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# Return of Private Foundation

## or Section 4947(a)(1) Nonexempt Charitable Trust

### Treated as a Private Foundation

OMB No 1545-0052

2009

Department of the Treasury  
Internal Revenue Service

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

For calendar year 2009, or tax year beginning

, 2009, and ending

, 20

G Check all that apply:

Initial return

Initial return of a former public charity

Final return

Amended return

Address change

Name change

Use the IRS  
label.Otherwise,  
print  
or type.See Specific  
Instructions.

Name of foundation

CHADWICK FOUNDATION

Number and street (or P.O. box number if mail is not delivered to street address)

P.O. BOX 486

Room/suite

City or town, state, and ZIP code

SODA SPRINGS ID 83276-0486

A Employer identification number

82-0456503

B Telephone number (see instructions)

(208) 547-2166

C If exempt application is pending, check here

D 1. Foreign organizations, check here

2. Foreign organizations meeting the 85% test, check here and attach computation

E If private foundation status was terminated under section 507(b)(1)(A), check here

F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here

H Check type of organization

☒ Section 501(c)(3) exempt private foundation☐ Section 4947(a)(1) nonexempt charitable trust☐ Other taxable private foundation

I Fair market value of all assets at end of year (from Part II, col (c), line 16)

&gt;\$ 1,128,311

J Accounting method:

☒ Cash☐ Accrual☐ Other (specify)

(Part I, column (d) must be on cash basis)

**Part I Analysis of Revenue and Expenses**

(The total of amounts in columns (b), (c), &amp; (d) may not necessarily equal the amounts in column (a) (see instructions))

(a) Revenue and expenses per books

(b) Net investment income

(c) Adjusted net income

(d) Disbursements for charitable purposes (cash basis only)

1	Contributions, gifts, grants, etc., received (attach schedule)	50,000			
2	Check <input type="checkbox"/> if the foundation is <b>not</b> required to attach Sch. B				
3	Interest on savings and temp cash investments	2,590	2,590		
4	Dividends and interest from securities	31,757	31,757		
5 a	Gross rents	8,188	8,188		
b	Net rental income or (loss)	8,188			
6 a	Net gain/(loss) from sale of assets not on line 10				
b	Gross sales price for all assets on line 6a				
7	Capital gain net income (from Part IV, line 2)		0		
8	Net short-term capital gain			0	
9	Income modifications			0	
10 a	Gross sales less returns & allowances	0			
b	Less Cost of goods sold				
c	Gross profit or (loss) (attach schedule)				
11	Other income (attach schedule) #1	85	85		
12	Total. Add lines 1 through 11	92,620	42,620	0	
13	Compensation of officers, directors, trustees, etc.	18,500	4,625		13,875
14	Other employee salaries and wages				
15	Pension plans, employee benefits				
16 a	Legal fees (attach schedule) #2	125			125
b	Accounting fees (attach schedule) #3	905			905
c	Other professional fees (attach schedule)				
17	Interest				
18	Taxes (attach schedule) (see instructions)				
19	Depreciation (attach sch.) and depletion	4,731			
20	Occupancy				
21	Travel, conferences, and meetings				
22	Printing and publications				
23	Other expenses (attach schedule) #5	5,756	1,751		4,005
24	Total operating and administrative expenses. Add lines 13 through 23	30,017	6,376	0	18,910
25	Contributions, gifts, grants paid	30,925			30,925
26	Total exp. & disbursements. Add lines 24 and 25	60,942	6,376	0	49,835
27	Subtract line 26 from line 12				
a	Excess of revenue over expenses and disbursements	31,678			
b	Net investment income (if neg, enter -0-)		36,244		
c	Adjusted net income (if neg, enter -0-)			0	

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

Form 990-PF (2009)

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See inst.)		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value		
ASSETS	1	Cash -- non-interest-bearing	...	2,319	1,110	1,110
	2	Savings and temporary cash investments		341,739	57,303	57,304
	3	Accounts receivable				
		Less allowance for doubtful accts				
	4	Pledges receivable				
		Less allowance for doubtful accts				
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see the instructions)				
	7	Other notes and loans receivable (attach schedule)				
		Less allowance for doubtful accounts				
	8	Inventories for sale or use				
	9	Prepaid expenses and deferred charges				
	10a	Investments -- U.S. and state govt obligations (attach sch)				
	b	Investments -- corporate stock (attach schedule) #6	1,036,510	1,015,677	451,542	
	c	Investments -- corporate bonds (attach schedule)				
	LIABILITIES	11	Investments -- land, buildings, and equipment basis	559,729		
		Less accumulated depreciation (attach schedule)	4,731	68,470	554,998	476,368
12		Investments -- mortgage loans				
13		Investments -- other (attach schedule) #8	40,359	141,987	141,987	
14		Land, buildings, and equipment basis				
		Less accumulated depreciation (attach schedule)				
15		Other assets (describe)				
16		Total assets (to be completed by all filers -- see the instructions. Also, see page 1, item I)	1,489,397	1,771,075	1,128,311	
17		Accounts payable and accrued expenses				
18		Grants payable				
FUNDS	19	Deferred revenue				
	20	Loans from officers, directors, trustees, and other disqualified persons #9		100,000		
	21	Mortgages and other notes payable (attach schedule) #10		150,000		
	22	Other liabilities (describe)				
	23	Total liabilities (add lines 17 through 22)	0	250,000		
FUNDS	Foundations that follow SFAS 117, check here <input type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.					
	24	Unrestricted				
	25	Temporarily restricted				
	26	Permanently restricted				
	Foundations that do not follow SFAS 117, ck. here <input checked="" type="checkbox"/> and complete lines 27 through 31.					
	27	Capital stock, trust principal, or current funds				
	28	Paid-in or capital surplus, or land, bldg, and equipment fund				
	29	Retained earnings, accumulated income, endowment, or other funds	1,489,397	1,521,075		
	30	Total net assets or fund balances (see the instructions)	1,489,397	1,521,075		
	31	Total liabilities and net assets/fund balances (see the inst.)	1,489,397	1,771,075		

## Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year -- Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	1,489,397
2	Enter amount from Part I, line 27a	2	31,678
3	Other increases not included in line 2 (itemize)	3	
4	Add lines 1, 2, and 3	4	1,521,075
5	Decreases not included in line 2 (itemize)	5	
6	Total net assets or fund balances at end of year (line 4 minus line 5) -- Part II, column (b), line 30	6	1,521,075

**Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co.)	(b) How acquired P -- Purchase D -- Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a			
b			
c			
d			
e			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a			
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
a			
b			
c			
d			
e			

2 Capital gain net income or (net capital loss)	<div style="border: 1px solid black; padding: 2px;">           If gain, also enter in Part I, line 7            If (loss), enter -0- in Part I, line 7         </div>	2	0
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) (see the instructions) If (loss), enter -0- in Part I, line 8		3	0

**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

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

☐ Yes ☒ No

If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year, see the instructions before making any entries

(a) Base period years Calendar year (or tax year beg. in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2008	57,312	991,205	0.057821
2007	47,152	1,166,152	0.040434
2006	32,598	1,286,860	0.025331
2005	49,884	1,062,386	0.046955
2004	32,957	1,029,056	0.032026

2 Total of line 1, column (d)	2	0.202567
3 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	3	0.040513
4 Enter the net value of noncharitable-use assets for 2009 from Part X, line 5	4	865,136
5 Multiply line 4 by line 3	5	35,049
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	362
7 Add lines 5 and 6	7	35,411
8 Enter qualifying distributions from Part XII, line 4.	8	49,835

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. See the Part VI instructions.

**Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 -- see the instructions)**

1 a Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of ruling letter if necessary -- see instructions)			
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b		1	362
c 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-)		2	0
3 Add lines 1 and 2		3	362
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		4	0
5 <b>Tax based on investment income.</b> Subtract line 4 from line 3 If zero or less, enter -0-		5	362
6 Credits/Payments			
a 2009 estimated tax payments and 2008 overpayment credited to 2009	6a	900	
b Exempt foreign organizations -- tax withheld at source	6b	845	
c Tax paid with application for extension of time to file (Form 8868)	6c		
d Backup withholding erroneously withheld	6d		
7 Total credits and payments. Add lines 6a through 6d	7	1,745	
8 Enter any <b>penalty</b> for underpayment of estimated tax Check here <input type="checkbox"/> if Form 2220 is attached	8		
9 <b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b>	9		
10 <b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b>	10	1,383	
11 Enter amount of line 10 to be <b>Credited to 2010 estimated tax</b> <b>Refunded</b>	11		

**Part VII-A Statements Regarding Activities**

	Yes	No
1 a 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?		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)? If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.		X
c Did the foundation file <b>Form 1120-POL</b> for this year?		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation <b>\$</b> 0 (2) On foundation managers <b>\$</b> 0		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers <b>\$</b> 0		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities		X
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		X
4 a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		X
b If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?	N/A	
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T		X
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 remain in the governing instrument?	X	
7 Did the foundation have at least \$5,000 in assets at any time during the yr? If "Yes," complete Part II, col (c), & Part XV	X	
8 a Enter the states to which the foundation reports or with which it is registered (see the instructions) <b>NONE</b>		
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		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		X
10 Did any persons become substantial contributors during tax year? If "Yes," attach a schedule listing their names and addresses		X

**Part VII-A Statements Regarding Activities** (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address <u>N/A</u>	13	X	
14	The books are in care of <u>See attachment #11</u> Telephone no <u></u> Located at <u></u> ZIP+4 <u></u>			
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 <u>15</u>			

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required**

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

	Yes	No
1a During the year did the foundation (either directly or indirectly)		
(1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see the instructions)? Organizations relying on a current notice regarding disaster assistance check here <input type="checkbox"/>	1b	X
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2009? <input type="checkbox"/>	1c	X
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))		
a At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2009? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years <u>20</u> , <u>20</u> , <u>20</u> , <u>20</u>		
b Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement -- see the instructions) <input type="checkbox"/>	2b	X
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here <u>20</u> , <u>20</u> , <u>20</u> , <u>20</u>		
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2009) <input type="checkbox"/>	3b	X
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? <input type="checkbox"/>	4a	X
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2009? <input type="checkbox"/>	4b	X

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required** (continued)

<b>5a</b> During the year did the foundation pay or incur any amount to				
(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
(3) Provide a grant to an individual for travel, study, or other similar purposes?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
(4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see instructions)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>b</b> If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see the instructions)?	N/A <input type="checkbox"/>	<b>5b</b>		
Organizations relying on a current notice regarding disaster assistance check here	<input type="checkbox"/>			
<b>c</b> If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?	N/A <input type="checkbox"/> Yes <input type="checkbox"/> No			
If "Yes," attach the statement required by Regulations section 53.4945–5(d).				
<b>6a</b> Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		<b>6b</b>		X
If "Yes" to 6b, file Form 8870				
<b>7a</b> At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>b</b> If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?		<b>7b</b>		X

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors****1 List all officers, directors, trustees, foundation managers and their compensation (see the instructions).**

(a) Name and address	(b) Title, and avg hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred comp	(e) Expense account, other allowances
See attachment #12				

**2 Compensation of five highest-paid employees (other than those included on line 1 -- see the instructions). If none, enter "NONE."**

(a) Name and address of each employee paid more than \$50,000	(b) Title, and avg hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

Total number of other employees paid over \$50,000 0

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors** (continued)**3 Five highest-paid independent contractors for professional services (see the instructions). If none, enter "NONE."**

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		

Total number of others receiving over \$50,000 for professional services . . . . . ▶

**Part IX-A Summary of Direct Charitable Activities**

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1	
2	
3	
4	

**Part IX-B Summary of Program-Related Investments** (see the instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	
2	
All other program-related investments. See the instructions.	
3	
<b>Total.</b> Add lines 1 through 3	▶



**Part X Minimum Investment Return** (All domestic foundations must complete this part. Foreign foundations, see the instructions.)

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
<b>a</b>	Average monthly fair market value of securities	<b>1a</b>	501,182
<b>b</b>	Average of monthly cash balances	<b>1b</b>	146,184
<b>c</b>	Fair market value of all other assets (see the instructions).	<b>1c</b>	480,945
<b>d</b>	<b>Total</b> (add lines 1a, b, and c)	<b>1d</b>	1,128,311
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	<b>1e</b>	
<b>2</b>	Acquisition indebtedness applicable to line 1 assets	<b>2</b>	250,000
<b>3</b>	Subtract line 2 from line 1d	<b>3</b>	878,311
<b>4</b>	Cash deemed held for charitable activities. Enter 1 1/2 % of line 3 (for greater amount, see the instructions)	<b>4</b>	13,175
<b>5</b>	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4	<b>5</b>	865,136
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5	<b>6</b>	43,257

**Part XI Distributable Amount** (see the instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

<b>1</b>	Minimum investment return from Part X, line 6	<b>1</b>	43,257
<b>2a</b>	Tax on investment income for 2009 from Part VI, line 5	<b>2a</b>	362
<b>b</b>	Income tax for 2009 (This does not include the tax from Part VI)	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b	<b>2c</b>	362
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1	<b>3</b>	42,895
<b>4</b>	Recoveries of amounts treated as qualifying distributions	<b>4</b>	
<b>5</b>	Add lines 3 and 4	<b>5</b>	42,895
<b>6</b>	Deduction from distributable amount (see the instructions)	<b>6</b>	
<b>7</b>	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	<b>7</b>	42,895

**Part XII Qualifying Distributions** (see the instructions)

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
<b>a</b>	Expenses, contributions, gifts, etc. -- total from Part I, column (d), line 26	<b>1a</b>	49,835
<b>b</b>	Program-related investments -- total from Part IX-B	<b>1b</b>	
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	<b>2</b>	
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the:		
<b>a</b>	Suitability test (prior IRS approval required)	<b>3a</b>	
<b>b</b>	Cash distribution test (attach the required schedule)	<b>3b</b>	
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	<b>4</b>	49,835
<b>5</b>	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see the instructions)	<b>5</b>	362
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4	<b>6</b>	49,473

**Note:** The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

**Part XIII Undistributed Income** (see the instructions)

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI, line 7				42,895
2 Undistributed income, if any, as of the end of 2009				
a Enter amount for 2008 only			57,312	
b Total for prior years 20____, 20____, 20____				
3 Excess distributions carryover, if any, to 2009				
a From 2004				
b From 2005				
c From 2006				
d From 2007				
e From 2008				
f Total of lines 3a through e	0			
4 Qualifying distributions for 2009 from Part XII, line 4 ▶ \$ 49,835				
a Applied to 2008, but not more than line 2a			57,312	
b Applied to undistributed income of prior years (Election required -- see the instructions)				
c Treated as distributions out of corpus (Election required -- see the instructions)				
d Applied to 2009 distributable amount				
e Remaining amount distributed out of corpus				
5 Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a) )				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5				
b Prior years' undistributed income Subtract line 4b from line 2b				
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				
d Subtract line 6c from line 6b Taxable amount -- see the instructions				
e Undistributed income for 2008. Subtract line 4a from line 2a Taxable amount -- see the instructions				
f Undistributed income for 2009 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2010				42,895
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see the instructions)				
8 Excess distributions carryover from 2004 not applied on line 5 or line 7 (see the instructions)				
9 Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a				
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				

**Part XIV Private Operating Foundations** (see instructions and Part VII-A, question 9)

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2009, enter the date of the ruling		N/A			
b Check box to indicate whether the foundation is a private operating foundation described in section		4942(j)(3) or		4942(j)(5)	
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed	Tax year	Prior 3 years			(e) Total
	(a) 2009	(b) 2008	(c) 2007	(d) 2006	
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 exempt act					
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 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 min 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 Information** (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year -- see the instructions.)

**1 Information Regarding Foundation Managers:**

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2) )  
None

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.  
None

**2 Information Regarding Contribution, Grant, Gift, Loan, 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 the 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  
See attachment 13

b The form in which applications should be submitted and information and materials they should include  
See attachment 13

c Any submission deadlines:  
See attachment 13

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors  
See attachment 13

**Part XV** Supplementary Information (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
<b>a</b> Paid during the year See attachment #14				
<b>Total</b>			<b>3a</b>	30,925
<b>b</b> Approved for future payment				
<b>Total</b>			<b>3b</b>	

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

Enter gross amounts unless otherwise indicated

	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See the instructions )
	(a) Business code	(b) Amount	(c) Excl code	(d) Amount	
1 Program service revenue					
a _____					
b _____					
c _____					
d _____					
e _____					
f _____					
g Fees & contracts from government agencies					
2 Membership dues and assessments . .					
3 Interest on savings and temporary cash investments			14	2,590	
4 Dividends and interest from securities			14	31,757	
5 Net rental income or (loss) from real estate					
a Debt-financed property			16	8,188	
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory					
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue a _____					
b See attachment #15				85	
c _____					
d _____					
e _____					
12 Subtotal Add columns (b), (d), and (e)		0		42,620	0
13 Total. Add line 12, columns (b), (d), and (e)			13	42,620	

(See worksheet in line 13 instructions to verify calculations )

**Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes**


Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes). (See the instructions )

## Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations



- |   |  |           |    |
|---|--|-----------|----|
| <b>1</b> Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?  |  | Yes       | No |
| <b>a</b> Transfers from the reporting foundation to a noncharitable exempt organization of  |  |           |    |
| (1) Cash  |  |           | X  |
| (2) Other assets  |  |           | X  |
| <b>b</b> Other transactions   |  |           |    |
| (1) Sales of assets to a noncharitable exempt organization  |  |           | X  |
| (2) Purchases of assets from a noncharitable exempt organization  |  |           | X  |
| (3) Rental of facilities, equipment, or other assets  |  |           | X  |
| (4) Reimbursement arrangements  |  |           | X  |
| (5) Loans or loan guarantees  |  |           | X  |
| (6) Performance of services or membership or fundraising solicitations  |  |           | X  |
| <b>c</b> Sharing of facilities, equipment, mailing lists, other assets, or paid employees   |  | <b>1c</b> | X  |
| <b>d</b> If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. |  |           |    |

(a) Line no	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements

- 2 a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? . . . ☐ Yes ☒ No
- b** If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship
		

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 taxpayer or fiduciary) is based on all information of which preparer has any knowledge.

SIGN HERE	 Signature of officer or trustee		Date		Title PRESIDENT	
	Preparer's signature 		Date 12/27/10		Check if self-employed <input checked="" type="checkbox"/>	
	Preparer's identifying number (see <b>Signature</b> in the instructions)		Firm's name (or yours if self-employed), address, and ZIP code GERALD L. BROWN, CPA P O BOX 378 241 SO MAIN SODA SPRINGS, ID 83276-0378		Phone no (208) 547-3305	
	Paid Preparer's Use Only					

**Schedule B**(Form 990, 990-EZ,  
or 990-PF)Department of the Treasury  
Internal Revenue Service**Schedule of Contributors**

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

OMB No 1545-0047

**2009****Name of the organization**

CHADWICK FOUNDATION

**Employer identification number**

82-0456503

**Organization type** (check one)**Filers of:****Section:**

Form 990 or 990-EZ

☐ 501(c)( ) (enter number) organization☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation☐ 527 political organization

Form 990-PF

☒ 501(c)(3) exempt private foundation☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation☐ 501(c)(3) taxable private foundationCheck if your organization is covered by the **General Rule** or a **Special Rule**.**Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.**General Rule**

- ☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

**Special Rules**

- ☐ For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- ☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- ☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year. . . ▶ \$ \_\_\_\_\_

**Caution.** An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

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

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

Name of organization

CHADWICK FOUNDATION

Employer identification number

82-0456503

**Part I** Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	CLAIR CHADWICK CLAT PO BOX 486 SODA SPRINGS ID 83276	\$ 50,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)



Attachment 1: page 1 - 990-PF Page 1, Part I, Line 11

**For calendar year 2009, or tax period beginning**

**, and ending**

Employer Identification Number

82-0456503

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**Totals**

## SCHEDULE OF LEGAL FEES

Attachment 2: page 1 - 990-PF Page 1, Part I, Line 16a

Open to Public Inspection	For calendar year 2009, or tax period beginning , and ending			
Name of Organization CHADWICK FOUNDATION			Employer Identification Number 82-0456503	
Legal Description	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charity
LEGAL FEES	125			125
Total	125			125

## SCHEDULE OF ACCOUNTING FEES

Attachment 3: page 1 - 990-PF Page 1, Part I, Line 16b

Open to Public  
Inspection

**For calendar year 2009, or tax period beginning** \_\_\_\_\_ **, and ending** \_\_\_\_\_

Name of Organization

Employer Identification Number

CHADWICK FOUNDATION

82-0456503

Accounting Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charity
ACCOUNTING FEES PAID	905			905
Total	905			905

# **SCHEDULE OF DEPRECIATION**

Attachment 4: page 1 - 990-PF Page 1, Part I, Line 19

Open to Public Inspection	For Calendar year 2009, or tax year period beginning		and ending	
Name of Organization CHADWICK FOUNDATION	Employer Identification Number 82-0456503			

Description of Property		Date Acquired	Cost or Other Basis	Prior Year Depreciation	Method of Computation	Rate
COMMERCIAL BUILDING		2009-08	491,259		SL	2.5300

		Total		491,259		
Life Years	Depreciation This Year	Net Investment Income	Acquired Net Income	Cost of Goods Sold		
	4,731					
Total	4,731					

## OTHER EXPENSES SCHEDULE

Attachment 5: page 1 990-PF Page 1, Part I, Line 23

Open to Public Inspection	For calendar year 2009, or tax period beginning , and ending			
Name of Organization CHADWICK FOUNDATION			Employer Identification Number 82-0456503	
Description of Activity	Revenue and Expenses	Net Investment Income	Adjusted Net Income	Disbursements for Charity
BANK SERVICE CHARGES	27	7		20
CONSULTING FEES	2,400	600		1,800
PRINTING & SUPPLIES	1,013	253		760
POSTAGE	700	175		525
TRAVEL COSTS	1,200	300		900
REPAIRS	416	416		
Total	5,756	1,751		4,005

## SCHEDULE OF INVESTMENTS - CORPORATE STOCKS

Attachment 6: page 1 - 990-PF Page 2, Part II, Line 10b

Open to Public Inspection	For calendar year 2009, or tax period beginning , and ending
Name of Organization CHADWICK FOUNDATION	Employer Identification Number 82-0456503

Description of Property	Cost	FMV at Year End	Book Value	Fair Market Value
AMERICAN CAPITAL LTD			134,460	12,442
ANNALY MORTGAGE			40,590	34,700
APOLLO INVESTMENT CORP			36,896	23,535
BARCLAYS BANK			100,093	52,800
CAPITAL SOURCE INC			79,029	23,820
MCG CAPITAL			119,631	34,560
MFA MORTGAGE			88,161	73,500
MISSION WEST REALTY			76,625	43,140
NOVA STAR FINANCIAL			20,628	158
PENN WEST ENERGY TRUST			27,643	26,400
RAIT INVESTMENT TRUST			105,421	6,550
RIVERVIEW BANCORP			92,731	33,600
SENIOR HOUSING PROPERTIES			18,769	21,870
NEVADA BANK & TRUST			75,000	64,467
Total			1,015,677	451,542

**SCHEDULE OF INVESTMENT LAND, BUILDINGS & EQUIPMENT**

Attachment 7: page 1 - 990-PF Page 2, Part II, Line 11

Open to Public Inspection		For Calendar year 2009, or tax year period beginning		and ending		
Name of Organization		Employer Identification Number				
CHADWICK FOUNDATION		82-0456503				
Category or Description of Property		Cost or Other Basis	Accumulated Depreciation	End of Year Book Value	Ending FML (990-PF Only)	
HOME COMMERCIAL BUILDING		68,470 491,259	4,731	68,470 486,528	34,235 442,133	
Total		559,729	4,731	554,998	476,368	

## SCHEDULE OF INVESTMENTS – OTHERS

Attachment 8: page 1 - 990-PF Page 2, Part II, Line 13

Open to Public Inspection	For calendar year 2009, or tax period beginning , and ending .	
Name of Organization CHADWICK FOUNDATION		Employer Identification Number 82-0456503

Description	Cost	FMV at Year End	Book Value	Fair Market Value
PUBLICLY TRADED PARTNERSHIPS				
NON PUBLICALLY TRADED PARTNERSHIP			91,987	91,987
			50,000	50,000
Total			141,987	141,987



# SCHEDULE OF LOANS - FROM OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

Attachment 9: page 1 - 990-PF Page 2, Part II, Line 20

Open to Public Inspection		For Calendar year 2009, or tax year period beginning				and ending	
Name of Organization		Employer Identification Number					
CHADWICK FOUNDATION		82-0456503					
Lender's Name and Title	Original Amount	Balance Due	Date of Note	Maturity Date	Repayment Terms	Interest Rate	
CLAIR CHADWICK TRUSTEE	100,000	100,000	2009-04	2014-04	ALL PRINCIPLE AND INTEREST DUE AT MATURITY BUT CAN BE REPAID EARLIER WITHOUT PENALTY	4.0000	
Total	100,000	100,000					

Security Provided by Borrower	Purpose of Loan	Description of Lender Consideration	Consideration FMV
TO PURCHASE COMMERCIAL BUILDING	CHECK		100,000
Total			100,000

Attachment 10: page 1 - 990-PF Page 2, Part II, Line 21

## and ending

Employer Identification Number

82-0456503

Officer, Director, Trustee, Key Employee

ALL PRINCIPLE AND INTEREST  
DUE AT MATURITY BUT CAN BE  
REPAID EARLIER WITHOUT  
PENALTY

4.0000

150,000

Consideration	FMV
---------------	-----

150,000

150,000

BOOKS ARE IN CARE OF

Attachment 11 - 990-PF Page 5, Part VII-A, Line 14

Open to Public Inspection	For calendar year 2009, or tax period beginning	, and ending
Name of Organization CHADWICK FOUNDATION		Employer Identification Number 82-0456503
Part VII-A - Line 14		

Individual Name . . . . . FRANK CHADWICK  
or  
Business Name

Street Address . . . . . 88 WEST SECOND SOUTH

U S Address

Zip code 83276 City SODA SPRINGS State ID  
or

Foreign Address

City . . . . .

Province or State . . . . .

Country . . . . .

Postal code . . . . .

Phone Number . . . . . (208) 547-2166

Fax Number . . . . .

# CURRENT OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

Attachment 12: page 1 - 990-PF Page 6, Part VIII

Open to Public Inspection	For calendar year 2009, or tax period beginning , and ending			
Name of Organization CHADWICK FOUNDATION			Employer Identification Number 82-0456503	
(A) Name and Address	(B) Title and Average Hrs per Week	(C) Compensation (If not paid, enter 0)	(D) Cont to Employee Ben. Plans & Def Comp	(E) Expense Account & Other Allowances
FRANK CHADWICK PO BOX 486 SODA SPRINGS, ID 83276	PRESIDENT 3.00	3,800	0	0
JOANN CHADWICK PO BOX 486 SODA SPRINGS, ID 83276	SECRETARY 3.00	3,800	0	0
NICKI JO CHADWICK PO BOX 486 SODA SPRINGS, ID 83276	TRUSTEE 3.00	3,300	0	0
MATTHEW CHADWICK PO BOX 486 SODA SPRINGS, ID 83276	TRUSTEE 3.00	3,300	0	0
GARRETT CHADWICK PO BOX 486 SODA SPRINGS, ID 83276	TRUSTEE 3.00	3,300	0	0
CLAIR CHADWICH PO BOX 486 SODA SPRINGS, ID 83276	NON VOTING EMERITUS 3.00	1,000	0	0

# APPLICATION SUBMISSION INFORMATION

Attachment 13: page 1 990-PF Page 10, Part XV, Line 2

Open to Public

For Calendar year 2009, or tax year period beginning

and ending

Name of Organization

CHADWICK FOUNDATION

Employer Identification Number

82-0456503

Name

FRANK CHADWICK  
89 WEST SECOND SOUTH  
SODA SPRINGS, ID  
83276

Phone Number

208-547-2166

Info and Materials Included

APPLICATION AVAILABLE  
UPON REQUEST

Submission Deadlines

AUGUST 31

Restrictions on Awards

# GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

Attachment 14: page 1 990-PF Page 11, Part XV Line 3a

Open to Public  
Inspection

For calendar year 2009, or tax period beginning

, and ending

Name of Organization

CHADWICK FOUNDATION

Employer Identification Number

82-0456503

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
PATTY ACKERMAN PO BOX 577 GRACE ID 83241	NONE		SCHOLARSHIP	1,000
ALLIE BROWN 26 COUNTRY BEND RD FARMINGTON UT 84025	NONE		SCHOLARSHIP	1,250
KARI BROWN 26 COUNTRY BEND RD FARMINGTON UT 84025	NONE		SCHOLARSHIP	1,250
WESLEY BROWN 553 CARIBOU STREET APT A RIGBY ID 83442	NONE		SCHOLARSHIP	1,250
WHITNEY CELLAN 2255 AMY AVE BOISE ID 83706	NONE		SCHOLARSHIP	1,250
BECHAH CONDIE 3434 N 450 E NORTH OGDEN UT 84414	NONE		SCHOLARSHIP	1,090
EMILEE COOKE 1377 E 2925 N NORTH OGDEN UT 84414	NONE		SCHOLARSHIP	1,500
DELLEN CORBETT 2136 W RIVERSIDE # 209 SPOKANE WA 99201	NONE		SCHOLARSHIP	1,500
BONNIE DANCE 2100 S 2ND AVE # 5C POCATELLO ID 83201	NONE		SCHOLARSHIP	1,250
WILLIAM DALLAS HALL 259 N 3RD W RIGBY ID 83442	NONE		SCHOLARSHIP	1,250
GAVEN HEMMERT 341 N 2ND E SODA SPRINGS ID 83276	NONE		SCHOLARSHIP	1,000
J CHRIS JACOBS 111 W 7TH S APT 203 REXBURG ID 83440	NONE		SCHOLARSHIP	1,250
ALESHA KAY JOLLEY 1398 1/2 N 800 E SHELLEY ID 83274	NONE		SCHOLARSHIP	1,250
CHAMAE KIMBALL PO BOX 191 GRACE ID 83241	NONE		SCHOLARSHIP	1,250
HAILEE KIMBALL 2100 S 2ND AVE BUILDING 3 APT 4 REXBURG ID 83440	NONE		SCHOLARSHIP	1,250
KEVIN PECK 1432 W 3605 S	NONE		SCHOLARSHIP	

18,590

## GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

Attachment 14: page 2 990-PF Page 11, Part XV Line 3a

Open to Public Inspection For calendar year 2009, or tax period beginning , and ending

Name of Organization CHADWICK FOUNDATION Employer Identification Number 82-0456503

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
WEST VALLEY CITY UT 84119 HAIDEN SIEPERT 1214 BAILEY CREEK CIRCLE SODA SPRINGS ID 83276	NONE		SCHOLARSHIP	1,250
JASON G STODDARD 2646 CATSKILL CT IOWA CITY IA 52245	NONE		SCHOLARSHIP	1,000
AMERICAN CANCER SOCIETY 250 WILLIAMS ST ATLANTA GA 30303	NONE		CHARITABLE PURPOSES OF ORGANIZATION	1,250 250
BHHOA PO BOX 159 SODA SPRINGS ID 83276	NONE		CHARITABLE PURPOSES OF ORGANIZATION	975
CMH AUXILLARY 300 S 3RD W SODA SPRINGS ID 83276	NONE		CHARITABLE PURPOSES OF ORGANIZATION	2,000
CMH FOUNDATION 300 S 3RD W SODA SPRINGS ID 83276	NONE		CHARITABLE PURPOSES OF ORGANIZATION	250
CHESTERFIELD FOUNDATION 2526 KELLY TOPONCE RD BANCROFT ID 83217	NONE		CHARITABLE PURPOSES OF ORGANIZATION	250
INTERMOUNTAIN RETT SYNDROME FOUNDAT 4600 DEVITT DR CINCINNATI OH 45246	NONE		CHARITABLE PURPOSES OF ORGANIZATION	1,500
JOB'S DAUGHTERS 330 ROSE AVE SODA SPRINGS ID 83276	NONE		CHARITABLE PURPOSES OF ORGANIZATION	138
MAIN STREET CRUISERS 640 W HWY 30 SODA SPRINGS ID 83276	NONE		CHARITABLE PURPOSES OF ORGANIZATION	500
LIONS CLUB 855 HILLSIDE DR GREEN RIVER WY 82935	NONE		CHARITABLE PURPOSES OF ORGANIZATION	250
SODA SPRINGS HIGH SCHOOL GOLF CLUB 250 E 2ND S SODA SPRINGS ID 83276	NONE		CHARITABLE PURPOSES OF ORGANIZATION	500
SODA SPRINGS ROTARY CLUB PO BOX 154 SODA SPRINGS ID 83276	NONE		CHARITABLE PURPOSES OF ORGANIZATION	250
SOUTHEAST IDAHO SHRINE CLUB 240 ASHLAND DRIVE SODA SPRINGS ID 83276	NONE		CHARITABLE PURPOSES OF ORGANIZATION	250
CARIBOU MEMORIAL HOSPITAL 300 S 3RD W	NONE		CHARITABLE PURPOSES OF	
				10,613

Attachment 14: page 3 990-PF Page 11, Part XV Line 3a

**For calendar year 2009, or tax period beginning**

**, and ending**

**Employer Identification Number**  
82-0456503

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1,722



# SCHEDULE OF OTHER REVENUE

Attachment 15: page 1 - 990-PF Page 12, Part XVI-A, Line 11

Open to Public Inspection	For calendar year 2009, or tax period beginning , and ending
Name of Organization CHADWICK FOUNDATION	Employer Identification Number 82-0456503

Item	Program Service Revenue	Unrelated business income		Excluded by section 512, 513 or 514		(e) Related or exempt function income (see instructions)
		(a) business code	(b) Amount	(c) Excl. code	(d) Amount	
a	TAX REFUND				930	
b	LESS FOREIGN TAX WITHHELD AT SOURCE				-845	
Totals					85	

# Depreciation and Amortization

## (Including Information on Listed Property)

OMB No. 1545-0172

2009

Attachment  
Sequence No. 67Department of the Treasury  
Internal Revenue Service (99)

▶ See separate instructions.

▶ Attach to your tax return.

Name(s) shown on return

CHADWICK FOUNDATION

Business or activity to which this form relates

DO NOT CARRY

Identifying number

82-0456503

**Part I Election To Expense Certain Property Under Section 179**

Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount See the instructions for a higher limit for certain businesses	1	\$250,000
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	\$800,000
4	Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1 If zero or less, enter -0- If married filing separately, see instructions	5	250,000
6	(a) Description of property	(b) Cost (busn use only)	(c) Elected cost
7	Listed property Enter the amount from line 29	7	
8	Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2008 Form 4562	10	
11	Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	250,000
12	Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2010 Add lines 9 and 10, less line 12	13	

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.

**Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions)**

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	

**Part III MACRS Depreciation (Do not include listed property) (See instructions)****Section A**

17	MACRS deductions for assets placed in service in tax years beginning before 2009	17	
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here		

**Section B -- Assets Placed In Service During 2009 Tax Year Using the General Depreciation System**

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depr (business/investment use only -- see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs		S/L	
h Residential rental property			27 5 yrs	MM	S/L	
			27 5 yrs	MM	S/L	
i Nonresidential real property	08-2009	491,259	39 yrs	MM	S/L	4,731
				MM	S/L	

**Section C -- Assets Placed In Service During 2009 Tax Year Using the Alternative Depreciation System**

20a Class life					S/L	
b 12-year			12 yrs		S/L	
c 40-year			40 yrs	MM	S/L	

**Part IV Summary (See instructions)**

21	Listed property. Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 Enter here and on the appropriate lines of your return. Partnerships and S corporations -- see instructions	22	4,731
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.

Form 4562 (2009)