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Short Form  
Return of Organization Exempt From Income Tax

2009

Open to Public  
InspectionDepartment of the Treasury  
Internal Revenue Service

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

► Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 at the end of the year may use this form

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

A For the 2009 calendar year, or tax year beginning , 2009, and ending

B Check if applicable Address change Name change Initial return Termination Amended return Application pending	C Name of organization CLYDE E BUCKLEY WILDLIFE SANCTUARY TRUST COMMUNITY TRUST & INVESTMENT CO. TRUSTEE Number and street (or P O box, if mail is not delivered to street address) 100 EAST VINE STREET, 5TH FLOOR City or town, state or country, and ZIP + 4 LEXINGTON, KY 40507	D Employer identification number 61-6042014
	Room/suite	E Telephone number (606) 389-5300
		F Group Exemption Number ►

- Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

G Accounting method:  Cash  Accrual  
Other (specify) ►

I Website: ►

J Tax-exempt status (check only one) -  501(c) ( 3 ) ◀ (insert no) 4947(a)(1) or 527

K Check ► if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A Form 990-EZ or Form 990 return is not required, but if the organization chooses to file a return, be sure to file a complete return

L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts, if \$500,000 or more, file Form 990 instead of Form 990-EZ . . ► \$ 493,438.

## Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I.)

Revenue	1 Contributions, gifts, grants, and similar amounts received . . . . .	1
	2 Program service revenue including government fees and contracts . . . . .	2
	3 Membership dues and assessments . . . . .	3
	4 Investment income . . . . .	4
	5 a Gross amount from sale of assets other than inventory . . . . .	5a 460,832.
	b Less: cost or other basis and sales expenses . . . . .	5b 497,987.
	c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) . . . . .	5c -37,155.
	6 Special events and activities (complete applicable parts of Schedule G) If any amount is from gaming check here . . ►	
	a Gross revenue (not including \$ _____ of contributions reported on line 1) . . . . .	6a
	b Less: direct expenses other than fundraising expenses . . . . .	6b
	c Net income or (loss) from special events and activities (Subtract line 6b from line 6a) . . . . .	6c
	7 a Gross sales of inventory, less returns and allowances . . . . .	7a
	b Less: cost of goods sold . . . . .	7b
	c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) . . . . .	7c
	8 Other revenue (describe ►) . . . . .	8 1,970.
	9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8 . . . . .	9 -4,549.
Expenses	10 Grants and similar amounts paid (attach schedule) . . . . .	10 67,493.
	11 Benefits paid to or for members . . . . .	11
	12 Salaries, other compensation, and employee benefits . . . . .	12 9,706.
	13 Professional fees and other payments to independent contractors . . . . .	13 1,350.
	14 Occupancy, rent, utilities, and maintenance . . . . .	14
	15 Printing, publications, postage, and shipping . . . . .	15
	16 Other expenses (describe ►) . . . . .	16 6,953.
	17 Total expenses. Add lines 10 through 16 . . . . .	17 85,502.
Net Assets	18 Excess or (deficit) for the year (Subtract line 17 from line 9) . . . . .	18 -90,051.
	19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return) . . . . .	19 1,008,655.
	20 Other changes in net assets or fund balances (attach explanation) . . . . .	20 2,491.
	21 Net assets or fund balances at end of year Combine lines 18 through 20 . . . . .	21 921,095.

## Part II Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ

(See the instructions for Part II)	(A) Beginning of year	(B) End of year
22 Cash, savings, and investments . . . . .	951,510.	866,111.
23 Land and buildings . . . . .	57,145.	54,984.
24 Other assets (describe ►) . . . . .	24	
25 Total assets . . . . .	1,008,655.	921,095.
26 Total liabilities (describe ►) . . . . .	26	
27 Net assets or fund balances (line 27 of column (B) must agree with line 21) . . . . .	27 1,008,655.	921,095.



**Part V Other Information (Note the statement requirements in the instructions for Part V.)**

	Yes	No
33 Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity . . . . .	33	X
34 Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes . . . . .	34	X
35 If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T . . . . .	35a	X
a Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy tax requirements? . . . . .	35b	
b If "Yes," has it filed a tax return on Form 990-T for this year? . . . . .	36	X
36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N . . . . .	37a	
a Enter amount of political expenditures, direct or indirect, as described in the instructions ► 37a	37b	X
b Did the organization file Form 1120-POL for this year? . . . . .	38a	
38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return? . . . . .	38b	X
b If "Yes," complete Schedule L, Part II and enter the total amount involved . . . . .	39a	
39 Section 501(c)(7) organizations. Enter:	39b	
a Initiation fees and capital contributions included on line 9 . . . . .		
b Gross receipts, included on line 9, for public use of club facilities . . . . .		
40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ► _____ ; section 4912 ► _____ ; section 4955 ► _____		
b Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or is it aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I . . . . .	40b	X
c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 . . . . .		
d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization . . . . .		
e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T . . . . .	40e	X
41 List the states with which a copy of this return is filed. ► STMT 11		
42a The organization's books are in care of ► STMT 12 Telephone no. ► Located at ► STMT 12 ZIP + 4		
b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? . . . . .	42b	X
If "Yes," enter the name of the foreign country: ► See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
c At any time during the calendar year, did the organization maintain an office outside of the U.S.? . . . . .	42c	X
If "Yes," enter the name of the foreign country: ►		
43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here ► <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year ► 43		
44 Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ . . . . .	44	X
45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ . . . . .	45	X

**Part VI Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only.** All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 46-49b and complete the tables for lines 50 and 51.

- |   | Yes | No |
|---|-----|----|
| 46 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I . . . . .   | 46  | X  |
| 47 Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II . . . . .   | 47  | X  |
| 48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E . . . . .   | 48  | X  |
| 49a Did the organization make any transfers to an exempt non-charitable related organization? . . . . .   | 49a | X  |
| b If "Yes," was the related organization a section 527 organization? . . . . .  | 49b |    |
| 50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None" |     |    |

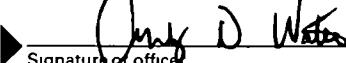
(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
NONE				
-----				
-----				
-----				
-----				
-----				

f Total number of other employees paid over \$100,000 . . . . . ► NONE

- 51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation
NONE		
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-----		
-----		
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d Total number of other independent contractors receiving over \$100,000 . . . . . ► NONE

Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge		
	► 	Date	5/6/10
	Signature or officer		
	► <u>ANDY D. WATERS, SVP</u>	Type or print name and title	
Paid Preparer's Use Only	Preparer's signature ► 	Date	Check if self-employed ► <input type="checkbox"/> P00541305
		27/2010	EIN ► 75-1297386
	Firm's name (or yours if self-employed), address, and ZIP + 4 ► THOMSON REUTERS (TAX & ACCOUNTING)		Phone no ► 804-727-3152
	9711 FARRAR COURT, STE 110,		

May the IRS discuss this return with the preparer shown above? See instructions . . . . . ►  Yes  No

RICHMOND, VA 23236

Form 990-EZ (2009)

**SCHEDULE A**  
(Form 990 or 990-EZ)

Department of the Treasury  
Internal Revenue Service

**Public Charity Status and Public Support**

OMB No 1545-0047

**2009**

Open to Public  
Inspection

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

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

Name of the organization

CLYDE E BUCKLEY WILDLIFE SANCTUARY TRUST

Employer identification number

61-6042014

**Part I Reason for Public Charity Status** (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box)

- 1  A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).  
 2  A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.)  
 3  A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).  
 4  A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: \_\_\_\_\_  
 5  An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)  
 6  A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).  
 7  An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)  
 8  A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)  
 9  An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)  
 10  An organization organized and operated exclusively to test for public safety. See section 509(a)(4).  
 11  An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h.  
 a  Type I      b  Type II      c  Type III - Functionally integrated      d  Type III - Other  
 e  By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).  
 f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box. . . . .   
 g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?  
 (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? . . . . .   
 (ii) A family member of a person described in (i) above? . . . . .   
 (iii) A 35% controlled entity of a person described in (i) or (ii) above? . . . . .   
 h Provide the following information about the supported organization(s).

	Yes	No
11g(i)		X
11g(ii)		X
11g(iii)		X

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document?	(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U.S?	(vii) Amount of support
				Yes	No		
SEE STATEMENT 13							
<b>Total</b>							

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

Schedule A (Form 990 or 990-EZ) 2009

**Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**  
 (Complete only if you checked the box on line 5, 7, or 8 of Part I.) N/A
**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") . . . . .						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . . . .						
3 The value of services or facilities furnished by a governmental unit to the organization without charge . . . . .						
4 <b>Total.</b> Add lines 1 through 3 . . . . .						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f). . . . .						
<b>6 Public support</b> Subtract line 5 from line 4						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4 . . . . .						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources . . . . .						
9 Net income from unrelated business activities, whether or not the business is regularly carried on . . . . .						
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.) . . . . .						
<b>11 Total support.</b> Add lines 7 through 10 . . . . .						
12 Gross receipts from related activities, etc (see instructions) . . . . .					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> . . . . . ► <input type="checkbox"/>						

**Section C. Computation of Public Support Percentage**

14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f)) . . . . .	14	%
15 Public support percentage from 2008 Schedule A, Part II, line 14 . . . . .	15	%
16a <b>33 1/3% support test - 2009.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here</b> . The organization qualifies as a publicly supported organization . . . . . ► <input type="checkbox"/>		
b <b>33 1/3% support test - 2008.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and <b>stop here</b> . The organization qualifies as a publicly supported organization . . . . . ► <input type="checkbox"/>		
17a <b>10%-facts-and-circumstances test - 2009.</b> If the organization did not check a box on line 13, 16a or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and <b>stop here</b> . Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . . ► <input type="checkbox"/>		
b <b>10%-facts-and-circumstances test - 2008.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and <b>stop here</b> . Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . . ► <input type="checkbox"/>		
18 <b>Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions . . . . . ► <input type="checkbox"/>		

**Part III Support Schedule for Organizations Described in Section 509(a)(2)**

(Complete only if you checked the box on line 9 of Part I.)

N/A

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") . . . . .						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose . . . . .						
3 Gross receipts from activities that are not an unrelated trade or business under section 513 .						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . . . .						
5 The value of services or facilities furnished by a governmental unit to the organization without charge . . . . .						
6 <b>Total.</b> Add lines 1 through 5 . . . . .						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons . . . . .						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year . . . . .						
c Add lines 7a and 7b. . . . .						
8 <b>Public support</b> (Subtract line 7c from line 6) . . . . .						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6. . . . .						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources . . . . .						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 . . . . .						
c Add lines 10a and 10b . . . . .						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on . . . . .						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV) . . . . .						
13 <b>Total support.</b> (Add lines 9, 10c, 11, and 12.) . . . . .						
14 <b>First five years</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here . . . . . ► <input type="checkbox"/>						

**Section C. Computation of Public Support Percentage**

15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f)) . . . . .	15	%
16 Public support percentage from 2008 Schedule A, Part III, line 15 . . . . .	16	%

**Section D. Computation of Investment Income Percentage**

17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f)) . . . . .	17	%
18 Investment income percentage from 2008 Schedule A, Part III, line 17 . . . . .	18	%
19a <b>33 1/3% support tests - 2009.</b> If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
b <b>33 1/3% support tests - 2008.</b> If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
20 <b>Private foundation.</b> If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ► <input type="checkbox"/>		

**Part IV** **Supplemental Information.** Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. See instructions.

## Capital Gains and Losses

Department of the Treasury  
Internal Revenue Service

► Attach to Form 1041, Form 5227, or Form 990-T. See the instructions for Schedule D (Form 1041) (also for Form 5227 or Form 990-T, if applicable).

2009

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**Name of estate or trust**

**Employer identification number**

61-6042014

CLYDE E BUCKLEY WILDLIFE SANCTUARY TRUST

**Note: Form 5227 filers need to complete only Parts I and II.**

**Part I Short-Term Capital Gains and Losses - Assets Held One Year or Less**

(a) Description of property (Example 100 shares 7% preferred of "Z" Co )	(b) Date acquired (mo , day, yr )	(c) Date sold (mo , day, yr )	(d) Sales price	(e) Cost or other basis (see page 4 of the instructions)	(f) Gain or (loss) for the entire year Subtract (e) from (d)
1a SHORT-TERM CAPITAL GAIN DIVIDENDS		STMT 1			13.

b Enter the short-term gain or (loss), if any, from Schedule D-1, line 1b . . . . .	1b	-12,848.
2 Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824 . . . . .	2	
3 Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts . . . . .	3	
4 Short-term capital loss carryover. Enter the amount, if any, from line 9 of the 2008 Capital Loss Carryover Worksheet . . . . .	4	( )
5 Net short-term gain or (loss). Combine lines 1a through 4 in column (f). Enter here and on line 13, column (3) on the back . . . . . ►	5	-12,835.

**Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year**

(a) Description of property (Example 100 shares 7% preferred of "Z" Co )	(b) Date acquired (mo , day, yr )	(c) Date sold (mo , day, yr )	(d) Sales price	(e) Cost or other basis (see page 4 of the instructions)	(f) Gain or (loss) for the entire year Subtract (e) from (d)
6a					

b Enter the long-term gain or (loss), if any, from Schedule D-1, line 6b . . . . .	6b	-24,320.
7 Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824 . . . . .	7	
8 Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts . . . . .	8	
9 Capital gain distributions . . . . .	9	
10 Gain from Form 4797, Part I . . . . .	10	
11 Long-term capital loss carryover. Enter the amount, if any, from line 14 of the 2008 Capital Loss Carryover Worksheet . . . . .	11	( )
12 Net long-term gain or (loss). Combine lines 6a through 11 in column (f). Enter here and on line 14a, column (3) on the back	12	-24,320

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For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

Schedule D (Form 1041) 2009

<b>Part III Summary of Parts I and II</b>		<b>(1) Beneficiaries' (see page 5)</b>	<b>(2) Estate's or trust's</b>	<b>(3) Total</b>
<b>Caution: Read the instructions before completing this part.</b>				
13 Net short-term gain or (loss) . . . . .	13			-12,835.
14 Net long-term gain or (loss):				
a Total for year . . . . .	14a			-24,320.
b Unrecaptured section 1250 gain (see line 18 of the wrksht.) . . . . .	14b			
c 28% rate gain . . . . .	14c			
15 Total net gain or (loss). Combine lines 13 and 14a ►	15			-37,155.

**Note:** If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4 (or Form 990-T, Part I, line 4a). If lines 14a and 15, column (2), are net gains, go to Part V, and do not complete Part IV. If line 15, column (3), is a net loss, complete Part IV and the **Capital Loss Carryover Worksheet**, as necessary.

<b>Part IV Capital Loss Limitation</b>	
16 Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, Part I, line 4c, if a trust), the smaller of:	
a The loss on line 15, column (3) or b \$3,000 . . . . .	

**Note:** If the loss on line 15, column (3), is more than \$3,000, or if Form 1041, page 1, line 22 (or Form 990-T, line 34), is a loss, complete the **Capital Loss Carryover Worksheet** on page 7 of the instructions to figure your capital loss carryover.

#### **Part V Tax Computation Using Maximum Capital Gains Rates**

**Form 1041 filers.** Complete this part only if both lines 14a and 15 in column (2) are gains, or an amount is entered in Part I or Part II and there is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is more than zero.

**Caution:** Skip this part and complete the worksheet on page 8 of the instructions if:

- Either line 14b, col. (2) or line 14c, col. (2) is more than zero, or
- Both Form 1041, line 2b(1), and Form 4952, line 4g are more than zero.

**Form 990-T trusts.** Complete this part only if both lines 14a and 15 are gains, or qualified dividends are included in income in Part I of Form 990-T, and Form 990-T, line 34, is more than zero. Skip this part and complete the worksheet on page 8 of the instructions if either line 14b, col. (2) or line 14c, col. (2) is more than zero.

17 Enter taxable income from Form 1041, line 22 (or Form 990-T, line 34) . . . . .	17		
18 Enter the smaller of line 14a or 15 in column (2) but not less than zero . . . . .	18		
19 Enter the estate's or trust's qualified dividends from Form 1041, line 2b(2) (or enter the qualified dividends included in income in Part I of Form 990-T) . . . . .	19		
20 Add lines 18 and 19 . . . . .	20		
21 If the estate or trust is filing Form 4952, enter the amount from line 4g; otherwise, enter -0- ►	21		
22 Subtract line 21 from line 20. If zero or less, enter -0- . . . . .	22		
23 Subtract line 22 from line 17. If zero or less, enter -0- . . . . .	23		
24 Enter the smaller of the amount on line 17 or \$2,300 . . . . .	24		
25 Is the amount on line 23 equal to or more than the amount on line 24?			
<input type="checkbox"/> Yes. Skip lines 25 and 26; go to line 27 and check the "No" box	25		
<input type="checkbox"/> No. Enter the amount from line 23 . . . . .	26		
26 Subtract line 25 from line 24 . . . . .	26		
27 Are the amounts on lines 22 and 26 the same?	27		
<input type="checkbox"/> Yes. Skip lines 27 thru 30, go to line 31	27		
<input type="checkbox"/> No. Enter the smaller of line 17 or line 22 . . . . .	28		
28 Enter the amount from line 26 (If line 26 is blank, enter -0-) . . . . .	28		
29 Subtract line 28 from line 27 . . . . .	29		
30 Multiply line 29 by 15% (.15) . . . . .	30		
31 Figure the tax on the amount on line 23. Use the 2009 Tax Rate Schedule for Estates and Trusts (see the Schedule G instructions in the instructions for Form 1041) . . . . .	31		
32 Add lines 30 and 31 . . . . .	32		
33 Figure the tax on the amount on line 17. Use the 2009 Tax Rate Schedule for Estates and Trusts (see the Schedule G instructions in the instructions for Form 1041) . . . . .	33		
34 Tax on all taxable income. Enter the smaller of line 32 or line 33 here and on Form 1041, Schedule G, line 1a (or Form 990-T, line 36) . . . . .	34		

**SCHEDULE D-1**  
(Form 1041)

Department of the Treasury  
Internal Revenue Service

**Continuation Sheet for Schedule D  
(Form 1041)**

OMB No 1545-0092

**2009**

► See instructions for Schedule D (Form 1041).

► Attach to Schedule D to list additional transactions for lines 1a and 6a.

Name of estate or trust

CLYDE E BUCKLEY WILDLIFE SANCTUARY TRUST

Employer identification number

61-6042014

**Part I Short-Term Capital Gains and Losses - Assets Held One Year or Less**

(a) Description of property (Example 100 sh 7% preferred of "Z" Co.)	(b) Date acquired (mo, day, yr)	(c) Date sold (mo, day, yr)	(d) Sales price (see page 4 of the instructions)	(e) Cost or other basis (see page 4 of the instructions)	(f) Gain or (loss) Subtract (e) from (d)
1a 525. BANK AMER CORP	12/19/2008	03/11/2009	2,620.00	7,387.00	-4,767.00
50. GENERAL ELECTRIC CORP	06/24/2008	03/12/2009	475.00	1,379.00	-904.00
500. PFIZER INC	12/19/2008	03/13/2009	7,120.00	8,700.00	-1,580.00
1807.91 GOLDMAN SACHS INT REAL EST-I	06/26/2008	03/27/2009	8,045.00	16,000.00	-7,955.00
400. GREAT PLAINS ENERGY INC	08/26/2008	03/27/2009	5,461.00	10,222.00	-4,761.00
1.518 T ROWE PRICE GROWTH STOCK FUND #40	12/12/2008	03/27/2009	30.00	28.00	2.00
50. GARMIN LTD ORD	04/01/2009	05/07/2009	1,077.00	1,112.00	-35.00
263.574 VANGUARD WINDSOR II FD #73	12/22/2008	05/11/2009	5,079.00	4,958.00	121.00
1730.047 VANGUARD WINDSOR II FD #73	12/22/2008	05/19/2009	33,252.00	32,542.00	710.00
490.15 FHLMC GD PL #G11714 5.000% 6/01/20	05/08/2009	06/15/2009	490.00	510.00	-20.00
400. EBAY INC	04/06/2009	06/24/2009	6,672.00	5,578.00	1,094.00
655.81 FNMA SER 58 CMO 3.500% 4/25/33	05/15/2009	06/25/2009	656.00	661.00	-5.00
166.85 FNMA PL #MA0071 4.500% 5/01/19	05/07/2009	06/25/2009	167.00	173.00	-6.00
98.232 VANGUARD BOND INDEX FUND #84	05/19/2009	06/30/2009	999.00	997.00	2.00
537.48 FHLMC GD PL #G11714 5.000% 6/01/20	05/08/2009	07/15/2009	537.00	559.00	-22.00
755.46 FNMA SER 58 CMO 3.500% 4/25/33	05/15/2009	07/25/2009	755.00	762.00	-7.00
274.8 FNMA PL #MA0071 4.500% 5/01/19	05/07/2009	07/25/2009	275.00	285.00	-10.00
477.34 FHLMC GD PL #G11714 5.000% 6/01/20	05/08/2009	08/15/2009	477.00	496.00	-19.00
698.85 FNMA SER 58 CMO 3.500% 4/25/33	05/15/2009	08/25/2009	699.00	705.00	-6.00
206.11 FNMA PL #MA0071 4.500% 5/01/19	05/07/2009	08/25/2009	206.00	214.00	-8.00
376.66 FHLMC GD PL #G11714 5.000% 6/01/20	05/08/2009	09/15/2009	377.00	392.00	-15.00
50. NOKIA CORP SPNSD ADR	12/19/2008	09/18/2009	781.00	813.00	-32.00
75. SEALED AIR CORP NEW	12/19/2008	09/18/2009	1,534.00	1,117.00	417.00
75. UNITED TECHNOLOGIES CORP	03/27/2009	09/18/2009	4,690.00	3,524.00	1,166.00

**1b Total.** Combine the amounts in column (f). Enter here and on Schedule D, line 1b . . . . .

For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

Schedule D-1 (Form 1041) 2009

- See instructions for Schedule D (Form 1041).
- Attach to Schedule D to list additional transactions for lines 1a and 6a.

**Name of estate or trust**

CLYDE E BUCKLEY WILDLIFE SANCTUARY TRUST

**Employer identification number**  
61-6042014

**Part I Short-Term Capital Gains and Losses - Assets Held One Year or Less**

**1b Total.** Combine the amounts in column (f). Enter here and on Schedule D, line 1b . . . . . -12,848.00

**For Paperwork Reduction Act Notice, see the Instructions for Form 1041.**

Schedule D-1 (Form 1041) 2009

Name of estate or trust as shown on Form 1041 Do not enter name and employer identification number if shown on the other side

Employer identification number

61-6042014

CLYDE E BUCKLEY WILDLIFE SANCTUARY TRUST

**Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year**

(a) Description of property (Example 100 sh 7% preferred of "Z" Co)	(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)	(d) Sales price (see page 4 of the instructions)	(e) Cost or other basis (see page 4 of the instructions)	(f) Gain or (loss) Subtract (e) from (d)
6a 428.79 FHLMC GD PL #E95374 5.000% 3/01/18	10/14/2003	01/15/2009	429.00	436.00	-7.00
2.01 GNMA PL #392344 7.500% 7/15/24	10/04/1996	01/15/2009	2.00	2.00	
64.71 GNMA PL #416515 6.000% 3/15/14	03/08/1999	01/15/2009	65.00	64.00	1.00
61.37 GNMA PL #421309 7.000% 4/15/11	10/04/1996	01/15/2009	61.00	62.00	-1.00
5.79 GNMA PL #506969 7.000% 6/15/29	08/04/1999	01/15/2009	6.00	6.00	
445.07 FHLMC GD PL #E95374 5.000% 3/01/18	10/14/2003	02/15/2009	445.00	452.00	-7.00
2.02 GNMA PL #392344 7.500% 7/15/24	10/04/1996	02/15/2009	2.00	2.00	
362.55 GNMA PL #416515 6.000% 3/15/14	03/08/1999	02/15/2009	363.00	361.00	2.00
61.76 GNMA PL #421309 7.000% 4/15/11	10/04/1996	02/15/2009	62.00	62.00	
5.8 GNMA PL #506969 7.000% 6/15/29	08/04/1999	02/15/2009	6.00	6.00	
25000. FHLMC MTN 5.250% 2/24/11	03/22/2006	02/24/2009	25,000.00	24,933.00	67.00
400. GENERAL ELECTRIC CORP	03/02/2007	03/12/2009	3,803.00	12,591.00	-8,788.00
533.51 FHLMC GD PL #E95374 5.000% 3/01/18	10/14/2003	03/15/2009	534.00	542.00	-8.00
2.03 GNMA PL #392344 7.500% 7/15/24	10/04/1996	03/15/2009	2.00	2.00	
289.48 GNMA PL #416515 6.000% 3/15/14	03/08/1999	03/15/2009	289.00	288.00	1.00
436.13 GNMA PL #421309 7.000% 4/15/11	10/04/1996	03/15/2009	436.00	437.00	-1.00
5.89 GNMA PL #506969 7.000% 6/15/29	08/04/1999	03/15/2009	6.00	6.00	
400. DOW CHEM COMPANY	07/27/2006	03/27/2009	3,573.00	14,699.00	-11,126.00
403.173 T ROWE PRICE GROWTH STOCK FUND #40	01/27/2004	03/27/2009	7,850.00	10,063.00	-2,213.00
100000. FHLB 5.885% 3/30/09	06/06/2001	03/30/2009	100,000.00	100,270.00	-270.00
75. VIACOM INC-B W/I	07/13/2004	04/01/2009	1,353.00	3,381.00	-2,028.00
540.83 FHLMC GD PL #E95374 5.000% 3/01/18	10/14/2003	04/15/2009	541.00	549.00	-8.00
2.05 GNMA PL #392344 7.500% 7/15/24	10/04/1996	04/15/2009	2.00	2.00	
47.1 GNMA PL #416515 6.000% 3/15/14	03/08/1999	04/15/2009	47.00	47.00	
45.69 GNMA PL #421309 7.000% 4/15/11	10/04/1996	04/15/2009	46.00	46.00	

6b Total. Combine the amounts in column (f). Enter here and on Schedule D, line 6b . . . . .

Name of estate or trust as shown on Form 1041. Do not enter name and employer identification number if shown on the other side

CLYDE E BUCKLEY WILDLIFE SANCTUARY TRUST

Employer identification number

61-6042014

**Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year**

(a) Description of property (Example 100 sh 7% preferred of "Z" Co )	(b) Date acquired (mo , day, yr )	(c) Date sold (mo , day, yr )	(d) Sales price (see page 4 of the instructions)	(e) Cost or other basis (see page 4 of the instructions)	(f) Gain or (loss) Subtract (e) from (d)
6a 5.87 GNMA PL #506969 7.000% 6/15/29	08/04/1999	04/15/2009	6.00	6.00	
200. AFFILIATED COMPUTER SVCS INC CL A	01/04/2008	05/04/2009	9,533.00	9,666.00	-133.00
200. GARMIN LTD ORD	07/13/2004	05/07/2009	4,306.00	3,537.00	769.00
1228.468 VANGUARD GROWTH INDEX FD #9	03/25/2003	05/11/2009	26,486.00	25,849.00	637.00
318.57 FHLMC GD PL #E95374 5.000% 3/01/18	10/14/2003	05/15/2009	319.00	324.00	-5.00
2.06 GNMA PL #392344 7.500% 7/15/24	10/04/1996	05/15/2009	2.00	2.00	
47.39 GNMA PL #416515 6.000% 3/15/14	03/08/1999	05/15/2009	47.00	47.00	
45.98 GNMA PL #421309 7.000% 4/15/11	10/04/1996	05/15/2009	46.00	46.00	
5.91 GNMA PL #506969 7.000% 6/15/29	08/04/1999	05/15/2009	6.00	6.00	
664.89 FHLMC GD PL #E95374 5.000% 3/01/18	10/14/2003	06/15/2009	665.00	675.00	-10.00
2.07 GNMA PL #392344 7.500% 7/15/24	10/04/1996	06/15/2009	2.00	2.00	
49.68 GNMA PL #416515 6.000% 3/15/14	03/08/1999	06/15/2009	50.00	49.00	1.00
46.26 GNMA PL #421309 7.000% 4/15/11	10/04/1996	06/15/2009	46.00	46.00	
6. GNMA PL #506969 7.000% 6/15/29	08/04/1999	06/15/2009	6.00	6.00	
138.178 FEDERATED MORTGAGE FUND-INST	05/22/2008	06/30/2009	1,349.00	1,358.00	-9.00
144.651 METROPOLITAN WEST T/R BOND-I	05/22/2008	06/30/2009	1,325.00	1,403.00	-78.00
244.379 VANGUARD S/T INVEST GR-INV	04/01/2008	06/30/2009	2,500.00	2,590.00	-90.00
472.84 FHLMC GD PL #E95374 5.000% 3/01/18	10/14/2003	07/15/2009	473.00	480.00	-7.00
2.09 GNMA PL #392344 7.500% 7/15/24	10/04/1996	07/15/2009	2.00	2.00	
178.04 GNMA PL #416515 6.000% 3/15/14	03/08/1999	07/15/2009	178.00	177.00	1.00
46.55 GNMA PL #421309 7.000% 4/15/11	10/04/1996	07/15/2009	47.00	47.00	
6.04 GNMA PL #506969 7.000% 6/15/29	08/04/1999	07/15/2009	6.00	6.00	
751.36 FHLMC GD PL #E95374 5.000% 3/01/18	10/14/2003	08/15/2009	751.00	763.00	-12.00
2.1 GNMA PL #392344 7.500% 7/15/24	10/04/1996	08/15/2009	2.00	2.00	
44.64 GNMA PL #416515 6.000% 3/15/14	03/08/1999	08/15/2009	45.00	44.00	1.00

**6b Total.** Combine the amounts in column (f). Enter here and on Schedule D, line 6b . . . . .

Name of estate or trust as shown on Form 1041 Do not enter name and employer identification number if shown on the other side					Employer identification number 61-6042014
<b>Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year</b>					
(a) Description of property (Example 100 sh 7% preferred of "Z" Co )	(b) Date acquired (mo , day, yr )	(c) Date sold (mo , day, yr )	(d) Sales price (see page 4 of the instructions)	(e) Cost or other basis (see page 4 of the instructions)	(f) Gain or (loss) Subtract (e) from (d)
6a 46.84 GNMA PL #421309 7.000% 4/15/11	10/04/1996	08/15/2009	47.00	47.00	
6.13 GNMA PL #506969 7.000% 6/15/29	08/04/1999	08/15/2009	6.00	6.00	
674.74 FHLMC GD PL #B95374 5.000% 3/01/18	10/14/2003	09/15/2009	675.00	685.00	-10.00
2.12 GNMA PL #392344 7.500% 7/15/24	10/04/1996	09/15/2009	2.00	2.00	
240.26 GNMA PL #416515 6.000% 3/15/14	03/08/1999	09/15/2009	240.00	239.00	1.00
47.14 GNMA PL #421309 7.000% 4/15/11	10/04/1996	09/15/2009	47.00	47.00	
6.06 GNMA PL #506969 7.000% 6/15/29	08/04/1999	09/15/2009	6.00	6.00	
192.503 FEDERATED MORTGAGE FUND-INST	06/10/2008	09/18/2009	1,896.00	1,854.00	42.00
225. LOWES COS INC COM	12/28/2007	09/18/2009	4,896.00	5,134.00	-238.00
425. MYLAN INC	02/07/2008	09/18/2009	6,689.00	6,252.00	437.00
425. NOKIA CORP SPNSD ADR	06/24/2008	09/18/2009	6,639.00	8,758.00	-2,119.00
475. SEALED AIR CORP NEW	06/24/2008	09/18/2009	9,716.00	11,654.00	-1,938.00
150. UNITED TECHNOLOGIES CORP	08/26/2008	09/18/2009	9,380.00	6,418.00	2,962.00
100. WALT DISNEY COMPANY	09/10/2002	09/22/2009	2,820.00	2,172.00	648.00
75. ILLINOIS TOOL WORKS	12/15/2006	09/22/2009	3,293.00	2,378.00	915.00
425. TEXAS INSTRUMENTS	08/26/2008	09/22/2009	10,077.00	13,020.00	-2,943.00
175. WALMART STORES INC	08/23/2007	09/22/2009	8,925.00	7,651.00	1,274.00
125. WELLS FARGO & CO	05/20/2008	09/22/2009	3,663.00	3,631.00	32.00
350. WESTERN UNION	08/06/2007	09/22/2009	7,113.00	6,928.00	185.00
150. FPL GROUP INC	04/10/2001	09/23/2009	8,097.00	4,098.00	3,999.00
200. HOME DEPOT INC	06/24/2008	09/23/2009	5,526.00	5,354.00	172.00
177.936 GOLDMAN SACHS M/C VALUE-INST #864	06/24/2008	09/30/2009	4,972.00	6,415.00	-1,443.00
95.493 HARBOR INTERNATIONAL L FUND #11	12/19/2007	09/30/2009	5,026.00	5,441.00	-415.00
100. INTEL CORP	03/02/2007	09/30/2009	1,924.00	1,851.00	73.00
375. NEWELL RUBBERMAID INC	06/24/2008	09/30/2009	5,821.00	6,718.00	-897.00
<b>6b Total. Combine the amounts in column (f). Enter here and on Schedule D, line 6b . . . . .</b>					

Name of estate or trust as shown on Form 1041 Do not enter name and employer identification number if shown on the other side					Employer identification number
CLYDE E BUCKLEY WILDLIFE SANCTUARY TRUST					61-6042014

**Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year**

(a) Description of property (Example 100 sh 7% preferred of "Z" Co )	(b) Date acquired (mo , day, yr )	(c) Date sold (mo , day, yr )	(d) Sales price (see page 4 of the instructions)	(e) Cost or other basis (see page 4 of the instructions)	(f) Gain or (loss) Subtract (e) from (d)
<b>6a</b> 453.995 VANGUARD INTERNATIONAL GROWTH #81	12/17/2007	09/30/2009	7,527.00	10,350.00	-2,823.00
609.24 FHLMC GD PL #E95374 5.000% 3/01/18	10/14/2003	10/15/2009	609.00	619.00	-10.00
2.13 GNMA PL #392344 7.500% 7/15/24	10/04/1996	10/15/2009	2.00	2.00	
41.92 GNMA PL #416515 6.000% 3/15/14	03/08/1999	10/15/2009	42.00	42.00	
47.27 GNMA PL #421309 7.000% 4/15/11	10/04/1996	10/15/2009	47.00	47.00	
6.15 GNMA PL #506969 7.000% 6/15/29	08/04/1999	10/15/2009	6.00	6.00	
393.81 FHLMC GD PL #E95374 5.000% 3/01/18	10/14/2003	11/15/2009	394.00	400.00	-6.00
2.14 GNMA PL #392344 7.500% 7/15/24	10/04/1996	11/15/2009	2.00	2.00	
69.2 GNMA PL #416515 6.000% 3/15/14	03/08/1999	11/15/2009	69.00	69.00	
47.73 GNMA PL #421309 7.000% 4/15/11	10/04/1996	11/15/2009	48.00	48.00	
6.19 GNMA PL #506969 7.000% 6/15/29	08/04/1999	11/15/2009	6.00	6.00	
710.89 GNMA PL #392344 7.500% 7/15/24	10/04/1996	12/09/2009	732.00	710.00	22.00
1790.98 GNMA PL #416515 6.000% 3/15/14	03/08/1999	12/09/2009	1,845.00	1,782.00	63.00
380.25 GNMA PL #421309 7.000% 4/15/11	10/04/1996	12/09/2009	392.00	381.00	11.00
1920.75 GNMA PL #506969 7.000% 6/15/29	08/04/1999	12/09/2009	1,978.00	1,878.00	100.00
325. INTEL CORP	08/03/2006	12/11/2009	6,503.00	5,677.00	826.00
509.41 FHLMC GD PL #E95374 5.000% 3/01/18	10/14/2003	12/15/2009	509.00	517.00	-8.00
2.12 GNMA PL #392344 7.500% 7/15/24	10/04/1996	12/15/2009	2.00	2.00	
42.52 GNMA PL #416515 6.000% 3/15/14	03/08/1999	12/15/2009	43.00	42.00	1.00
48.03 GNMA PL #421309 7.000% 4/15/11	10/04/1996	12/15/2009	48.00	48.00	
6.3 GNMA PL #506969 7.000% 6/15/29	08/04/1999	12/15/2009	6.00	6.00	
558.132 VANGUARD S/T INVEST GR-INV	05/22/2008	12/23/2009	5,922.00	5,910.00	12.00
305.188 FEDERATED MORTGAGE FUND-INST	05/22/2008	12/30/2009	3,003.00	3,000.00	3.00
328.283 METROPOLITAN WEST T/R BOND-I	05/22/2008	12/30/2009	3,257.00	3,184.00	73.00

**6b Total.** Combine the amounts in column (f). Enter here and on Schedule D, line 6b . . . . . -24,320.00

Schedule D-1 (Form 1041) 2009

## FORM 990EZ, PART I - INVESTMENT INCOME

## DESCRIPTION

DIVIDEND INCOME	29,632.
INTEREST INCOME	1,004.
 TOTAL	 30,636.

## CLYDE E BUCKLEY WILDLIFE SANCTUARY TRUST

61-6042014

## FORM 990EZ, PART I - OTHER REVENUE

DESCRIPTION	BUSINESS CODE	AMOUNT	EXCLUSION CODE	AMOUNT	RELATED OR EXEMPT FUNCTION INCOME
PARTSHIP INC NET					
TOBACCO QUOTA PYMT					
GIFT SHOP INCOME					
 TOTALS					

PARTSHIP INC NET  
TOBACCO QUOTA PYMT  
GIFT SHOP INCOME

TOTALS

659.  
811.  
500.

1,970.

CLYDE E BUCKLEY WILDLIFE SANCTUARY TRUST  
FORM 990EZ, PART I - GRANTS AND SIMILAR AMOUNTS PAID OVER \$5,000

=====

61-6042014

RECIPIENT NAME:  
NATIONAL AUDUBON SOCIETY  
ATTENTION: WAYNE MONES

ADDRESS:  
225 VARICK STREET 7TH FL  
NEW YORK, NY 10014

RELATIONSHIP:  
NONE

AMOUNT OF GRANT PAID ..... 67,493.

TOTAL GRANTS PAID OVER \$5,000: 67,493.

=====

STATEMENT 3

## FORM 990EZ, PART I - OTHER EXPENSES

OTHER EXPENSES	4,792.
DEPRECIATION	2,161.
 TOTAL	 6,953.

## FORM 990EZ, PART I - OTHER INCREASES IN FUND BALANCES

TOBACCO LITIGATION SETTLEMENT ADJUSTMENT	3,773.
ROUNDING	1.
 TOTAL	 3,774.

## FORM 990EZ, PART I - OTHER DECREASES IN FUND BALANCES

MUTUAL FUND ADJUSTMENT	96.
PURCHASE ACCRUED INTEREST	522.
BOOK VALUE ADJUSTMENT	6.
PARTNERSHIP INCOME ADJUSTMENT	659.
 TOTAL	 1,283.

## FORM 990EZ, PART II - CASH, SAVINGS AND INVESTMENTS

DESCRIPTION	BEGINNING OF YEAR	END OF YEAR
SAVINGS	15,913.	2,950.
INVESTMENTS - SECURITIES	935,597.	863,161.
TOTALS	951,510.	866,111.

FORM 990EZ, PART III - ORGANIZATION'S PRIMARY EXEMPT PURPOSE

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OPERATION OF THE CLYDE E. BUCKLEY WILDLIFE SANCTUARY

STATEMENT 8

FORM 990EZ, PART III - STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS

=====

GRANTS AND  
ALLOCATIONS

=====

DESCRIPTION

=====

CONTRIBUTIONS TO NATIONAL AUDUBON SOCIETY FOR OPERATION OF  
THE BUCKLEY WILDLIFE SANCTUARY

67,493.

TOTAL

67,493.

=====

CLYDE E BUCKLEY WILDLIFE SANCTUARY TRUST

61-6042014

FORM 990EZ, PART IV - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

=====

OFFICER NAME:

COMMUNITY TRUST & INVESTMENT CO.

ADDRESS:

100 EAST VINE STREET, 5TH FLOOR  
LEXINGTON, KY 40507

TITLE:

TRUSTEE

COMPENSATION ..... 9,706.

TOTAL COMPENSATION: 9,706.

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STATEMENT 10

OTHER STATES WHERE FORM 990EZ IS FILED

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KY

STATEMENT 11

FORM 990EZ, PART V, LINE 42a - BOOKS ARE IN THE CARE OF  
=====

NAME: COMMUNITY TRUST AND INVESTMENT COMPANY

ADDRESS: 100 EAST VINE STREET, 5TH FL  
LEXINGTON, KY 40507

TELEPHONE NUMBER: (606) 389-5300

STATEMENT 12

## SCHEDULE A, PART I (h) - INFORMATION ABOUT SUPPORTED ORGANIZATIONS

=====

NAME OF SUPPORTED ORGANIZATION:

NATIONAL AUDUBON SOCIETY

EIN: 13-1624102

TYPE OF ORGANIZATION FROM PART I: 11A

IS THE ORGANIZATION LISTED IN GOVERNING DOCUMENT?: NO

DID YOU NOTIFY THE ORGANIZATION OF YOUR SUPPORT?: NO

IS THE ORGANIZATION ORGANIZED IN THE U.S.? : YES

AMOUNT OF SUPPORT: ..... 67,493.

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TOTAL SUPPORT: 67,493.

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## FEDERAL CAPITAL GAIN DIVIDENDS

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## SHORT-TERM CAPITAL GAIN DIVIDENDS

-----	T ROWE PRICE MID CAP GROWTH FUND #64	13.00
-----	TOTAL SHORT-TERM CAPITAL GAIN DIVIDENDS	13.00
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STATEMENT 1