1	

om 99	0-PF (2009) Hank and Lynn Hopeman F	oundation Inc			26-18 <b>3</b>	4362 Page <b>10</b>
	V Private Operating Foundations (s		instructions ar	nd Part VII-A, qu		N/A
	the foundation has received a ruling or determinundation, and the ruling is effective for 2009, ent			▶		
	neck box to indicate whether the foundation is a	private operating found	dation described in	section	4942(J)(3) or	4942(J)(5)
	nter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total
	vestment return from Part X for each	(a) 2009	(b) 2008	(c) 2007	(d) 2006	
. *	ar listed	0	0		0	0
c Q	<sup>1</sup> % of line 2a ⊔alifying distributions from Part XII, e 4 for each year listed	0	0	0	0	0
<b>d</b> Ar	nounts included in line 2c not used directly ractive conduct of exempt activities		- 0			0
fo	ualifying distributions made directly  ractive conduct of exempt activities  ubtract line 2d from line 2c	0	0	0	0	0
Co alt a "A	omplete 3a, b, or c for the emative test relied upon ssets" alternative test—enter					
(1	) Value of all assets					0
•	Value of assets qualifying under section 4942(j)(3)(B)(i)					0
of Pa	ndowment" alternative test—enter 2/3 minimum investment return shown in int X, line 6 for each year listed	0	0			0
	upport" alternative test—enter:					
(1	Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					C
(2	) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					C
•	) Largest amount of support from an exempt organization					0
	Gross investment income					0
art )			-		000 or more in	
a Lis	assets at any time during the ye formation Regarding Foundation Managet any managers of the foundation who have corfore the close of any tax year (but only if they have been seen to be seen to be a seen to be	gers:	of the total contril	butions received by	the foundation	
	st any managers of the foundation who own 10% nership of a partnership or other entity) of which		•		ortion of the	
In	formation Regarding Contribution, Grar	nt, Gift, Loan, Scho	larship, etc., Pr	ograms:	-	
un	neck here $\blacktriangleright \boxed{X}$ if the foundation only makes solicited requests for funds. If the foundation makes der other conditions, complete items 2a, b, c, a	akes gifts, grants, etc				tions
	e name, address, and telephone number of the		cations should be a	addressed		- <del> </del>
<b>b</b> Th	e form in which applications should be submitte	ed and information and	materials they sho	ould include	<del></del>	
c An	y submission deadlines					
d An	y restrictions or limitations on awards, such as	by geographical areas,	charitable fields, l	kinds of institutions.	or other	···-

factors

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment						
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount		
Name and address (home or business)	or substantial contributor	recipient				
a Paid dunng the year Wake Forest University Health Sciences		501(c)(3)	Establish Medical Ctr	150,000		
Wake Forest University Baptist Medical Center		501(c)(3)	Annual Operating	2,000		
Mary Hitchcock Memorial Hospital		501(c)(3)	Education	100,000		
Grove City College		501(c)(3)	Education	6,000		
James Madison University Foundation, Inc		501(c)(3)	Education	1,000		
Grove City College		501(c)(3)	Capital Campaign	650,000		
Kearsarge Community Presbytenan Church		501(c)(3)	General Fund	10,000		
Total			► 3a	919,000		
b Approved for future payment	<u> </u>	T	]	010,000		
Mary Hitchcock Memorial Hospital		501(c)(3)	Medical	100,000		
Wake Forest University Health Sciences		501(c)(3)	Education	150,000		
Mary Hitchcock Memorial Hospital		501(c)(3)	Medical	100,000		
Grove City College		501(c)(3)	Education	6,000		
James Madison University Foundation, Inc.		501(c)(3)	Education	1,000		
Taft School Corporation		501(c)(3)	Education	1,000		
Wake Forest University Health Sciences		501(c)(3)	Education	150,000		
		30.(0)(0)		150,000		
Total			<b>▶</b> 3b	508,000		

om 990-PF (2009) Hank and Lynn Hopeman Foundation Part XVI-A Analysis of Income-Producing Acti			<u> </u>	<u> 26-183</u>	4362 Page <b>12</b>
Enter gross amounts unless otherwise indicated.	Unrelated bus	siness income	Excluded by section	(e)	
Program service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See page 28 of the instructions)
a		0		0	C
b		0		0	C
С		0		0	
d		0		0	
e		0		0	
f		0		0	
g Fees and contracts from government agencies	ļ				
2 Membership dues and assessments					-
3 Interest on savings and temporary cash investments					
4 Dividends and interest from securities			14	340,853	
5 Net rental income or (loss) from real estate		· · · · · · · · · · · · · · · · · · ·			
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property	-				
7 Other investment income	-			0	
8 Gain or (loss) from sales of assets other than inventory     Net income or (loss) from special events				<u>u</u>	
10 Gross profit or (loss) from sales of inventory				_	
1 Other revenue a		0		0	C
b	-	0	· · · · · · · · · · · · · · · · · · ·	0	
C		0		0	
d		0		0	C
e		0		0	C
2 Subtotal Add columns (b), (d), and (e) .		0		340,853	
3 Total. Add line 12, columns (b), (d), and (e)				13	340,853
See worksheet in line 13 instructions on page 28 to verify calc				<del> </del>	
Part XVI-B Relationship of Activities to the Activities No.  Explain below how each activity for which income the accomplishment of the foundation's exempt page 28 of the instructions )	e is reported in colu	umn (e) of Part X	VI-A contributed in		
				<del></del>	
		_			
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		· · · · · · · · · · · · · · · · · · ·		<u>.</u>	
	···		<del></del>		
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				-	
	· · · ·				

Pa	rt XVII	Information Regardi Exempt Organizatio	ng Transfers To and Tr	ansactions ar	id Rel	ationships Wi	ith No	oncharita	ble		
1	Did the		ndirectly engage in any of th	e following with	anv ot	her organization	desci	ibed		Yes	No
	ın sec		her than section 501(c)(3) o								-
а	•		ndation to a noncharitable e	xempt organizat	on of						
•		ash							1a(1)		Х
	` '	ther assets .						ļ-	1a(2)		Х
b		transactions:									
	(1) Sa	ales of assets to a nonchar	itable exempt organization					[	1b(1)		X
	(2) Pu	urchases of assets from a	noncharitable exempt organ	nization .					1b(2)		X
			nt, or other assets						1b(3)		Х
		eimbursement arrangemer						-	1b(4)		X
		pans or loan guarantees							1b(5)		X
_			nembership or fundraising s				•	· · ·	1b(6)		X
		• • • •	mailing lists, other assets, o is "Yes," complete the folio			. 41.5 . 1 1.4 . 1		· · <u>L</u>	1c		^
	value (	of the goods, other assets.	or services given by the re ng arrangement, show in co (c) Name of nonchantable exempt	porting foundation (d) the value	on If thue of the	ne foundation red	ceived assets	l less than s, or servic	fair m	narket ceive	d. 
(a)	Line no	(b) Amount involved	(c) Name of Honorialitable exempt	Lorganization	(u) Des	cription of transfers, t	alisaci	JUIIS, AITU SITA	uniy an	anyem	en is
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	descri		ectly affiliated with, or relate e Code (other than section t chedule					. 🔲 Y	es X	No	
		(a) Name of organization		of organization	-	(c) Des	cription	of relationship	p		
	Linds		at I have examined this return, includ	(no occompositor of	aboduloo	and statements, and	to the l	and of my kno	nudoda:		
<b>a</b>		f, it is true, correct, and complete	Declaration of preparer (other than t		ıs based	on all information of		reparer has a			
e	<b>V</b> Sig	nature of officer or trustee		Date	, /	Titl	e				
Sign Here				Date				Preparer's ide			
īg	ar's	Dranarada N		-		Check if	_	number (see t	_		
Ś	Paid Preparer's Use Only	Preparer's signature		8/12/2010	,	self-employed ▶		page 30 of the	ะ การชน	cuons)	
	Pre Use	Emple as a few and few	ROWLEY AND ASSOCIATE	-			EJNI	<b>▶</b> 02-052	2610		
		self-employed), address,			_					5400	
		and ZIP code	SA HILLS AVE, CONCORD	, IVITI USSU I			Phon	e no (603)	220-0	<del>/+</del> UU	

# Line 6 (990-PF) - Gain/Loss from Sale of Assets Other Than Inventory

Saln oss	-53,751	0				Depreclation		<del>  -</del>   	ŧ †	!				       		
Net Gain or Loss			Expense of Sale and	Cost of	Improve-	ments		   	: i							
Cost, Other Basis and Expenses	253,751	0			Valuation		FMV									
Cost, Basis and					Cost or	Other Basis	168,181	85,570	!							
Gross Sales	200,000	0			<b>Gross Sales</b>	Price	132,000	68,000								
					Date	Sold	12/21/2009	12/22/2009								
Totals	Securities	Other sales			Acquisition		۵	۵								
					Date	Acquired	12/19/2008	12/19/2008								
			Check "X" if	Purchaser	isa	Business										
						Purchaser										
Amount						CUSIP #										
ţ	Long Term CG Distributions	Short Term CG Distributions				Description	12,476 Sh Hirtle Callaghan Sm	6,355 Sh Hirtle Callaghan Sm C								
				Check "X"		Security	×	×								
						Index	-	7	က	4	9	9	7	8	တ	10

### Line 16b (990-PF) - Accounting Fees

		4,019	0	0	4,019
		Revenue and			Disbursements for Charitable
		Expenses per	Net Investment	Adjusted Net	Purposes
	Person Providing Service	Books	Income	Income	(Cash Basis Only)
1	Rowley & Associates, PC	4,019			4,019
2					
3					7
4					
5					
9					
7					
8					
6					
10					

Line 18 (990-PF) - Taxes

	10,475	0	0	0
	Revenue			Disbursements
	and Expenses	Net Investment	Adjusted	for Charitable
Description	per Books	Income	Net Income	Purposes
2009 Estimated Tax Payment	8,000			
2008 NHCT2-a	75			
2009 Estimated Tax Payment	400			
2008 Estimated Tax Payment	2,000			

### Line 23 (990-PF) - Other Expenses

		53,635	53,635	0	0
		Revenue and			Disbursements
		Expenses	Net Investment	Adjusted Net	for Charitable
	Description	per Books	Income		Purposes
-	Amortization. See attached statement	0	0	0	0
7	Hirtle, Callaghan & Co. Investment Fees	53,635	53,635		
3					
4					
2					
9					
7					
8					
6					
9					

### Part II, Line 15 (990-PF) - Other Assets

		12,864,145	17,841,976	17,841,976
		Beginning	Ending	Fair Market
	Description	Balance	Balance	Value
-	Dreyfus Cash Management Institutional	2,687,000	3,151,712	3,151,712
7	Hirtle Callaghan Small Cap Equity Portfolio	427,211	416,773	416,773
3	Hirtel Callaghan International Equity Portfolio	1,784,515	3,615,564	3,615,564
4	Ssga Emerging Markets Fund	431,643	925,160	925,160
2	Hirtike Callaghan Value Equity Portfolio	1,847,529	2,230,276	2,230,276
9	Hirtle Callaghan Growth Portfolio	2,430,928	3,415,015	3,415,015
7	Hirtle Callaghan Fixed Income Portfolio	1,414,705	1,755,179	1,755,179
8	Hirtle Callaghan Fixed Income II Portfolio	1,439,879	1,504,077	1,504,077
6	Hirtle Callaghan High Yield Bond Portfolio	400,735	554,720	554,720
9	Hirtle Callaghan Real Estate	0	252,773	252,773
11	Hirtle Callaghan Trust Em	0	20,727	20,727

### Part III (990-PF) - Changes in Net Assets or Fund Balances

### Line 3 - Other increases not included in Part III, Line 2

1	Contributed Capital	1	2,452,003
2	Unrealized gain on investments	2	3,103,361
3	Total	3	5,555,364

## Part IV (990-PF) - Capital Gains and Losses for Tax on Investment Income

•	•	-53,751	Gains Minus Excess	of FMV Over Adjusted	Basis or Losses	-36,181	-17,570		0	0	0	0	0	0	0
		0		Excess of FMV	Over Adj Basis	0	0	0	0	0	0	0	0	0	0
		0	Adjusted Basis	as of	12/31/69										
		0	FM V	as of	12/31/69										
		-53,751		Gain or	Loss	-36,181	-17,570	0	0	0	0	0	0	0	0
		253,751	Cost or Other	_		188,181	85,570	0	0	0	0	0	0	0	0
		0		Depreciation	Allowed	0	0	0	0	0	0	0	0	0	0
		200,000	Gross	Sales	Price	132,000	000'89	0	0	0	0	0	0	0	0
		Totals		Date	Sold	12/21/2009	12/22/2009								
				Date	Acquired Acquired	12/19/2008   12/21/2009	12/19/2008 12/22/2009								
	0	0		How	Acquired	<u>a</u>	Ь								
אווסחוור	)				CUSIP #									•	
	Long Term CG Distributions	Short Term CG Distributions			Kind(s) of Property Sold	12,476 Sh Hirtle Callaghan Sm Cap Equity	6,355 Sh Hirtle Callaghan Sm Cap Equity								
						-	7	e	4	9	9	7	80	6	9

# VIII, Line 1 (990-PF) - Compensation of Officers, Directors, Trustees and Foundation Managers

man	PO Boy 2628	DO Box 2626	if Business Street City	if Business Street City	if Business Street Count Olds State Zip Code Count	if Business Street County State Zip Code County PO Roy 2626 New London NH 103257
	PO Box 2626	PO Box 2626 New London	New London	New London	New London NH 03257	New London
<del> </del>	PO Box 2626		New London	New London	New London NH 03257	New London NH 03257