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SCANNED MAY 2 0 2013

Return of Private Foundation

or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation

2009

OMB No 1545-0052

	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						2009	
_		ndar year 2009, or tax year beginning			, and e			
G	Check	all that apply Initial return		Initial return of a fo	rmer public o	charity	Final return	
		Amended return		Address change	ge		Name change	
Use the IRS Name of foundation					A Employer identification r	number		
	abel	. The William and Ann M		hy Family			0.5.5007100	
Oth	ierwi					12 : .	26-6087128	
^	print r typ:		elivered to	street address)		Room/suite	B Telephone number	: n
	Spe	TEO Hampton Headows				<u> </u>	603-929-205	
	ructi		20				C If exemption application is per	
	haal	type of organization X Section 501(c)(3) ex		rousto foundation			D 1 Foreign organizations, 2 Foreign organizations meet check here and attach com	ting the 85% test,
	_			rivate roundation ixable private founda	ition			
L E		arket value of all assets at end of year J Accounti			Acci	nial	E If private foundation statu under section 507(b)(1)(/	Is was terminated
		· —	her (sp			uai	1	•
	\$	565, 453 . (Part I, colu			oasis.)		F If the foundation is in a 60 under section 507(b)(1)(i	
Pá	irt l	Analysis of Revenue and Expenses) Revenue and		vestment	(c) Adjusted net	(d) Disbursements
		(The total of amounts in columns (b), (c), and (d) may not necessanly equal the amounts in column (a))		enses per books		ome	income	for chantable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received					N/A	
	2	Check ► X if the foundation is not required to attach Sch. B				17. 14. 1		
	3	Interest on savings and temporary cash investments		8,273.		8,273.	£	Statement 1
	4	Dividends and interest from securities		9,523.		9,523.		Statement 2
	5a	Gross rents		·····				
	b	Net rental income or (loss)				'		10
<u>o</u>	6a	Net gain or (loss) from sale of assets not on line 10		26,122.				······································
Revenue	b	Gross sales price for all assets on line 6a 399,175.	<u> </u>				<u> </u>	/************************************
Pe.	7	Capital gain net income (from Part IV, line 2)	ļ		2	6,122.		
_	8	Net short-term capital gain						
	9	Income modifications Gross sales less returns						
	10a	and allowances						
	i i	Less Cost of goods sold						
	11	Gross profit or (loss) Other income						
	12	Total. Add lines 1 through 11		43,918.	4	3,918.		·····
	13	Compensation of officers, directors, trustees, etc		0.		0.		0.
	14	Other employee salaries and wages						
	15	Pension plans, employee benefits						
ses	16a	Legal fees Stmt 3		1,707.		1,707.		0.
ē	b	Accounting fees			-			
EX	C	Other professional fees						
Ĭ	17	Interest	-72-					
Operating and Administrative Expenses	18	Taxes RECEIVE	D_					
inis	19	Depreciation and depleting						
Ę,	20	Occupancy MAY 1 A 96	# fox	ර භ				
ΥÞ	21	Travel, conferences, and meeting AY 1 4 20	IU	2				
au	22	Printing and publication	77			•		
ţi	23	Other expenses OGDEN,	<u> </u>				 	
era	24	Total operating and administrative		1 707		1,707.		0
ဝိ	25	expenses. Add lines 13 through 23 Contributions, gifts, grants paid		1,707. 2,351.		±, / U / •		0. 2,351.
	ı	Total expenses and disbursements		2,331.			-	
	-	Add lines 24 and 25		4,058.		1,707.		2,351.
	27	Subtract line 26 from line 12	-		· , ,			
	ŀ	Excess of revenue over expenses and disbursements		39,860.				
	l	Net investment income (if negative, enter -0-)			4	2,211.		
	C	Adjusted net income (if negative, enter -0-)					N/A	
9235 02-02	01 2-10	LHA For Privacy Act and Paperwork Reduction	Act Not	ice, see the instruct	ions.			Form 990-PF (2009)

Form **990-PF** (2009)

The William and Ann Murphy Family Charitable Foundation

Form 990-PF (2009)

26-6087128

Page 2

Form **990-PF** (2009)

<u> </u>		Attached schedules and amounts in the description	Beginning of year	End of	year
P	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
_	1	Cash - non-interest-bearing	140,000.		
	2	Savings and temporary cash investments	44,857.	23,725.	23,725.
	1	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			
ţ	8	Inventories for sale or use		-:	
Assets	9	Prepaid expenses and deferred charges			
ď	10a	Investments - U S and state government obligations			
	b	Investments - corporate stock Stmt 4	394,148.	392,226.	340,036.
	C	Investments - corporate bonds Stmt 5	0.	188,616.	196,997.
	11	investments - land, buildings, and equipment basis			
		Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other			***************************************
	14	Land, buildings, and equipment basis			
		Less. accumulated depreciation			
	15	Other assets (describe interest in transit)	0.	4,695.	4,695.
_	16	Total assets (to be completed by all filers)	579,005.	609,262.	565,453.
	17	Accounts payable and accrued expenses	11,225.		
	18	Grants payable			
es	19	Deferred revenue			
≣	20	Loans from officers, directors, trustees, and other disqualified persons		2,351.	
Liabilities	21	Mortgages and other notes payable			
_	22	Other liabilities (describe \blacktriangleright div adj for 2008)	729.	0.	
			11 054	0 051	
	23	Total liabilities (add lines 17 through 22)	11,954.	2,351.	
		Foundations that follow SFAS 117, check here			
Š		and complete lines 24 through 26 and lines 30 and 31			
ည	24	Unrestricted			
ala	25	Temporarily restricted			
B B	26	Permanently restricted			
Ë		Foundations that do not follow SFAS 117, check here			
Net Assets or Fund Balances		and complete lines 27 through 31	567 051	606 011	
ets	27	Capital stock, trust principal, or current funds	567,051.	606,911.	
SSI	28	Paid-in or capital surplus, or land, bldg, and equipment fund	0.	0.	
et 6	29	Retained earnings, accumulated income, endowment, or other funds	567,051.	606,911.	
Ž	30	Total net assets or fund balances	307,031.	000,911.	
	24	Tatal liabilities and not accept the delegan	579,005.	609,262.	
_		Total liabilities and net assets/fund balances		009,202.	
P	art	Analysis of Changes in Net Assets or Fund Ba	lances		
1	Tota	net assets or fund balances at beginning of year - Part II, column (a), line 3	0		
		st agree with end-of-year figure reported on prior year's return)		1	567,051.
2	Ente	r amount from Part 1, line 27a		2	39,860.
3	Othe	r increases not included in line 2 (itemize)		3	0.
4	Add	ines 1, 2, and 3		4	606,911.
5	Decr	eases not included in line 2 (itemize)		5	0.
ß	Total	I net assets or fund halances at end of year (line 4 minus line 5) - Part II, coli	umn (h) line 30	ا ء ا	606,911.

Charitable Foundation 26-6087128 Page 3 Form 990-PF (2009) Part IV Capital Gains and Losses for Tax on Investment Income (b) How acquired P - Purchase D - Donation (c) Date acquired (a) List and describe the kind(s) of property sold (e.g., real estate, (d) Date sold 2-story brick warehouse, or common stock, 200 shs MLC Co) (mo, day, yr) (mo , day, yr) (multiple sales) see attached Ρ UBS Financial P (multiple sales) see attached b **UBS** Financial C d 8 (h) Gain or (loss) (f) Depreciation allowed (g) Cost or other basis (e) Gross sales price (or allowable) plus expense of sale (e) plus (f) minus (g) 388,865 353,413 35,452. a 19,640 <9,330.> 10,310. b d e Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Gains (Col (h) gain minus (k), but not less than -0-) or (j) Adjusted basis (k) Excess of col (i) (i) FMV as of 12/31/69 Losses (from col (h)) as of 12/31/69 over col (j), if any 35,452. а <9,330. b C d е If gain, also enter in Part I, line 7 26,122. 2 Capital gain net income or (net capital loss) 2 If (loss), enter -0- in Part I, line 7 3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) N/A If (loss), enter -0- in Part I, line 8 Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income (For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.) If section 4940(d)(2) applies, leave this part blank Yes X No Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part Enter the appropriate amount in each column for each year, see instructions before making any entries (a) Base period years (d) Distribution ratio (c) Adjusted qualifying distributions Net value of noncharitable-use assets (col (b) divided by col (c)) Calendar year (or tax year beginning in) 22,369. 410,121. .054542 2008 2,000 432,210. .004627 2007 2006 2005 2004 2 Total of line 1, column (d) 2 .059169 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years .029585 3 480,924. 4 Enter the net value of noncharitable-use assets for 2009 from Part X, line 5 4 14,228. Multiply line 4 by line 3 5 422. Enter 1% of net investment income (1% of Part I, line 27b) 6 14,650. Add lines 5 and 6 7 2,351. 8 Enter qualifying distributions from Part XII, line 4 8

See the Part VI instructions

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate

•	The william and Ann Mulphy ramily			
	n 990-PF (2009) Charitable Foundation 26-60			Page 4
	ert VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - se	<u>e instru</u>	uctio	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here 🕨 🔙 and enter "N/A" on line 1			
	Date of ruling or determination letter (attach copy of letter if necessary-see instructions)		_	
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here I and enter 1%		8	44.
	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)			_
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	м		0.
_	Add lines 1 and 2		8	44.
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0.
	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-		8	44.
	Credits/Payments			
	2009 estimated tax payments and 2008 overpayment credited to 2009			
	Exempt foreign organizations - tax withheld at source			
	Tax paid with application for extension of time to file (Form 8868)			
	Backup withholding erroneously withheld			^
	Total credits and payments Add lines 6a through 6d			0.
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8		0	48.
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		0	40.
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
	Enter the amount of line 10 to be Credited to 2010 estimated tax ► Refunded ► 11 art VII-A Statements Regarding Activities			
			Voc	No
14	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a	103	X
.	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?	1b	 	$\frac{x}{x}$
U	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or	1000	ļ	1
	distributed by the foundation in connection with the activities.			
r	Did the foundation file Form 1120-POL for this year?	10	1	X
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year		ļ	
Ī	(1) On the foundation > \$ O . (2) On foundation managers > \$ O .			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			
Ĭ	managers > \$ 0.			
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		· · · · ·	1
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	ĺ	X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		Х
	o If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		Х
	If "Yes," attach the statement required by General Instruction T.			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law	- 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	Х	
	If "Yes," complete Part II, col (c), and Part XV.			
8a	Enter the states to which the foundation reports or with which it is registered (see 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	ļ	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 calendar			
	year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes " complete Part XIV	۱ ۵		l X

10

10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses

	The William and Ann Murphy Family			•	•
Forn	990-PF(2009)' Charitable Foundation	26-608	7128		Page 5
P	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	L	X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application	? .	13	X	
	Website address ► N/A				_
14		lephone no $\triangleright 603-93$			
	Located at ► 126 Hampton Meadows, Hampton, NH	ZIP+4 ▶ 0:	3842	-18	20
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here			· / = ▶	• 🔲
	and enter the amount of tax-exempt interest received or accrued during the year	▶ 15	N	/A	
P	art VII-B Statements Regarding Activities for Which Form 4720 May Be Requi	red	,	1	
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		ļ	Yes	No
1;	a 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?	Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)	.			
	a disqualified person?	X Yes No	-		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes X No	Ì		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available	Yes X No			
	for the benefit or use of a disqualified person)?	L Yes LA_ 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	Yes X No			
	termination of government service, if terminating within 90 days) If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	L 162 TT NO			
1	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)?		1b	Х	1
	Organizations relying on a current notice regarding disaster assistance check here	▶□			
	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not				
	before the first day of the tax year beginning in 2009?	Corrected	10		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating	o foundation	''		
-	defined in section 4942(j)(3) or 4942(j)(5))	3			
:	a At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year	ar(s) beginning			
	before 2009?	Yes X No			

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

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,

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here

3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

Form 4720, to determine if the foundation had excess business holdings in 2009.)

had not been removed from jeopardy before the first day of the tax year beginning in 2009?

Form **990-PF** (2009)

X

N/A

N/A

Yes X No

2b

3b

4a

If "Yes," list the years ▶

during the year?

statement - see instructions)

The William and Ann Murp	hy Family		26 6221	004
Form 990-PF (2009) Charitable Foundation	F 4700 M D F	<u> </u>	<u>26-60871</u>	28 Page
Part VII-B Statements Regarding Activities for Which	Form 4/20 May be i	required (contin	ued)	
5a During the year did the foundation pay or incur any amount to			□	
(1) Carry on propaganda, or otherwise attempt to influence legislation (section			es X No	
(2) Influence the outcome of any specific public election (see section 4955), of	or to carry on, directly or indire			
any voter registration drive?			es X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes		Ye	es X No	
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section			
509(a)(1), (2), or (3), or section 4940(d)(2)?		 -	es X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary	, or educational purposes, or f			
the prevention of cruelty to children or animals?		Ye	es X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify uni-	der the exceptions described i	in Regulations	.	
section 53 4945 or in a current notice regarding disaster assistance (see instru	ictions)?		N/A	5b
Organizations relying on a current notice regarding disaster assistance check t	nere			
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f				
expenditure responsibility for the grant?	N	I/A 🔲 Ye	es 🔲 No	
If "Yes," attach the statement required by Regulations section 53.494	5-5(d).			
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on		İ	
a personal benefit contract?		Ye	es X No	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	personal benefit contract?		L	6b X
If "Yes" to 6b, file Form 8870				
7a At any time during the tax year, was the foundation a party to a prohibited tax s	shelter transaction?	Y(es X No	
b If yes, did the foundation receive any proceeds or have any net income attribut	able to the transaction?		N/A	7b
Part VIII Information About Officers, Directors, Trust	ees, Foundation Ma	nagers, Highly	y	
Faid Employees, and Contractors			<u>.</u>	
1 List all officers, directors, trustees, foundation managers and their	compensation.			
	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans	(e) Expense
(a) Name and address		(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, othe allowances
	(b) Title, and average hours per week devoted	(If not paid,	employee benefit plans and deferred	account, othe
(a) Name and address	(b) Title, and average hours per week devoted to position	(If not paid,	employee benefit plans and deferred	account, othe
(a) Name and address Ann E. Murphy	(b) Title, and average hours per week devoted to position	(If not paid,	employee benefit plans and deferred	account, othe
(a) Name and address Ann E. Murphy 126 Hampton Meadows	(b) Title, and average hours per week devoted to position Trustee	(If not paid, enter -0-)	employee benefit plans and deferred compensation	account, othe allowances
(a) Name and address Ann E. Murphy 126 Hampton Meadows Hampton, NH 03842	(b) Title, and average hours per week devoted to position Trustee 5.00	(If not paid, enter -0-)	employee benefit plans and deferred compensation	account, othe allowances
(a) Name and address Ann E. Murphy 126 Hampton Meadows Hampton, NH 03842 William J. Murphy 126 Hampton Meadows	(b) Title, and average hours per week devoted to position Trustee 5.00	(If not paid, enter -0-)	employee benefit plans and deferred compensation	account, othe allowances
(a) Name and address Ann E. Murphy 126 Hampton Meadows Hampton, NH 03842 William J. Murphy	(b) Title, and average hours per week devoted to position Trustee 5.00 Trustee	(If not paid, enter -0-)	employee benefit plans and deterred compensation	account, othe allowances
(a) Name and address Ann E. Murphy 126 Hampton Meadows Hampton, NH 03842 William J. Murphy 126 Hampton Meadows	(b) Title, and average hours per week devoted to position Trustee 5.00 Trustee	(If not paid, enter -0-)	employee benefit plans and deterred compensation	account, othe allowances
(a) Name and address Ann E. Murphy 126 Hampton Meadows Hampton, NH 03842 William J. Murphy 126 Hampton Meadows	(b) Title, and average hours per week devoted to position Trustee 5.00 Trustee	(If not paid, enter -0-)	employee benefit plans and deterred compensation	account, othe allowances
(a) Name and address Ann E. Murphy 126 Hampton Meadows Hampton, NH 03842 William J. Murphy 126 Hampton Meadows	(b) Title, and average hours per week devoted to position Trustee 5.00 Trustee	(If not paid, enter -0-)	employee benefit plans and deterred compensation	account, othe allowances
(a) Name and address Ann E. Murphy 126 Hampton Meadows Hampton, NH 03842 William J. Murphy 126 Hampton Meadows	(b) Title, and average hours per week devoted to position Trustee 5.00 Trustee	(If not paid, enter -0-)	employee benefit plans and deterred compensation	account, othe allowances
(a) Name and address Ann E. Murphy 126 Hampton Meadows Hampton, NH 03842 William J. Murphy 126 Hampton Meadows	(b) Title, and average hours per week devoted to position Trustee 5.00 Trustee	(If not paid, enter -0-)	employee benefit plans and deterred compensation	account, othe allowances
(a) Name and address Ann E. Murphy 126 Hampton Meadows Hampton, NH 03842 William J. Murphy 126 Hampton Meadows	(b) Title, and average hours per week devoted to position Trustee 5.00 Trustee 5.00	(If not paid, enter -0-)	employee benefit plans and deterred compensation O .	account, othe allowances
(a) Name and address Ann E. Murphy 126 Hampton Meadows Hampton, NH 03842 William J. Murphy 126 Hampton Meadows Hampton, NH 03842 2 Compensation of five highest-paid employees (other than those incompanies)	(b) Title, and average hours per week devoted to position Trustee 5.00 Trustee 5.00 in the continuation of the continuati	(If not paid, enter -0-) O . O .	employee benefit plans and deterred compensation O .	account, othe allowances O O
(a) Name and address Ann E. Murphy 126 Hampton Meadows Hampton, NH 03842 William J. Murphy 126 Hampton Meadows Hampton, NH 03842	(b) Title, and average hours per week devoted to position Trustee 5.00 Trustee 5.00	(If not paid, enter -0-)	employee benefit plans and deterred compensation O . O .	account, othe allowances O
(a) Name and address Ann E. Murphy 126 Hampton Meadows Hampton, NH 03842 William J. Murphy 126 Hampton Meadows Hampton, NH 03842 2 Compensation of five highest-paid employees (other than those incompanies)	(b) Title, and average hours per week devoted to position Trustee 5.00 Trustee 5.00 Cluded on line 1). If none, (b) Title, and average hours per week	(If not paid, enter -0-) O . O .	employee benefit plans and deterred compensation O .	account, othe allowances O O Expense account, othe
(a) Name and address Ann E. Murphy 126 Hampton Meadows Hampton, NH 03842 William J. Murphy 126 Hampton Meadows Hampton, NH 03842 2 Compensation of five highest-paid employees (other than those inc. (a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position Trustee 5.00 Trustee 5.00 Cluded on line 1). If none, (b) Title, and average hours per week	(If not paid, enter -0-) O . O .	employee benefit plans and deterred compensation O . O .	account, othe allowances O O Expense account, othe
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(a) Name and address Ann E. Murphy 126 Hampton Meadows Hampton, NH 03842 William J. Murphy 126 Hampton Meadows Hampton, NH 03842 2 Compensation of five highest-paid employees (other than those inc. (a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position Trustee 5.00 Trustee 5.00 Cluded on line 1). If none, (b) Title, and average hours per week	(If not paid, enter -0-) O . O .	employee benefit plans and deterred compensation O . O .	account, othe allowances O O Expense account, othe
(a) Name and address Ann E. Murphy 126 Hampton Meadows Hampton, NH 03842 William J. Murphy 126 Hampton Meadows Hampton, NH 03842 2 Compensation of five highest-paid employees (other than those inc. (a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position Trustee 5.00 Trustee 5.00 Cluded on line 1). If none, (b) Title, and average hours per week	(If not paid, enter -0-) O . O .	employee benefit plans and deterred compensation O . O .	account, othe allowances O O Expense account, othe

0

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

Page 7

Part VIII Information About Officers, Directors, Trustees, Foundation M Paid Employees, and Contractors (continued)	anagers, Highly	
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		
		<u> </u>
Total number of others receiving over \$50,000 for professional services		<u>▶</u> 0
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 of the foundation of the found	nation such as the	Expenses
number of organizations and other beneficiaries served, conferences convened, research papers produced, etc		
1 N/A		
2		
		
3		
	 	
*		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 ar	d 2	Amount
1 N/A		
· · · · · · · · · · · · · · · · · · ·		
2		
All other program-related investments. See instructions		
3		
Total. Add lines 1 through 3	>	0.
		Form 990-PF (2009)

P	art X Minimum Investment Return (All domestic foundations n	nust complete this part	. Foreign four	ndations, se	e instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable	le, etc , purposes			
а	Average monthly fair market value of securities			1a	407,797. 80,451.
	Average of monthly cash balances			1b	80,451.
C	Fair market value of all other assets			1c	
d	Total (add lines 1a, b, and c)			1d	488,248.
8	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	488,248.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount	, see instructions)		4	7,324.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and or	n Part V, line 4		5	480,924.
6	Minimum investment return Enter 5% of line 5			6	24,046.
P	Distributable Amount (see instructions) (Section 4942(j)(3) are foreign organizations check here and do not complete this part		foundations an	d certain	
1	Minimum investment return from Part X, line 6	·		1	24,046.
	Tax on investment income for 2009 from Part VI, line 5	2a	844.		·
b	Income tax for 2009 (This does not include the tax from Part VI)	2b			
C	Add lines 2a and 2b			2c	844.
3	Distributable amount before adjustments. Subtract line 2c from line 1			3	23,202.
4	Recoveries of amounts treated as qualifying distributions		j	4	0.
5	Add lines 3 and 4			5	23,202.
6	Deduction from distributable amount (see instructions)			6	0.
7_	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part	XIII, line 1		7	23,202.
	art XII Qualifying Distributions (see instructions)				
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., pur	poses			2 251
	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26			1a	2,351.
b	Program-related investments - total from Part IX-B			16	<u> </u>
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitat	ble, etc., purposes		2	
3	Amounts set aside for specific charitable projects that satisfy the			_	
a	Suitability test (prior IRS approval required)			3a	
b	Cash distribution test (attach the required schedule)			3b	2 251
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, an			4	2,351.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net inve	estment		_	^
_	Income Enter 1% of Part I, line 27b			5	2,351.
6	Adjusted qualifying distributions. Subtract line 5 from line 4			6	
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years w 4940(e) reduction of tax in those years	vnen calculating whether t	ne foundation o	qualifies for th	e section

Form **990-PF** (2009)

Form 990-PF (2009)

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				23,202.
2 Undistributed income, if any, as of the end of 2009		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
a Enter amount for 2008 only			0.	
b Total for prior years				
, , , , , , , , , , , , , , , , , , , ,		0.		
3 Excess distributions carryover, if any, to 2009				
a From 2004				
b From 2005				
c From 2006				
d From 2007 1, 117.				
e From 2008 2, 105.				
f Total of lines 3a through e	3,222.			
4 Qualifying distributions for 2009 from				
Part XII, line 4 ► \$ 2,351.				
a Applied to 2008, but not more than line 2a			0.	
b Applied to undistributed income of prior	117/11.			
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus	1	THE CONTROL OF THE PROPERTY OF	· · · · · · · · · · · · · · · · · · ·	
(Election required - see instructions)	0.			
d Applied to 2009 distributable amount				2,351.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount	3,222.			3,222.
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.			
b Prior years' undistributed income Subtract		0		
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b Taxable		<u> </u>		
amount - see instructions		0.		
e Undistributed income for 2008 Subtract line				
4a from line 2a Taxable amount - see instr			0.	
f Undistributed income for 2009 Subtract		······	***************************************	
lines 4d and 5 from line 1. This amount must				
be distributed in 2010				17,629.
7 Amounts treated as distributions out of	, 11 (A	·		
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2004		·····		
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2010.		······		
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9				
a Excess from 2005				
b Excess from 2006				
c Excess from 2007				
d Excess from 2008				
e Excess from 2009				
	· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·	5 000 DE (0000)

. The Will	iam and An	n Murphy Fa	milv		
	ole Foundat		штту	26	5-6087128 Page 10
Part XIV Private Operating Fo			A. auestion 9)	N/A	7-0007120 Tage 10
1 a If the foundation has received a ruling or	•		7,, 4000,	217 22	
foundation, and the ruling is effective for		· · · · · · · · · · · · · · · ·	•		
b Check box to indicate whether the founda			n section	4942(J)(3) or	4942(J)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total
investment return from Part X for					
each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of				,	
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities					
Subtract line 2d from line 2c 3 Complete 3a, b, or c for the					
3 Complete 3a, b, or c for the alternative test relied upon					
a "Assets" alternative test - enter					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public	*				
and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from			·····		
an exempt organization					
(4) Gross investment income					
Part XV Supplementary Infor	mation (Comple	te this part only i	f the founda	tion had \$5,000	or more in assets
at any time during th	e year-see the i	nstructions.)			
1 Information Regarding Foundation	Managers:				
a List any managers of the foundation who year (but only if they have contributed mo			ibutions received	by the foundation before	the close of any tax
None					
b List any managers of the foundation who other entity) of which the foundation has			or an equally large	portion of the ownershi	p of a partnership or
None	-				

Z	Information Regarding Contribution,	Grant, Gift, Lo	oan, Scholarship, etc	., Programs:
	. —			

Check here 🕨 🗓 if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

- a The name, address, and telephone number of the person to whom applications should be addressed
- b The form in which applications should be submitted and information and materials they should include
- c Any submission deadlines
- d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

Page 11

Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Purpose of grant or contribution Foundation show any relationship to Amount status of any foundation manager Name and address (home or business) recipient or substantial contributor a Paid during the year El Salvador Jesuits none approved unrestricted 80. Boston College 501(c)(3) gift 140 Commonwealth Avenue Chestnut Hill, MA 02467 Boston College approved unrestricted 500. none Scholarship Golf Fund 501(c)(3) gift 140 Commonwealth Avenue Chestnut Hill, MA 02467 none Boston College approved unrestricted 1,771. 501(c)(3) gift 140 Commonwealth Avenue Chestnut Hill, MA 02467 2,351. ▶ 3a Total b Approved for future payment None 0. Total **▶** 3b

nter gross amounts unless otherwise indicated	Unrelated b	usiness income		ded by section 512, 513, or 514	(e)
Program service revenue	(a) Business code	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income
a	1,11				
b					
c					
d					
е					
1					
g Fees and contracts from government agencies					
Membership dues and assessments					
Interest on savings and temporary cash		- 			
investments					8,27 9,52
Dividends and interest from securities					9,52
Net rental income or (loss) from real estate					
a Debt-financed property					
b Not debt-financed property					
Net rental income or (loss) from personal					
property					
Other investment income					
Gain or (loss) from sales of assets other					
than inventory					26,12
Net income or (loss) from special events					
Gross profit or (loss) from sales of inventory					
Other revenue					
a					
b					
c				······································	
d					
e			ļ		42 01
Subtotal Add columns (b), (d), and (e)		0.	•	0.	43,91
Total. Add line 12, columns (b), (d), and (e)				13	43,91
ee worksheet in line 13 instructions to verify calculation		plishment of E	xemp	t Purposes	· · · · · · · · · · · · · · · · · · ·
	es to the Accom		-	<u> </u>	
Part XVI-B Relationship of Activitine No. Explain below how each activity for which	ı ıncome is reported in c		A contrib	uted importantly to the accor	nplishment of
Part XVI-B Relationship of Activiti ine No. Explain below how each activity for which the foundation's exempt purposes (other	income is reported in c than by providing funds	for such purposes)		,	•
Part XVI-B Relationship of Activitine No. Explain below how each activity for which	income is reported in c than by providing funds	for such purposes)		,	•
Part XVI-B Relationship of Activiti ine No. Explain below how each activity for which the foundation's exempt purposes (other	income is reported in c than by providing funds	for such purposes)		,	•
Part XVI-B Relationship of Activiti ine No. Explain below how each activity for which the foundation's exempt purposes (other	income is reported in c than by providing funds	for such purposes)		,	•
rart XVI-B Relationship of Activiti Relationship of Activiti Explain below how each activity for which the foundation's exempt purposes (other	income is reported in c than by providing funds	for such purposes)		,	•
Relationship of Activiti ine No. Explain below how each activity for which the foundation's exempt purposes (other	income is reported in c than by providing funds	for such purposes)		,	•
ne No. Explain below how each activity for which the foundation's exempt purposes (other	income is reported in c than by providing funds	for such purposes)		,	•
Relationship of Activiti ine No. Explain below how each activity for which the foundation's exempt purposes (other	income is reported in c than by providing funds	for such purposes)		,	•
Relationship of Activiti ine No. Explain below how each activity for which the foundation's exempt purposes (other	income is reported in c than by providing funds	for such purposes)		,	•
Relationship of Activiti ine No. Explain below how each activity for which the foundation's exempt purposes (other	income is reported in c than by providing funds	for such purposes)		,	•
rart XVI-B Relationship of Activiti Relationship of Activiti Explain below how each activity for which the foundation's exempt purposes (other	income is reported in c than by providing funds	for such purposes)		,	•
Part XVI-B Relationship of Activiti ine No. Explain below how each activity for which the foundation's exempt purposes (other	income is reported in c than by providing funds	for such purposes)		,	•
Part XVI-B Relationship of Activiti ine No. Explain below how each activity for which the foundation's exempt purposes (other	income is reported in c than by providing funds	for such purposes)		,	•
Part XVI-B Relationship of Activiti ine No. Explain below how each activity for which the foundation's exempt purposes (other	income is reported in c than by providing funds	for such purposes)		,	•

101111 000 11 (2000)	Form 990-PF (2009)	Charitable	Foundation
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26-6087128

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	art X		egarding Transfers To		nd Relationships With Nonc	haritable	Pag	ge 13			
	***	Exempt Organ	-	and transactions at	id Helationships with Hone	i lai i labie					
1	Did ti		rectly engage in any of the follow	wing with any other organization	described in section 501(c) of	Y	es	No			
-											
а		the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? Transfers from the reporting foundation to a noncharitable exempt organization of									
	(1) (1a(1)	1	X						
		Other assets				1a(2)		X			
b		transactions									
	(1) 9	Sales of assets to a noncharita	ble exempt organization			16(1)		X			
	(2) F	Purchases of assets from a no	ncharitable exempt organization			1b(2)		X			
	(3) F	Rental of facilities, equipment,	or other assets			1b(3)		X			
	(4) F	Reimbursement arrangements		1b(4)		X					
		oans or loan guarantees		1b(5)		X					
	(6) F	Performance of services or me	mbership or fundraising solicita	itions		1b(6)		X			
C	Sharı	ng of facilities, equipment, ma	iling lists, other assets, or paid o	employees		10		X			
d	If the	answer to any of the above is	"Yes," complete the following so	chedule Column (b) should alwa	ays show the fair market value of the good	ds, other asset	S,				
	or se	rvices given by the reporting f	oundation. If the foundation rece	eived less than fair market value	in any transaction or sharing arrangemen	nt, show in					
	colun	nn (d) the value of the goods,	other assets, or services receive			=					
(a)	⊔ne no	(b) Amount involved		ble exempt organization	(d) Description of transfers, transactions,	and sharing arran	gemer	nts			
			N/A	<u> </u>							
				· <u> </u>							
											
						_					
				<u></u>				—			
		<u> </u>									
					· · · · · · · · · · · · · · · · · · ·						
28			tly affiliated with, or related to, o		ations described		ГУ] No			
		s," complete the following sch	r than section 501(c)(3)) or in s	ection 527?		Yes	L	1 1/10			
U	<u> </u>	s, complete the following sch (a) Name of org		(b) Type of organization	(c) Description of relati	onshin		—			
		N/A	Julia de la companya	(b) Typo of organization	(c) Boosington of Total						
		217,22				· · · -					
_											
											
			//	-							
\neg	Underp	penalties of perjuty, Ndeclare that I h	nave examined this return, including a	companying schedules and stateme	ents, and to the best of my knowledge and belief,	it is true, correct,					
	and complete Declaration of pregaret (other than tax payer or aductary) is based on all information of which preparer has any knowledge										
	Villeam / Thursley 5/10/10 / Pustee										
ere	Signature of officer or trustee / Date Title										
Ĭ		Preparer's Date Check if Self-									
Sign Here	Paid Preparer's Use Only										
]	Par O	Tillis hame (or yours 2005	el Lipshytz &	Wilchins LLP	employed ► L						
	Preg. g Se as	if self-employed), 20 W	illiam Street	Suite 130		· · · · ·					
]		address, and ZIP code Well	esley Hills, M	IA 02481-3803	Phone no 781	L-237-4	400	0			

Form 990-PF Interest on Sav	ings a	nd Tem	porary Ca	sh Ir	nvestments	Statement	1
Source						Amount	
UBS Interest						8,2	
Total to Form 990-PF, Part I	, line	3, Co.	lumn A			8,2	73.
Form 990-PF Dividen	ds and	Inter	est from	Secui	rities	Statement	2
Source		Gross	Amount		ital Gains ividends	Column (A Amount)
UBS			9,523.		0.	9,5	23.
Total to Fm 990-PF, Part I,	ln 4		9,523.		0.	9,5	23.
Form 990-PF	,	Legal	Fees			Statement	3
Description	Expe	a) nses Books	(b) Net Inve ment Inc		(c) Adjusted Net Incom		
legal and accounting		1,707.	1,	707.			0.
To Fm 990-PF, Pg 1, ln 16a		1,707.	1,	707.			0.
Form 990-PF	Co	rporat	e Stock			Statement	4
					ok Value	Fair Marke Value	t
Description				Вос	JK Value	value	
Description UBS common stock				Boo	392,226.	340,0	36.

Form 990-PF Corporate Bond	ls	Statement 5
Description	Book Value	Fair Market Value
UBS corporate bonds	188,616.	196,997.
Total to Form 990-PF, Part II, line 10c	188,616.	196,997.

Form 990-PF UNDERPAYMENT OF ESTIMATED TAX WORKSHEET

_{lame(s)} The William	and Ann Murr Foundation	phy Family		Identifying Nu	
Charitable (A)	Foundation (B)	(C) Adjusted	(D) Number Days	(E) Daily	(F)
*Date	Amount	Balance Due	Balance Due	Penalty Rate	Penalty
		0-			<u></u>
05/15/09	30.	30.	31	.000109589	
06/15/09	31.	61.	92	.000109589	
09/15/09	30.	91.	91	.000109589	
12/15/09	30.	121.	151	.000109589	
		-			
					
-					_
					_
			, , ,	-	· · · · · · · · · · · · · · · · · · ·
		 			
					
					
nalty Due (Sum of Colum				1	

Date of estimated tax payment, withholding credit date or installment due date