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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 ,

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 WALKLING MEMORIAL TRUST		A Employer identification number 94-3166048
	Number and street (or P O box number if mail is not delivered to street address) Room/suite PO BOX 1588		B Telephone number (see the instructions) (360) 582-3801
	City or town State ZIP code PORT ANGELES WA 98362		C If exemption application is pending, check here ☐
			D 1 Foreign organizations, check here ☐ 2 Foreign organizations meeting the 85% test, check here and attach computation ☐
H Check type of organization: ☒ Section 501(c)(3) exempt private foundation ☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation			E If private foundation status was terminated under section 507(b)(1)(A), check here ☐
I Fair market value of all assets at end of year (from Part II, column (c), line 16) \$ 2,221,526.			F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ☐
J Accounting method ☒ Cash ☐ Accrual ☐ Other (specify) _____ (Part I, column (d) must be on cash basis)			

Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see the instructions))		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
REVENUE	1 Contributions, gifts, grants, etc., received (att sch)				
	2 Ck ☐ if the foundn is not req to att Sch B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities	61,697.	61,697.		
	5a Gross rents				
	b Net rental income or (loss)				
	6a 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				
	9 Income modifications				
10a Gross sales less returns and allowances					
b Less Cost of goods sold					
c Gross profit/(loss) (att sch)					
11 Other income (attach schedule)					
12 Total. Add lines 1 through 11	61,697.	61,697.			
ADMINISTRATIVE AND OPERATING EXPENSES	13 Compensation of officers, directors, trustees, etc.				
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)				
	b Accounting fees (attach sch)	3,595.	3,595.		
	c Other prof fees (attach sch)	2,190.	2,190.		
	17 Interest				
	18 Taxes (attach schedule) (see instr) TAXES & LICENSES	972.	457.	515.	
	19 Depreciation (attach sch) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule) See Line 23 Stmt	29,785.	29,375.	410.	
	24 Total operating and administrative expenses. Add lines 13 through 23	36,542.	35,617.	925.	
	25 Contributions, gifts, grants paid	60,852.			60,852.
26 Total expenses and disbursements. Add lines 24 and 25	97,394.	35,617.	925.	60,852.	
27 Subtract line 26 from line 12:					
a Excess of revenue over expenses and disbursements	-35,697.				
b Net investment income (if negative, enter -0-)		26,080.			
c Adjusted net income (if negative, enter -0-)			0.		

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)		Beginning of year	End of year	
				(a) Book Value	(b) Book Value	(c) Fair Market Value
A S S E T S	1	Cash — non-interest-bearing		11,319.	13,594.	13,594.
	2	Savings and temporary cash investments		74,843.	36,255.	36,255.
	3	Accounts receivable				
		Less: allowance for doubtful accounts				
	4	Pledges receivable				
		Less: allowance for doubtful accounts				
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see the instructions)				
	7	Other notes and loans receivable (attach sch)				
		Less: allowance for doubtful accounts				
	8	Inventories for sale or use				
	9	Prepaid expenses and deferred charges				
	10a	Investments — U.S. and state government obligations (attach schedule) L-10a Stmt		53,179.	8,504.	9,458.
	b	Investments — corporate stock (attach schedule) L-10b Stmt		9,512.	0.	0.
	c	Investments — corporate bonds (attach schedule) L-10c Stmt		140,172.	140,378.	176,896.
	11	Investments — land, buildings, and equipment: basis				
		Less: accumulated depreciation (attach schedule)				
	12	Investments — mortgage loans				
	13	Investments — other (attach schedule) L-13 Stmt		2,468,200.	2,118,158.	1,973,954.
	14	Land, buildings, and equipment: basis				
		Less: accumulated depreciation (attach schedule)				
	15	Other assets (describe L-15 Stmt)		0.	11,373.	11,369.
	16	Total assets (to be completed by all filers—see instructions. Also, see page 1, item I)		2,757,225.	2,328,262.	2,221,526.
L I A B I L I T I E S	17	Accounts payable and accrued expenses				
	18	Grants payable		76,237.	13,316.	
	19	Deferred revenue				
	20	Loans from officers, directors, trustees, & other disqualified persons				
	21	Mortgages and other notes payable (attach schedule)				
	22	Other liabilities (describe)				
	23	Total liabilities (add lines 17 through 22)		76,237.	13,316.	
F U N D A S S E T B A L A N C E S		Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. ☒				
	24	Unrestricted		2,680,988.	2,314,946.	
	25	Temporarily restricted				
	26	Permanently restricted				
		Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. ☐				
	27	Capital stock, trust principal, or current funds				
	28	Paid-in or capital surplus, or land, building, and equipment fund				
	29	Retained earnings, accumulated income, endowment, or other funds				
	30	Total net assets or fund balances (see the instructions)		2,680,988.	2,314,946.	
	31	Total liabilities and net assets/fund balances (see the instructions)		2,757,225.	2,328,262.	

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	2,680,988.
2	Enter amount from Part I, line 27a	2	-35,697.
3	Other increases not included in line 2 (itemize)	3	
4	Add lines 1, 2, and 3	4	2,645,291.
5	Decreases not included in line 2 (itemize) LONG TERM CAPITAL LOSS	5	330,345.
6	Total net assets or fund balances at end of year (line 4 minus line 5)— Part II, column (b), line 30	6	2,314,946.

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 shares MLC Company)		(b) How acquired P — Purchase D — Donation	(c) Date acquired (month, day, year)	(d) Date sold (month, day, year)
1 a SEE ATTACHED SCHEDULE		P	Various	Various
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 1,077,801.		1,408,146.	-330,345.
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(i) Gains (Column (h) gain minus column (k), but not less than -0-) or Losses (from column (h))
(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column (i) over column (j), if any	
a			-330,345.
b			
c			
d			
e			

2 Capital gain net income or (net capital loss)	— [If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7]	2	-330,345.
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	

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 beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (column (b) divided by column (c))
2008	42,960.	2,306,357.	0.018627
2007	80,225.	2,859,193.	0.028059
2006	80,505.	2,618,697.	0.030742
2005	72,722.	2,065,873.	0.035202
2004	66,400.	2,149,216.	0.030895

2 Total of line 1, column (d)	2	0.143525
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	0.028705
4 Enter the net value of noncharitable-use assets for 2009 from Part X, line 5	4	1,901,423.
5 Multiply line 4 by line 3	5	54,580.
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	261.
7 Add lines 5 and 6	7	54,841.
8 Enter qualifying distributions from Part XII, line 4	8	60,852.

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 ☐ and enter 'N/A' on line 1 Date of ruling or determination letter: _____ (attach copy of letter if necessary - see instr.)		1	261.
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here ☒ and enter 1% of Part I, line 27b			
c All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, column (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	261.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		4	0.
5 Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-		5	261.
6 Credits/Payments			
a 2009 estimated tax pmts and 2008 overpayment credited to 2009	6a		
b Exempt foreign organizations— tax withheld at source	6b		
c Tax paid with application for extension of time to file (Form 8868)	6c	0.	
d Backup withholding erroneously withheld	6d		
7 Total credits and payments Add lines 6a through 6d	7		0.
8 Enter any penalty for underpayment of estimated tax Check here ☐ if Form 2220 is attached	8		
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9		261.
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10		0.
11 Enter the amount of line 10 to be Credited to 2010 estimated tax ☐ Refunded ☐	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)? <i>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.</i>		X
c Did the foundation file Form 1120-POL 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 ☐ \$ _____ (2) On foundation managers ☐ \$ _____		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ☐ \$ _____		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? <i>If 'Yes,' attach a detailed description of the activities.</i>		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? <i>If 'Yes,' attach a conformed copy of the changes</i>		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 Form 990-T for this year?		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? <i>If 'Yes,' attach the statement required by General Instruction T</i>		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 year? <i>If 'Yes,' complete Part II, column (c), and Part XIV</i>	X	
8 a Enter the states to which the foundation reports or with which it is registered (see the instructions) ☐		
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 <i>General Instruction G</i> ? <i>If 'No,' attach explanation</i>	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)? <i>If 'Yes,' complete Part XIV</i>		X
10 Did any persons become substantial contributors during the tax year? <i>If 'Yes,' attach a schedule listing their names and addresses</i>		X

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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>BURWELL & WOLFE, PS</u> Telephone no. <u>(360) 452-1500</u> Located at <u>734 E FIRST, SUITE A</u> <u>PORT ANGELES WA</u> ZIP + 4 <u>98362</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
1 a During the year did the foundation (either directly or indirectly):		
(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	☐ Yes ☒ No	
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	☐ Yes ☒ No	
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	☐ Yes ☒ No	
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	☐ Yes ☒ 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)?	☐ Yes ☒ No	
(6) Agree to pay money or property to a government official? Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days)	☐ Yes ☒ 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 ☐	1 b	
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?	1 c	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? If 'Yes,' list the years <u>20__</u> , <u>20__</u> , <u>20__</u> , <u>20__</u>	☐ Yes ☒ No	
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer 'No' and attach statement— see the instructions)	2 b	
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>		
3 a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	☐ Yes ☒ 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? <i>Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2009</i>	3 b	
4 a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4 a	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?	4 b	X

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Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)**5a** 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))?

☐ Yes ☒ No

(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?

☐ Yes ☒ No

(3) Provide a grant to an individual for travel, study, or other similar purposes?

☐ Yes ☒ 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)

☐ Yes ☒ 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?

☐ Yes ☒ No**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 instructions)?

Organizations relying on a current notice regarding disaster assistance check here

☐**5b****c** 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?☐ Yes ☐ No

If 'Yes,' attach the statement required by Regulations section 53.4945-5(d).

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?☐ Yes ☒ No**b** Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

If 'Yes' to 6b, file Form 8870

6b**X****7a** At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?☐ Yes ☒ No**b** If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?**7b****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 instructions).

(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
VICKI CORSON 301 LOPEZ PT. ANGELES WA 98362	CHAIRMAN 5.00	0.	0.	0.
CHARLES TURNER 1129 E FRONT PT. ANGELES WA 98362	SECRETARY 5.00	0.	0.	0.
LINDA DEBORD 1309 E 7TH PT. ANGELES WA 98362	DIRECTOR 2.00	0.	0.	0.
See Information about Officers, Directors, Trustees, Etc.		0.	0.	0.

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

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				
0				
0				
0				
0				

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

None

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 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

None

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 CHARITABLE GRANT FOR MEDICAL RELATED ACTIVITIES LOCATED IN CLALLAM COUNTY WASHINGTON THROUGH CCPS	3,352.
2 EDUCATIONAL COLLEGE SCHOLARSHIPS PAID TO GRADUATES OF PORT ANGELES HIGH SCHOOL AND OUTLYING AREAS (17 STUDENTS TOTAL)	17,000.
3 CHARITABLE GRANTS TO NON-PROFIT ORGANIZATIONS IN CLALLAM COUNTY, WA (6 ORGANIZAITONS) TO ASSIST WITH NEW PROGRAMS AND CAPITAL IMPROVEMENTS	15,000.
4 EDUCATIONAL SCHOLARSHIPS PAID TO GRADUATES OF PORT ANGELES HIGH SCHOOL FOR MEDICAL RELATED ACADEMIC PROGRAMS	25,500.

Part IX-B Summary of Program-Related Investments (see 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 instructions	
3	
Total. Add lines 1 through 3	

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

1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a Average monthly fair market value of securities	1a	1,917,922.
b Average of monthly cash balances	1b	12,457.
c Fair market value of all other assets (see instructions)	1c	
d Total (add lines 1a, b, and c)	1d	1,930,379.
e Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	
2 Acquisition indebtedness applicable to line 1 assets	2	
3 Subtract line 2 from line 1d	3	1,930,379.
4 Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	28,956.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,901,423.
6 Minimum investment return. Enter 5% of line 5	6	95,071.

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

1 Minimum investment return from Part X, line 6		1	95,071.
2a Tax on investment income for 2009 from Part VI, line 5	2a	261.	
b Income tax for 2009 (This does not include the tax from Part VI)	2b		
c Add lines 2a and 2b		2c	261.
3 Distributable amount before adjustments. Subtract line 2c from line 1		3	94,810.
4 Recoveries of amounts treated as qualifying distributions		4	
5 Add lines 3 and 4		5	94,810.
6 Deduction from distributable amount (see instructions)		6	
7 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1		7	94,810.

Part XII Qualifying Distributions (see instructions)

1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a Expenses, contributions, gifts, etc.— total from Part I, column (d), line 26	1a	60,852.
b Program-related investments— total from Part IX-B	1b	
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3 Amounts set aside for specific charitable projects that satisfy the		
a Suitability test (prior IRS approval required)	3a	
b Cash distribution test (attach the required schedule)	3b	
4 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	60,852.
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions)	5	261.
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	60,591.

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

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Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI, line 7				94,810.
2 Undistributed income, if any, as of the end of 2009.				
a Enter amount for 2008 only			0.	
b Total for prior years: 20__, 20__, 20__				
3 Excess distributions carryover, if any, to 2009.				
a From 2004	66,400.			
b From 2005	72,722.			
c From 2006	80,505.			
d From 2007	80,225.			
e From 2008	42,960.			
f Total of lines 3a through e	342,812.			
4 Qualifying distributions for 2009 from Part XII, line 4: ▶ \$ 60,852.				
a Applied to 2008, but not more than line 2a				
b Applied to undistributed income of prior years (Election required — see instructions)				
c Treated as distributions out of corpus (Election required — see instructions)				
d Applied to 2009 distributable amount				
e Remaining amount distributed out of corpus	60,852.			
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	403,664.			
b Prior years' undistributed income. Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
d Subtract line 6c from line 6b Taxable amount — see instructions		0.		
e Undistributed income for 2008. Subtract line 4a from line 2a. Taxable amount — see instructions			0.	
f Undistributed income for 2009 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2010				94,810.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions)				
8 Excess distributions carryover from 2004 not applied on line 5 or line 7 (see instructions)	66,400.			
9 Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a	337,264.			
10 Analysis of line 9				
a Excess from 2005	72,722.			
b Excess from 2006	80,505.			
c Excess from 2007	80,225.			
d Excess from 2008	42,960.			
e Excess from 2009	60,852.			

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

N/A

- 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

- 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

[illegible]

- b** 85% of line 2a

- c** Qualifying distributions from Part XII,
line 4 for each year listed

- d**
- Amounts included in line 2c not used directly for active conduct of exempt activities

- e** Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c

- 3** Complete 3a, b, or c for the alternative test relied upon

- a 'Assets' alternative test – enter

- (1) Value of all assets

- (2) Value of assets qualifying under section 4942(j)(3)(B)(i)**

- b** 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed

- c 'Support' alternative test— enter

- (1)** Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)

- (2)** Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)

- (3) Largest amount of support from an exempt organization**

- (4) Gross investment income**

Part XV **Supplementary Information** (Complete this part only if the organization had \$5,000 or more in assets at any time during the year – see 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 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

KAREN YAKOVICH

PO BOX 1588

PORT ANGELES

WA 98362

(360) 582-3801

- b** The form in which applications should be submitted and information and materials they should include

SEE STATEMENT

- c Any submission deadlines:

SEE STATEMENT

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

SEE STATEMENT

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
a Paid during the year				
FAMILY PLANNING OF CLALLAM COUNTY 1106 E FIRST ST ANGELES WA 98362		NA	PROGRAM SUPPORT	3,500.
FRIENDS OF CLALLAM BAY LIBRARY PO BOX 106 CLALLAM BAY WA 98326		NA	PROGRAM SUPPORT	2,500.
HEALTHY FAMILIES OF CLALLAM COUNTY 1210 EAST FRONT ST PT. ANGELES WA 98362		NA	PROGRAM SUPPORT	5,000.
PORT ANGELES EDUCATION ASSOC PO BOX 787 PT. ANGELES WA 98362		NA	PROGRAM SUPPORT	4,000.
FAMILY PLANNING OF CLALLAM COUNTY 1106 EAST FIRST PT. ANGELES WA 98362		NA	PROGRAM SUPPORT	2,000.
FIRST STEP FAMILY SUPPORT CENTER 325 E 6TH ST PT ANGELES WA 98362		NA	SUPPORT PROGRAM	1,352.
SCHOLARSHIPS VARIOUS STUDENTS PT ANGELES WA 98362		NA	SCHOLARSHIPS	42,500.
Total			3a	60,852.
b Approved for future payment				
Total			3b	

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated

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) Exclu- sion code	(d) Amount	
1 Program service revenue					
a					
b					
c					
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments					
4 Dividends and interest from securities			14	61,697.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income					
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					
c					
d					
e					
12 Subtotal. Add columns (b), (d), and (e)				61,697.	
13 Total. Add line 12, columns (b), (d), and (e)				13	61,697.

(See worksheet in the instructions for line 13 to verify calculations.)

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

[illegible]

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

WALKLING MEMORIAL TRUST

Employer identification number

94-3166048

Organization type (check one)

Filers of:

Form 990 or 990-EZ

Section:

- ☐ 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 foundation

Check 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)/170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of ☒ \$5,000 or ☐ 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 **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 their 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).

BAA 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

Employer identification number

WALKLING MEMORIAL TRUST

94-3166048

Part I Contributors (see instructions)

(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	NONE ----- NA ----- NA -----	\$-----	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution)
---	----- ----- ----- -----	\$-----	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution)
---	----- ----- ----- -----	\$-----	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution)
---	----- ----- ----- -----	\$-----	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution)
---	----- ----- ----- -----	\$-----	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution)
---	----- ----- ----- -----	\$-----	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution)
---	----- ----- ----- -----	\$-----	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution)

Form 990-PF, Page 1, Part I, Line 23

Line 23 Stmt

Other expenses:	Rev/Exp Book	Net Inv Inc	Adj Net Inc	Charity Disb
SUPPLIES & POSTAGE	340.		340.	
POST OFFICE BOX	70.		70.	
INVESTMENT MGMT FEES	29,375.	29,375.		
Total	29,785.	29,375.	410.	

Form 990-PF, Page 6, Part VIII, Line 1

Information about Officers, Directors, Trustees, Etc.

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
Person ☒ Business ☐ REX SPRINGER 1701 E FOURTH PT. ANGELES WA 98362	DIRECTOR 2.00	0.	0.	0.
Person ☒ Business ☐ TOM ANDERSON 325 W 15TH PT. ANGELES WA 98362	DIRECTOR 2.00	0.	0.	0.

Total

0. 0. 0.

Form 990-PF, Page 2, Part II, Line 10a

L-10a Stmt

Line 10a - Investments - US and State Government Obligations:	End of Year		End of Year	
	State and Local Obligations Book Value	State and Local Obligations FMV	US Government Obligations Book Value	US Government Obligations FMV
SEE ATTACHED LISTING			8,504.	9,458.

Total

8,504. 9,458.

Form 990-PF, Page 2, Part II, Line 10b

L-10b Stmt

Line 10b - Investments - Corporate Stock:	End of Year	
	Book Value	Fair Market Value
SEE ATTACHED LISTING	0.	0.

Form 990-PF, Page 2, Part II, Line 10b

Continued

L-10b Stmt

Line 10b - Investments - Corporate Stock:	End of Year	
	Book Value	Fair Market Value
Total	<u>0.</u>	<u>0.</u>

Form 990-PF, Page 2, Part II, Line 10c

L- 10c Stmt

Line 10c - Investments - Corporate Bonds:	End of Year	
	Book Value	Fair Market Value
SEE ATTACHED LISTING	140,378.	176,896.
Total	<u>140,378.</u>	<u>176,896.</u>

Form 990-PF, Page 2, Part II, Line 13

L-13 Stmt

Line 13 - Investments - Other:	End of Year	
	Book Value	Fair Market Value
MUTUAL FUNDS - SEE ATTACHED LISTING	2,118,158.	1,973,954.
Total	<u>2,118,158.</u>	<u>1,973,954.</u>

Form 990-PF, Page 2, Part II, Line 15

Other Assets Stmt

Line 15 - Other Assets:	Beginning Year Book Value	End of Year	
		Book Value	Fair Market Value
INVESTMENT TRUSTS	0.	11,373.	11,369.
Total	<u>0.</u>	<u>11,373.</u>	<u>11,369.</u>

Walking Memorial Trust

Detail of Investments Held

For the Year Ending December 31, 2009

No of Shares	Name	Cost Basis	Fair Market Value
Mutual Funds			
6302.521	Franklin Income Fund	15,000	13,046
277 856	Capital World Growth	12,214	9,386
4740.196	Franklin Income Fund C	12,236	9,907
616.282	Loomis Sayles Strat Inc	8,767	8,548
44	Gabelli Equity trust	325	222
2824 793	William Blair Intl	79,573	53,530
2157 579	Buffalo Small Cap	42,000	48,502
1146 288	Calamos Growth	42,000	50,964
2910 876	Calamos Growth & Income	86,729	81,679
1315 571	Capital Inc Builder	77,314	63,003
3820 677	Capital Word Growth & Income	150,193	129,979
10022 653	Eaton Vance Strategic Income	73,500	80,181
2050.044	Fidelity Adv Leveraged Co CI	71,880	56,848
759.703	First Eagle Global	33,779	30,472
2273 358	Growth Fund of America	74,800	61,722
2819.475	MFS Value	75,873	58,460
6339.282	Pimco Total Return	63,500	68,464
6324 954	Thompson Global Bond	73,500	80,453
36800 48	SIMT Large Cap Fund	362,285	387,141
22412 79	SIMT Us Fixed Income Fund	224,237	228,835
19993 21	SEI Internation Equity	236,216	161,145
10522 91	SIMT Small Cap Fund	102,925	109,017
13644 61	SEI Inst High Yield Bond	103,686	93,738
7750.5	SEI Emerging Markets Debt	80,913	78,047
1017.62	SEI Emerging Markets Equity	14,646	10,593
5.09	SEI Inst TR Sm Cap Val	67	72
		2,118,158	1,973,954
Corporate Bonds			
30000	Merril Lynch	29,957	60,620
30000	GE Capital	30,219	31,688
30000	Campbell Soup Co	30,119	32,400
30000	Goldman Sachs	29,885	31,523
20000	Morgan Stanley	20,198	20,665
	Total	140,378	176,896
Government Bonds			
7000	US Treasury Note	8,504	9,458
Other			
	Equity Options	73	69
	CPA-14 REIT	11,300	11,300
	Total	11,373	11,369

Walking Memorial Trust

Detail of Gains and Losses

For the Year Ending December 31, 2009

Shares	Description	How Acquired	Date Acquired	Date Sold	Sales Price	Cost Basis	Gain/ Loss
1006 594	Loomis Sayles Strategic Inc	P	5/27/2009	6/10/2006	11,999	11,336	662
117 016	Royce Value Plus Service	P	12/9/2008	6/10/2009	1,122	864	259
4880.173	Columbri Marsico 21st Cntry	P	12/17/2007	6/10/2009	45,922	71,697	(25,774)
150	Exxon Mobil Corp	P	10/5/1998	6/10/2009	11,045	4,482	6,563
10725.42	Loomis Sayles Strategic Inc	P	5/30/2008	6/10/2006	127,847	160,515	(32,668)
125	Raytheon Co	P	11/1/2004	6/10/2009	5,635	4,607	1,028
4933 585	Royce Value Plus Service	P	12/10/2007	6/10/2009	47,240	72,749	(25,508)
45000	FNMA dated 1/1/99	P	5/12/2004	1/15/2009	45,000	46,847	(1,847)
3833.607	SEI Core Fixed Income	P	Various	1/6/2009	34,426	38,834	(4,408)
595 239	SEI Large Cap Diversified	P	Various	2/10/2009	3,500	6,607	(3,107)
265 193	SEI Core Fixed Income	P	Various	2/10/2009	2,400	2,686	(286)
233.723	SEI International Equity	P	Various	2/10/2009	1,400	3,321	(1,921)
160	SEI Inst High Yield Bond	P	Various	2/10/2009	800	1,288	(488)
89 059	SEI Emerging Markets Debt	P	Various	2/10/2009	700	957	(257)
85.106	SIMT Small/Mid Cap	P	Various	2/10/2009	400	808	(408)
30.801	SEI Smal Cap	P	Various	2/10/2009	300	594	(294)
29.126	SEI Inst TR	P	Various	2/10/2009	300	513	(213)
16 863	SEI Emerging Markets Equity	P	Various	2/10/2009	100	305	(205)
2445 342	SEI Emerging Markets Debt	P	Various	4/7/2009	19,930	26,287	(6,357)
24128 436	SEI Core Fixed Income	P	Various	7/7/2009	226,083	243,538	(17,454)
735.403	SEI High Yield Bond	P	Various	7/7/2009	4,273	5,920	(1,647)
650	SEI Large Cap Diversified	P	Various	10/2/2009	4,550	7,215	(2,665)
302.619	SIMT US Fixed Income	P	Various	10/2/2009	3,120	3,026	94
236 364	SEI International Equity	P	Various	10/2/2009	1,820	3,358	(1,538)
159 509	SEI High Yield Bond	P	Various	10/2/2009	1,040	1,284	(244)
90.099	SEI Emerging Markets Debt	P	Various	10/2/2009	910	969	(59)
88 586	SIMT Small/Mid Cap	P	Various	10/2/2009	520	861	(341)
31 15	SEI Smal Cap	P	Various	10/2/2009	290	601	(311)
29.367	SEI Inst TR	P	Various	10/2/2009	390	517	(127)
13 67	SEI Emerging Markets Equity	P	Various	10/2/2009	130	248	(118)
51238 454	SEI Large Cap Diversified	P	Various	10/6/2009	361,743	528,718	(166,975)
7029.831	SIMT Small/Mid Cap	P	Various	10/6/2009	41,706	59,842	(18,136)

2333 025 SEI Inst TR	P	Various	10/6/2009	31,285	40,329	(9,044)
2062 12 SEI Smal Cap	P	Various	10/6/2009	26,104	39,447	(13,343)
19 317 SEI Core Fixed Income	P	Various	10/6/2009	193	187	6
2085 624 SEI Inst High Yield Bond	P	Various	10/6/2009	13,577	16,789	(3,212)
Totals				1,077,801	1,408,146	(330,345)

BEN AND MYRTLE WALKLING MEMORIAL TRUST

DECEMBER 31, 2009

94-3166048

STATEMENT - INFORMATION REGARDING CONTRIBUTION, GRANT, GIFT, ETC
FORM 990PF PART XV LINES 2 B - D

APPLICATION FORMS FOR CHARITABLE AND MEDICAL RELATED GRANTS ARE AVAILABLE BY
REQUEST GRANTS ARE CONSIDERED ANNUALLY

SCHOLARSHIP APPLICATIONS ARE COMPLETED WITH SCHOLARSHIP NOTEBOOKS AT THE
APPROPRIATE SCHOOL

DEADLINES FOR SUBMISSION VARIES DURING THE YEAR BASED ON THE PROGRAM

GRANTS AND SCHOLARSHIPS ARE LIMITED AS FOLLOWS

CIVIC GRANTS ARE LIMITED TO ACTIVITIES IN CLALLAM COUNTY. THE TRUST DOES NOT
FINANCE ONGOING ACTIVITIES OF LOCAL AGENCIES, ONLY SPECIAL REQUESTS AND
ONE TIME ITEMS

MEDICAL RELATED GRANTS ARE ALSO LIMITED TO THE LOCAL COUNTY

THE TRUST MAKES CERTAIN FUNDS AVAILABLE FOR EMERGENCY PURPOSES THESE
FUNDS ARE LIMITED TO CLALLAM COUNTY WASHINGTON AND ARE MADE TO HELP IN
EXTREME CIRCUMSTANCES. REQUESTS FOR EMERGENCY GRANTS CAN BE MADE AT ANY
TIME DURING THE YEAR.

THE TRUST HAS FOUR SCHOLARSHIP PROGRAMS THE PHYSICIANS COMMUNITY BENEFIT
FUND PROVIDES MEDICAL RELATED SCHOLARSHIPS TO RESIDENTS OF CLALLAM COUNTY
THE VOCATIONAL SCHOLARSHIP FUND PROVIDES VOCATIONAL SCHOLARSHIPS TO
GRADUATES OF PORT ANGELES HIGH SCHOOL
THE ACADEMIC SCHOLARSHIP FUND PROVIDES ACADEMIC SCHOLARSHIPS TO
GRADUATES OF PORT ANGELES HIGH SCHOOL
THE OUTLYING SCHOLARSHIP FUND PROVIDES ACADEMIC SCHOLARSHIPS TO
GRADUATES OF OTHER CLALLAM COUNTY HIGH SCHOOLS.

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

OMB No 1545 1709

► **File a separate application for each return.**

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box ☒
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form)

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868**Part I Automatic 3-Month Extension of Time.** Only submit original (no copies needed).A corporation required to file Form 990-T and requesting an automatic 6-month extension—check this box and complete Part I only ☐

All other corporations (including 1120-C filers), partnerships, REMICS, and trusts must use Form 7004 to request an extension of time to file income tax returns

Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit www.irs.gov/efile and click on *e-file for Charities & Nonprofits*

Type or print File by the due date for filing your return. See instructions	Name of Exempt Organization	Employer identification number
	WALKLING MEMORIAL TRUST	94-3166048
	Number, street, and room or suite number. If a P.O. box, see instructions	
	PO BOX 1588	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions	
	PORT ANGELES	WA 98362

Check type of return to be filed (file a separate application for each return)

☐ Form 990	☐ Form 990-T (corporation)	☐ Form 4720
☐ Form 990-BL	☐ Form 990-T (section 401(a) or 408(a) trust)	☐ Form 5227
☐ Form 990-EZ	☐ Form 990-T (trust other than above)	☐ Form 6069
☒ Form 990-PF	☐ Form 1041-A	☐ Form 8870

- The books are in the care of ► **BURWELL & WOLFE, PS**

Telephone No. ► **(360) 452-1500** FAX No. ►

- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension will cover

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until **Aug 16**, 20 **10**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

- ☒ calendar year 20 **09** or
- ☐ tax year beginning _____, 20 _____, and ending _____, 20 _____.

2 If this tax year is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☐ Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	0.
b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	0.
c Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	0.

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

BAA For Privacy Act and Paperwork Reduction Act Notice, see instructions.Form **8868** (Rev 4-2009)

• If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only Part I and check this box ☒

Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868

• If you are filing for an **Automatic 3-Month Extension**, complete only Part I (on page 1)

Part III Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).

Type or print File by the extended due date for filing the return. See instructions.	Name of Exempt Organization	Employer identification number
	WALKLING MEMORIAL TRUST	94-3166048
	Number, street, and room or suite number. If a P.O. box, see instructions.	For IRS use only
	PO BOX 1588	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions.	
	PORT ANGELES WA 98362	

Check type of return to be filed (File a separate application for each return)

☐ Form 990	☒ Form 990-PF	☐ Form 1041-A	☐ Form 6069
☐ Form 990-BL	☐ Form 990-T (section 401(a) or 408(a) trust)	☐ Form 4720	☐ Form 8870
☐ Form 990-EZ	☐ Form 990-T (trust other than above)	☐ Form 5227	

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

• The books are in care of **BURWELL & WOLFE, PS**

Telephone No. **(360) 452-1500**

FAX No. _____

• If the organization does not have an office or place of business in the United States, check this box ☐

• If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____ If this is for the whole group, check this box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for.

4 I request an additional 3-month extension of time until **Nov 15**, 20 **10**

5 For calendar year **2009**, or other tax year beginning _____, 20____, and ending _____, 20____.

6 If this tax year is for less than 12 months, check reason. ☐ Initial return ☐ Final return ☐ Change in accounting period

7 State in detail why you need the extension **ADDITIONAL TIME IS NECESSARY TO COMPLETE INFORMATION FROM A CHANGE IN INVESTMENT BROKER RE: BASIS TO PREPARE COMPLETE AND ACCURATE RETURN.**

8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	8a \$	261.
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	8b \$	0.
c Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instrs.	8c \$	261.

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature _____

Title _____

Date _____